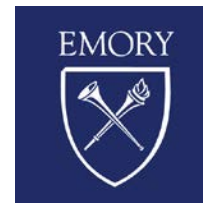
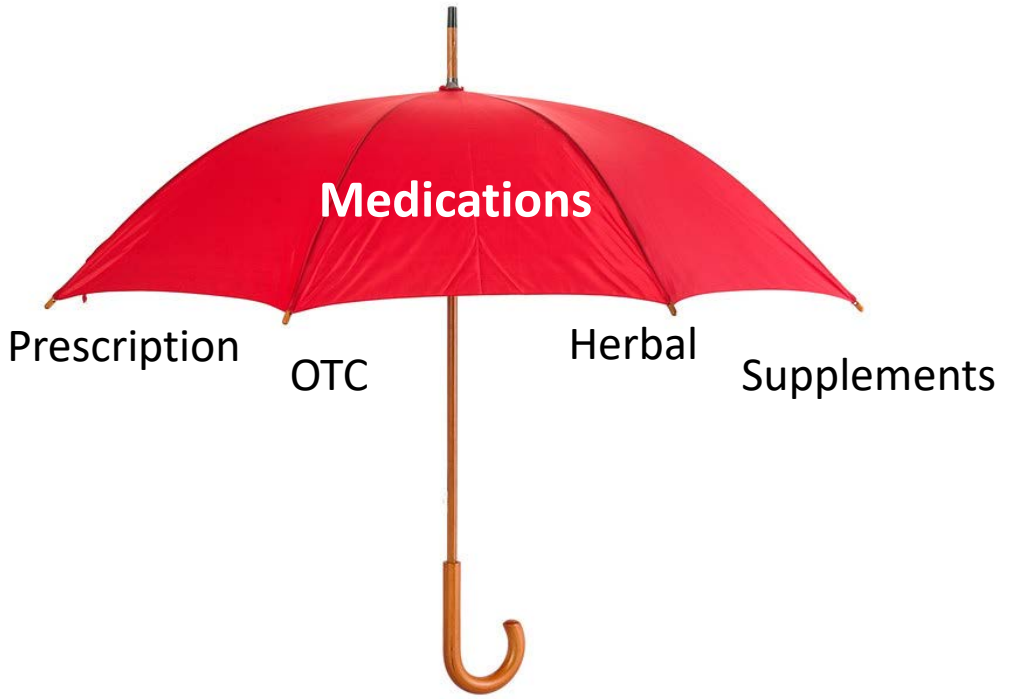


Early Detection → Better Protection

Using the **Identify-Isolate-Inform** model to protect Healthcare Workers





Gathering information in a quick and effective manner is a skill!



Identify-Isolate-Inform

Symptom screening **first**

Bad things don't just come from other places.

↓ Diagnosis ↑ Expanding the potentials list.

Would your screening have caught Kent Brantly?





Identify-Isolate-Inform

Symptom screening **first**



Who are we trying to protect?
What can we use?



Cough = Source control **Gloves, mask or respirator**

Fever = Hand hygiene, source control **Gloves, mask**

N/V/D = Hand hygiene, containment **Gloves, mask, eyes, gown**





Identify-Isolate-Inform

Closing the gap

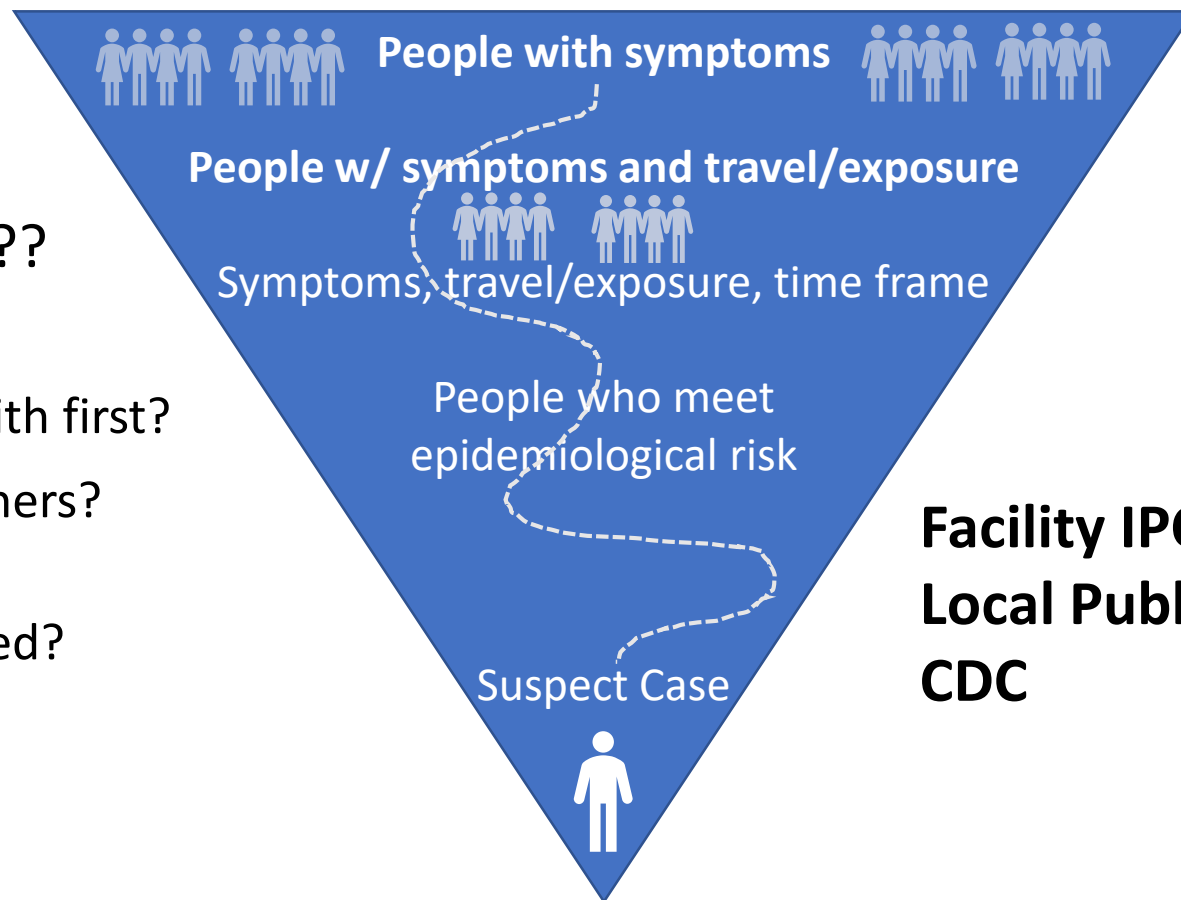
Symptoms + Travel/Exposure = ???

Who do you share your concerns with first?

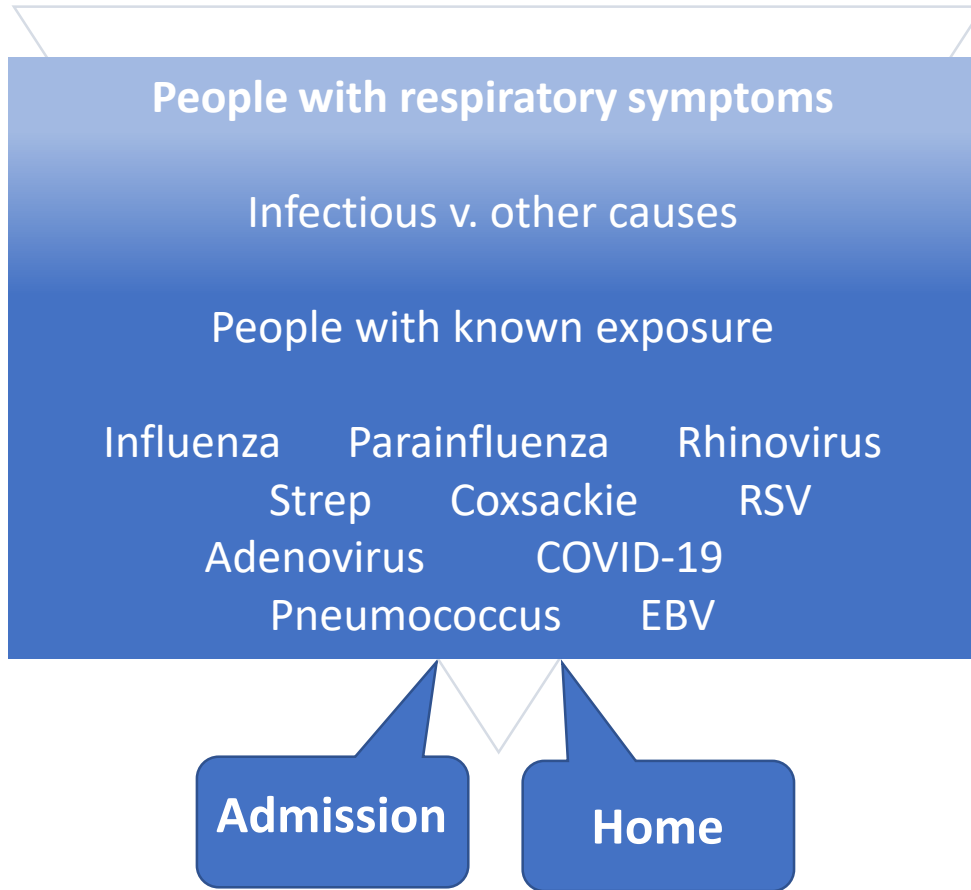
Do you have a means of alerting others?
Coding, signage, hand-off

What questions need to be answered?

What are next steps?



Using Identify-Isolate-Inform to protect HCW everyday



Index of suspicion > Diagnosis

Consider other methods for risk reduction from the hierarchy of controls



»» **Ventilation: triage area, WR, care spaces**



»» **Single-use, cover, or clean**



Face shield

»» **Mucous membrane protection includes eyes!**



»» **Intact skin, hand hygiene**

»» **PPE etiquette**



CHALLENGES

I EXPECTED TIMES LIKE THIS- BUT NEVER
THOUGHT THEY'D BE SO BAD, SO LONG, AND SO FREQUENT.

There is no *good* reason for a cough and fever.

Your super-strong, memory T-cell champion immune system, fueled by caffeine and sleeplessness, can not protect you forever.

Unless you own stock in tissues, Tylenol, and Robitussin,
we all benefit by reducing spread.

Protecting employees from harm includes protecting them from work acquired illness.

Employers and facilities must do better.

HCW should not accept as inevitable what can be avoided with proper protection.



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