



# COVID-19 Clinical Guidelines for Nursing Staff

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## I、What is COVID-19

At the end of 2019, a novel coronavirus designated as SARS-CoV-2 emerged in the city of Wuhan, China, and caused an outbreak of unusual viral pneumonia, initially designated as the Wuhan Viral Pneumonia. On the 11<sup>th</sup> of February 2020, the World Health Organization (WHO) announced the official designation for the current CoV-associated disease to be COVID-19, caused by SARS-CoV-2; and in March of 2020, the Taiwan Center of Disease Control (CDC) designated this novel viral pneumonia as a Category 5 Transmissible Disease, requiring all health care professionals to notify the CDC of any suspected or confirmed cases of COVID-19. The most common symptoms of COVID-19 are fever, dry cough, stuffy nose and runny nose.

## II、Transmission of SARS-CoV-2 Infection

It mainly occurs through close contact with respiratory particles (within about 1 meter). When the infected person coughs, sneezes or speaks, the virus released in respiratory secretions is transmitted through the following ways :

- i、Inhalation of respiratory droplets containing virus: it may increase the risk of infection in poorly ventilated indoor confined space and long exposure time (usually greater than 15 minutes).
- ii、Droplets with virus directly spray on the mucous membrane of eyes, mouth and nose.
- iii、The hand directly touches the droplets with virus, or indirectly touches the surface of the object with virus, so that the hand is polluted by virus, and then touches the mucous membrane of eyes, mouth and nose.

## III、Incubation Period

The mean incubation period (the time from exposure to symptom onset) for COVID-19 is approximately 5-6 days. Approximately 98% of individuals who develop symptoms will do so within 14 days of infection.

## IV、Diagnostic Testing

- i、Real-time reverse-transcription polymerase chain reaction，RT-PCR is the diagnostic test of choice during acute phase of infection.
- ii、Serological test may aid in diagnosis of prior exposure to SARS-CoV-2

## V、Clinical Presentations

Cough, muscle pain and headache are the most common symptoms. Other

symptoms include: fever, weakness of limbs, diarrhea, sore throat, abnormal smell and taste, dyspnea, etc. In severe cases, respiratory distress syndrome or multiple organ failure, shock, etc. About 10% of the confirmed patients continued to have the above-mentioned symptoms for 3 months after recovery from the acute phase.

#### VI · Severe risk factors

Age  $\geq$  65 years old, cancer, diabetes, chronic kidney disease, cardiovascular disease (excluding hypertension), chronic lung disease (interstitial lung disease, pulmonary embolism, pulmonary hypertension, tracheal dilatation, chronic obstructive pulmonary disease), tuberculosis, chronic liver disease (cirrhosis, nonalcoholic steatohepatitis, alcoholic liver disease and immune hepatitis), disability (attention deficit and hyperactivity disorder, cerebral palsy, birth defects, developmental or learning disabilities, spinal cord injury), psychiatric disorders (mood disorders, schizophrenia), dementia, smoking (or ex-smokers), BMI  $\geq$  30 (or BMI over the 95th percentile for children and adolescents aged 12–17), pregnancy (or six weeks postpartum) disease), diseases affecting immune function (HIV infection, congenital immune insufficiency, solid organ or blood stem cell transplantation, use of steroids or other immunosuppressants).

#### VII · Treatment

Currently, no definitive/curative treatment exist for the treatment of COVID-19, however, best practices for supportive management of acute respiratory distress should be followed, including rigorous and frequent hand-washing and proper disposal of nasopharyngeal/airway secretions.

#### VIII · Prevention Measures

- i · During illness, you should rest at home, take your temperature every morning and evening, record your temperature, health status and activity history in detail, wear medical masks, avoid going out, and keep more than 1 meter away from others as far as possible.
- ii · Immediately in-fold and dispose of medical masks when it is in contact with nasopharyngeal/airway secretions.
- iii · Maintain habits of frequent hand-washing, either with water and soap or alcohol-based hand sanitizers.
- iv · Do not touch your eyes, nose and mouth directly with your hands. If your hands touch respiratory secretions, please rub your hands with soap and water and wash your hands thoroughly.
- v · Sanitation water can be used for home environment. If the commercially available bleaching water contains about 5% sodium hypochlorite, it is recommended to dilute it with 1c. c. bleaching water and 100c. c. cold water (i.e. 1:100 dilution). It has a bactericidal function within 24 hours after dilution.
- vi · Worried that the volatilized gas of bleach water is harmful to the human body and has respiratory allergies, it is recommended to leave the scene during

disinfection and open the window for ventilation. After disinfection for 10 minutes, wash or wipe with clean water to reduce skin irritation.

- vii · There is no need for large-scale disinfection, just focus on wiping and disinfecting frequently touched items or furniture surfaces at home, such as doorknobs, tabletops, and children's toys.
- viii · Cooperate with the COVID-19 vaccination policy to enhance self-protection.
- ix · If you have any symptoms such as fever, cough or difficulty in breathing, you should first contact the Health Bureau (1922) and go to the designated medical institution in the way designated by it. It is strictly forbidden to take public transportation, and you should wear a mask when going out. And seek medical treatment in accordance with the triage mechanism established by the hospital.

If you have further questions, please do not hesitate in contacting us at MackayMemorial Hospital Healthcare Consultation Hotline: Taipei/Tamsui (02)25713760 Hsinchu (03)5745098 · Taidong (089)310150 ext #311. Available from Monday to Friday 9:00AM – 12:00PM & 2:00PM-5:00PM

**May God Bless You**