

LOCATION	ROLE	PROCESS STEP	NOTES
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ED Front Desk

Greeter/Triage Nurse

**1 PATIENT HISTORY GATHERED**  
Have you (a) traveled outside US in the last 21 days? **OR** (b) had close contact w/ a person w/ confirmed MERS Co-V in the past 14 days?

..... **NO**  
END PROTOCOL



Greeter/Triage Nurse

Does patient have **ANY** of the MERS Co-V symptoms listed to the right?

..... **NO**  
END PROTOCOL



Greeter/Triage Nurse

**2** Don/seal check N-95 respirator and gloves



Greeter/Triage Nurse

**3** Provide patient procedure mask and gloves and instructs patient to apply



If patient arrives with family member(s):

Greeter/Triage Nurse

**4 FAMILY HISTORY GATHERED**  
Does family member have **ANY** of the MERS Co-V symptoms listed above?

..... **NO**



Greeter/Triage

**5** Provide family members procedure mask and gloves and instructs on how to apply



**MERS Co-V Outbreak Areas**  
[www.cdc.gov/coronavirus/mers/](http://www.cdc.gov/coronavirus/mers/)

**Case Definition: Compatible MERS Co-V Symptoms** = fever >100.4F/38C, cough, SOB OR pneumonia/ARDS (based on clinical or radiological evidence  
[www.cdc.gov/coronavirus/mers/case-def.html](http://www.cdc.gov/coronavirus/mers/case-def.html)

**! CLOSE CONTACT**

is defined as (a) being within approximately 6 feet or within the room or care area for a prolonged period of time while not wearing recommended PPE or (b) having direct contact with infectious secretions (e.g., being coughed on) while not wearing PPE.

**Escort family to Family Conference Room**

If any family member is symptomatic, room E6 will be used as a second "Patient Room" for that individual

*Decisions on where to house asymptomatic family/friends will be left to the discretion of the Triage Nurse and be based on the needs of the patient.*

A **yes** answer initiates move to **negative air room**



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Greeter/Triage Nurse

**6** Ask ED front desk staff to call lead Nurse to (1) report positive history/symptoms and (2) check on availability of rooms E6 thru E8



Lead Nurse

Rooms E6-E8 Available?

Clear and disinfect rooms



Greeter/Triage Nurse

**7** Escort patient(s) to Room E7  
Instruct patient to (1) remain in room, (2) keep door closed and (3) an Nurse will be with you as soon as he/she has proper PPE



Lead Nurse

**8** Establish who will serve in each of the following roles: (1) Primary Nurse, (2) Task



Rooms E6-8

Lead Nurse

**9** (1) Tape "Do Not Enter" sign to patient room  
(2) Tape "Room Entry Log" to patient room  
(3) Tape "Soiled Utility" sign to approp. room



Lead Nurse



**10** Notify ED manager on call of possible MERS Co-V patient

Notify IC liaison (402.888.4646)/IC manager (402.888.2287) of possible MERS Co-V patient

See ED 24 Hour Sheet for on call manager contact information



ED Manager On Call



Notify Security of need for personnel to control entry to designated rooms.

Security to monitor entry to Isolation area round the clock



IC Manager/Liaison



**11** Notify Infection Control director of possible MERS Co-V patient



Isolation Room

Primary Nurse  
Primary Nurse  
Task Nurse  
Lead Nurse

**12** *Primary Nurse* – Picks up MERS Co-V Lab Kit and gathers MERS Co-V PPE  
*Task Nurse* – Don Level PPE for MERS Co-V  
*Lead Nurse* – Observe donning process



MERS CO-V Lab Go kits are located in Triage C.  
Gather MERS CO-V PPE:  
Yellow isolation gown  
Face shield/goggles  
2 pair gloves–(nitrile gloves as base glove; regular patient care gloves over the nitrile)  
N-95 respirator for general care  
**PAPR when performing aerosol generating procedures**

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Isolation Room

Primary Nurse

**13** Gather full set of vitals and any additional pertinent information



ER Attending  
Task Nurse

**14** Don MERS Co-V PPE  
Observe donning process



Isolation Room

ER Attending

**15** Examine/assess patient

- In the 14 days before symptom onset did the patient:
1. Travel to or from the Arabian Peninsula/ neighboring countries? If yes, which countries?
  2. Exact date of travel **to** stated area  
Exact date of travel **from** stated area
  3. Visit or work in a health care facility in the Arabian Peninsula/neighboring country? If yes, which countries? **Is the patient a health care worker?**
  4. Have close contact with an ill traveler from the Arabian Peninsula/neighboring country? If yes, which countries?
  5. **Is the patient a member of a severe respiratory illness cluster of unknown etiology?**
  6. Have close contact with a **known** MERS case? **Had close contact with a camel?**



**Logs are located in the MERS Book.**  
**All people entering room must write temp and sign in on "Room Entry Log" before each entry into the isolation room.**







Routine blood labs may be drawn at any point during encounter but must be processed for transport per MERS Co-V lab protocol.

Table 1






CLINICAL FEATURES		EPIDEMIOLOGIC RISK
<b>1) Severe illness</b> Fever <i>and</i> pneumonia or acute respiratory distress syndrome (based on clinical or radiological evidence)	AND	A history of travel from countries in or near the Arabian Peninsula within 14 days before symptom onset, or close contact with a symptomatic traveler who developed fever and acute respiratory illness (not necessarily pneumonia) within 14 days after traveling from countries in or near the Arabian Peninsula.  – or –  A member of a cluster of patients with severe acute respiratory illness (e.g., fever and pneumonia requiring hospitalization) of unknown etiology in which MERS-CoV is being evaluated, in consultation with state and local health departments in the US.
<b>2) Milder illness</b> Fever <i>or</i> symptoms of respiratory illness (not necessarily pneumonia; e.g., cough, shortness of breath)	AND	Close contact with a confirmed MERS case while the case was ill.  – or –  A history of being in a healthcare facility (as a patient, worker, or visitor) within 14 days before symptom onset in a country or territory in or near the Arabian Peninsula in which recent healthcare-associated cases of MERS have been identified.
<b>3) Milder illness</b> Fever <i>or</i> symptoms of respiratory illness (not necessarily pneumonia; e.g., cough, shortness of breath)	AND	History of travel to a country or territory in or near the Arabian Peninsula.

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LOCATION      ROLE      PROCESS STEP      NOTES

LOCATION	ROLE	PROCESS STEP	NOTES
Isolation Room		<p><b>15a</b> Patient meets clinical criteria 1 or 2 from table 1 (page 3)</p> <p>YES (red circle)      NO (green circle) →</p>	<p></p> <p>If patient meets clinical criteria 3 from table 1, order Respiratory Pathogen Panel (RPP). If RPP positive, treatment per ED attending. If RPP negative proceed to step 16.</p> <p><b>ID attending MD will notify:</b></p> <p>1) Douglas County Health Dept. Days: <b>402.444.7214</b> After 4:30 p.m.: <b>402.444.7000</b></p> <p>2) NE Public Health Lab (NPHL) 24/7 Pager <b>402.888.5588</b></p> <p>3) NBU Medical Directors Angela Hewlett, MD <b>402.250.2204</b> Ted Cieslak, MD <b>210.872.7070</b> or Associate Medical Director Dan Johnson, MD, NBU <b>402.660.9499</b></p> <p>MERS Co-V specimens for NPHL analysis must be processed per <a href="#">MERS Co-V lab draw protocol</a></p> <p><b>If specimen negative NPHL will reflex appropriate specimen to core lab for RPP if not already performed. Patient is admitted or discharged dependent on clinical picture.</b></p>
	ER Attending 	<b>16</b> Call ID attending MD for academic general ID service on call for consult (ID MD)	
	ID MD		
	ID MD 	<b>16a</b> Notifies NBU Medical Director if either clinical criteria 1 or 2 is met	
	ID MD 	<b>17</b> Arrange for lab testing	
	Primary Nurse	<b>18</b> Collect specimen/draw blood to send to NPHL per MERS Co-V protocol	
	ID MD 	Enter orders for Lab in OneChart: "Special Procedure: Other"	
	Lab 	<b>18b</b> Call and fax results to ED MD, ID MD	
		<b>19</b> MERS Co-V PCR test presumptive positive?	
		<p>YES (red circle)      NO (green circle) → <b>19b</b></p>	

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	ID MD	<b>19a</b> Notify NBU medical director of presumptive positive result 	NBU Medical Directors Angela Hewlett, MD <b>402.250.2204</b> Ted Cieslak, MD <b>210.872.7070</b> or Associate Medical Director Dan Johnson, MD, NBU <b>402.660.9499</b>
	ED Lead	<b>19b</b> Notify ED manager of presumptive positive result 	
ED Attending		<b>20</b> PUI refuses care: ED MD to call Douglas County Health Dept. 	
ED Manager On Call		<b>21</b> Notify Public Information Officer (PIO)	

Douglas County Health Dept.  
 Days: **402.444.7214**  
 After 4:30 p.m.: **402.444.7000**