



**衛生防護中心**  
Centre for Health Protection

## **Infection Control Branch**

### **Prevention of Severe Respiratory Disease associated with a Novel Infectious Agent - Infection Control Measures for Allied Health Professionals (Interim Guidelines)**

*This set of guidelines briefly describes the implementation of infection control measures for allied health professionals against Severe Respiratory Disease associated with a Novel Infectious Agent.*

#### **A. Early preparation**

##### **(a) 5 Moments for Hand Hygiene (HH)**

Staff should follow five moments to perform hand hygiene:

1. Before touching a patient
2. Before clean/aseptic procedure
3. After body fluid exposure risk
4. After touching a Patient
5. After touching patient surroundings

Clinic should be equipped with alcohol-based handrub and hand hygiene facilities, including hand-washing facilities, disposable paper towel, and covered rubbish bin. Posters on hand hygiene and relevant leaflets should be displayed in conspicuous positions to remind patients and accompanying persons to maintain hand hygiene.

## **(b) Cough Etiquette**

Public members should wear a surgical mask in all clinical areas. Visual alerts on cough etiquette should be displayed in conspicuous positions to remind patients and accompanying persons to comply with personal hygiene, such as covering mouth and nose when coughing or sneezing, and performing hand hygiene.

## **(c) Environmental Hygiene**

Maintain good environmental hygiene of the clinic. Clean with detergent at least once daily. Use 1:99 diluted household bleach (mixing 1 part of 5.25% bleach with 99 parts of water), for disinfection when necessary. For the frequently touched surfaces such as door knobs and toilet, clean at least twice daily. If surfaces are contaminated by vomitus or other body fluid, use absorbent disposable towels to wipe them away. Then, disinfect the surface and neighbouring areas with 1:49 diluted household bleach (mixing 1 part of 5.25% bleach with 49 parts of water). Moreover, maintain drainage pipes properly and regularly (about once a week) pour about half a liter of water into each drain outlet (U-traps), to ensure environmental hygiene. For details, please refer to

[https://www.chp.gov.hk/files/pdf/make\\_sure\\_the\\_trap\\_is\\_not\\_dry.pdf](https://www.chp.gov.hk/files/pdf/make_sure_the_trap_is_not_dry.pdf)

## **(d) Handling of Contaminated Medical Items and Sharps Properly**

Staff should follow the guidelines on cleaning, disinfection and sterilization when handling contaminated medical items.

Place used needles and sharps into the sharps box directly after use. For details, please refer to the following guidelines

- [“Guideline on Infection Control related to Acupuncture – Draft”](#)
- [Prevention of Sharps Injury and Mucocutaneous Exposure to Blood and Body Fluids in Healthcare Settings](#)

## **(e) Use of Personal Protective Equipment (PPE)**

The use of PPE should be based on the nature of contact and risk assessment. Staff need to doff of PPE and perform HH after each patient care.

## **B. Early Detection**

### **(a) Management of Suspected Case**

Be aware of the updated information from Centre for Health Protection (CHP). Patients presenting with fever and symptom of respiratory infection or symptoms of pneumonia should be isolated and transferred to the nearby public hospital for further management as soon as possible.

## **C. Early Isolation**

### **(a) Designated Area**

Place the suspected case in designated areas (e.g. corner of the clinic; or areas with least traffic) while waiting for transportation. Arrange a single room for isolation if feasible. The items in the room should be kept minimal.

### **(b) Record Keeping**

If there is a suspected case in clinic, keep all patient record and staff roster for contact tracing by CHP when necessary.

### **(c) Cleaning and Disinfection of Environment**

- (i) Cleaning staff should wear appropriate personal protective equipment (PPE)
- (ii) Disinfect all potential contaminated surfaces and the room of the suspected case stay with 1:49 diluted household bleach (mixing 1 part of 5.25% bleach with 49 parts water), leave for 15-30 minutes, rinse with water and keep dry.
- (iii) If the area is contaminated with blood, secretion, vomitus or excreta, disinfect with 1:4 diluted household bleach (mixing 1 part of 5.25% bleach with 4 parts of water) leave for 10 minutes, rinse with water and keep dry.

## **D. Updated Information**

Please visit the website of the Centre for Health Protection of the Department of Health for Severe respiratory disease associated with novel infectious agent at:

<https://www.chp.gov.hk/en/features/102465.html>

7 January 2020

(Last updated on 23 January 2020)