

## Section 1

# Use Standard Precautions with All Patients



This section describes how to:

- Identify a minimum level of Standard Precautions for use with all patients regardless of their infection status.
- Establish routine handwashing practices.
- Establish safe handling and disposal of used needles and syringes.
- Be prepared to intensify Standard Precautions and include VHF Isolation Precautions.
- Identify a VHF Coordinator to oversee and coordinate activities associated with VHF Isolation Precautions.



## Section 1

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### **1.1 Use Standard Precautions**

Health workers throughout the world are aware of the risks for transmitting human immunodeficiency virus (HIV) and hepatitis viruses in the health care setting. Many use precautions (such as wearing gloves) for preventing contact with infected blood.

Other dangerous diseases are also transmitted through contact with blood or other body fluids and pose a significant risk in the health care setting. For instance, a patient with a VHF may come to the health facility at any point in his or her illness,

- When the possibility of exposure is often highest, and
- Before the specific cause of the patient's illness is known.

Because a health worker cannot always know when a patient's body fluids are infectious, Standard Precautions<sup>2</sup> should be used with all patients in the health care setting, regardless of their infection status.

Standard Precautions are designed to prevent unprotected contact between the health care worker and

- Blood and all body fluids whether or not they contain blood
- Mucous membranes.

When a specific diagnosis is made, additional precautions are taken, based on how the disease is transmitted.<sup>3</sup>

2 See Annex 1 for more information about Standard Precautions.

3 This manual describes the Isolation Precautions to use when a patient is known to have or suspected of having a VHF. Annex 1 describes other precautions for various modes of disease transmission.

## 1.2 Establish and Maintain a Minimum Level of Standard Precautions

Limited supplies and resources may prevent a health facility from using all the Standard Precautions all the time. However, health facilities should establish and maintain a basic, practical level of Standard Precautions that can be used routinely with patients in their health facility.

At a minimum, consider the services in the health facility that present a risk of disease transmission due to potential contact with blood and all body fluids, broken skin or mucous membranes.

For health facility staff who work in such areas, establish at least:

- A source of clean water (Please see Annex 7)
- Routine handwashing before and after any contact with a patient who has fever
- Safe handling and disposal of sharp instruments and equipment, including needles and syringes.

## 1.3 Establish Routine Handwashing

***Handwashing is the most important precaution for the prevention of infections.***

Handwashing before and after contact with a patient who has fever should be a routine practice in the health facility — even when VHF is not present. Washing hands with soap and water eliminates microorganisms from the skin and hands. This provides some protection against transmission of VHF and other diseases.

In services where health care workers see patients with fever, provide at least:

- Cake soap cut into small pieces
- Soap dishes. Microorganisms grow and multiply in humidity and standing water. If cake soap is used, provide soap dishes with openings that allow water to drain away.
- Running water, or a bucket kept full with clean water

- A bucket for collecting rinse water and a ladle for dipping, if running water is not available
- One-use towels. Sharing towels can result in contamination. Use paper towels. If they are not available, provide cloth towels that can be used once and then laundered. If towels are not available, health care workers and health facility staff can air-dry their hands.



Fig. 2. An example of a handwashing station

Make sure health facility staff know the steps of handwashing:

1. Place a piece of soap in the palm of one hand.
2. Wash the opposite hand and forearm. Rub the surfaces vigorously for at least 10 seconds. Move soap to the opposite hand and repeat.
3. Use clean water to rinse both hands and then the forearms. If running water is not available, pour clean water from a bucket over the soapy hands and forearms. The rinse water should drain into another bucket.
4. Dry the hands and forearms with a clean, one-use towel. First dry the hands and then the forearms. Or let rinsed hands and forearms air-dry.

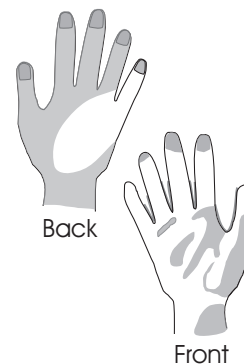


Fig. 3. The shading shows the parts of hands that are often missed during handwashing. Make sure to wash all parts of your hands: front, back, between the fingers and under nails.



## 1.4 Handle and Dispose of Sharp Instruments Safely

Disease transmission can occur through accidental needlestick injuries. Make sure health facility staff always handle sharp instruments safely. Do not recap needles after use.

Limit invasive procedures to reduce the number of injectable medications. This will limit the opportunities for accidental needlestick injuries.

When an injection *is* necessary, always use a sterile needle and sterile syringe for each injection.

**To discard disposable needles and syringes safely:** Disposable needles and syringes should be used only once. Discard the used disposable needle and syringe in a puncture-resistant container. Then burn the container in an incinerator or pit for burning.

Instructions for using incinerators and pits for burning are described in Section 6.

If puncture-resistant containers are not available, use empty water, oil, or bleach bottles made with plastic or other burnable material. Adapt them for use as puncture-resistant containers.

Detailed instructions for making a puncture-resistant container are listed in Annex 9.



Fig. 4. Standard sharps container



Fig. 5. Using plastic bottle to dispose of used needles

## 1.5 Disinfect Reusable Needles and Syringes Safely

Reusable needles and syringes are **not** recommended. If reusable needles and syringes are used, clean, disinfect and sterilize them before reuse, according to your hospital's policy.

**Note:** Needles and syringes used with VHF patients require special care. Cleaning staff should wear two pairs of gloves when handling needles and syringes used with any patient with a known or suspected VHF. See the recommendations for wearing protective clothing when handling contaminated supplies in Section 4.

## 1.6 Disinfect Disposable Needles and Syringes That Must Be Reused

**Remember!** *Whenever possible, use disposable needles and syringes only once and then discard them safely.*

In situations when disposable needles and syringes **must** be reused, make sure they are cleaned and disinfected after each use. Disinfection with bleach will reduce the risk of transmission of VHF and blood-borne diseases, such as HIV infection and viral hepatitis.

1. Obtain a jar or pan. Clean and disinfect it. Use it in Step 8 to store the disinfected needles and syringes.
2. Place the disposable needle and syringe in a pan of soapy water after use. Fill the needle and syringe with soapy water. Leave them to soak until they are cleaned.
3. Take the soaking needles and syringes to the cleaning area.
4. Clean them very carefully in soap and water. Remove any blood or other biological waste, especially from the area around the syringe fittings. Blood or other biological products may collect in these small openings.



Fig. 6. Placing the disposable needle and syringe in soapy water



5. Draw full-strength bleach into the needle and syringe.
6. Soak for 30 seconds, and then expel bleach into a container for contaminated waste.
7. Soak again by once more drawing full-strength bleach into the needle and syringe. Soak for 30 seconds, and then expel bleach into the container for contaminated waste.
8. Let the disinfected needle and syringe air-dry. Store them in a clean jar or pan that has been disinfected.

### 1.7 Use VHF Isolation Precautions

Section 2 of this manual describes how to identify a suspected case of VHF so that relevant health facility staff can begin using VHF Isolation Precautions. When a VHF is suspected, those health facility staff who will have contact with the patient or with the patient's blood or other body fluids should intensify Standard Precautions and use VHF Isolation Precautions.

***VHF Isolation Precautions:*** The VHF Isolation Precautions described in this manual have been shown to be effective in reducing the transmission of VHFs in the health care setting.

As soon as a case of VHF is suspected in the health facility, alert authorities and start VHF Isolation Precautions.



**To reduce the risk of VHF transmission in a health care setting:**

- | <b>USE VHF ISOLATION PRECAUTIONS</b> |   |
|--------------------------------------|---|
| 1.                                   | Isolate the patient.  |
| 2.                                   | Wear protective clothing in the isolation area, in the cleaning and laundry areas and in the laboratory. Wear a scrub suit, gown, apron, two pairs of gloves, mask, headcover, eyewear, and rubber boots. |
| 3.                                   | Clean and disinfect spills, waste, and reusable equipment safely.   |
| 4.                                   | Clean and disinfect soiled linens and laundry safely.   |
| 5.                                   | Use safe disposal methods for non-reusable supplies and infectious waste.   |
| 6.                                   | Provide information about the risk of VHF transmission to health facility staff. Reinforce use of VHF Isolation Precautions with all health facility staff.   |
| 7.                                   | Provide information to families and the community about prevention of VHF and care of patients.   |

Regular in-service training will strengthen skills for using VHF Isolation Precautions. When a VHF is suspected, efforts will have to be focused on providing care. There will not be enough time or opportunity to provide initial training in skills for VHF Isolation Precautions.

If health facility staff already know how to use VHF Isolation Precautions when a VHF is suspected, authorities can be alerted and VHF Isolation Precautions started without delay.

If health facility staff do not know how to use VHF Isolation Precautions when a VHF case is suspected, training will need to take place immediately.

## 1.8 Select a VHF Coordinator

Being prepared for an emergency situation can save lives. In addition to using a basic level of Standard Precautions with all patients, health facilities can also prepare in advance for situations when protective clothing, disinfection materials, and isolation procedures are needed urgently.

Many health facilities already have an emergency coordinator or emergency team who could assume the role of a “VHF Coordinator.” The “VHF Coordinator” will:

- Oversee advance preparations and ensure that health facility staff are prepared to use VHF Isolation Precautions.
- Serve as the focal point and coordinate activities when a VHF case is suspected.
- Take the lead in mobilizing the community when an urgent situation occurs.

Once a staff person is identified to serve as the VHF Coordinator, he or she can review the recommendations in this manual and begin the preparations described in Section 9. The VHF Coordinator can also encourage efforts to strengthen and reinforce the routine practice of a basic level of Standard Precautions with all patients.

***Remember! Using a minimum level of Standard Precautions routinely will prevent transmission of contagious diseases, such as HIV infection, viral hepatitis and VHF.***