

# ALGORITHM FOR INCOMING VISITORS OF UPLB (includes field/educational trips and foreign delegates) FOR INFECTION CONTROL AGAINST EMERGING DISEASES



#### VISITING PARTY

#### **UNIT'S ADMINISTRATIVE OFFICER**

Coordinator (for groups) or Individual must signify intent and purpose of visit to UPLB Issue a copy of the **DECISION TOOL PRIOR TO TRAVEL TO UPLB** and advise the coordinator of the arriving party/individual to:

- Submit the following data as a prerequisite for travel approval: (complete name, age, sex, nationality, place/country of origin, place/s or county/ies visited within the last 14 days, layover/s, date of arrival in the Philippines, date of arrival at UPLB)
- Refer to the *Decision Tool*. Any one from the group who is categorized as *Person Under Investigation (PUI) or Person Under Monitoring (PUM)* must defer travel to the Philippines (if from another country), or to UPLB (if from within the Philippines) and refer to the appropriate recommendations. Said individuals <u>MUST</u> not be included in the submitted list:
  - With travel history (including layover/s to China, Macau or Hongkong; or, contact history with a confirmed 2019-nCoV case, within the last 14 days WITH at least one (1) of the symptoms (PUI); or, without any symptom [PUM]
  - With travel history to other countries with a confirmed 2019-nCoV case within the last 14 days, and who developed at least one (1) of the symptoms [PUM)

Observe the following, during the stay at UPLB:

- 1. Review the submitted documents.
- 2. Approve the request once cleared.
- 3. Upon arrival at UPLB, issue the following to each individual:
  - Triage Questionnaire to be accomplished (to be collected by the hosting unit's AO within 24 hours upon arrival)
  - Daily Health Monitoring Sheet (for those staying beyond 24 hours)
  - Decision Tool for Individuals at the UPLB Campus
  - Quarantine Procedures\*
  - Proper Infection Control

Develops
FEVER ≥
38°C and/or
cough, colds
or difficulty
of breathing
within 14
days from
arrival

Strictly practice the following:

- Self-monitoring using the Daily Health Monitoring Sheet
- · Proper hand hygiene
- Proper sneeze and cough etiquette
- Maintain a distance of at least 1 meter from symptomatic individuals

Cleared and may proceed with regular activities

· Infection control procedures

Documents attached:

- Decision Tool <u>Prior to Travel</u>
  to UPLB
- 2. Triage Questionnaire
- 3. Daily Health Monitoring
- 4. Decision Tool <u>for Individuals</u> <u>at UPLB</u>
- 5. Quarantine Guidelines
- 6. Proper Infection Control

HOME QUARANTINE

-Person Under Monitoring (PUM)for 14 days

YES

(read Quarantine Procedures)

- Inform Unit's AO
- \*Unit's AO to submit data to UHS

Collaborative output by: Dr. Myla Lourdes R. Avena (Deputy Director), Dr. Ailah S. Jalotjot (Infectious Disease Specialist) and Dr. Jessie Imelda F. Walde (Director) for the University Health Service, Office of the Vice-Chancellor for Community Affairs, University of the Philippines Los Baños (28th January 2020, revised 4th February 2020)



## **DECISION TOOL**





## PRIOR TO TRAVEL TO THE UPLB CAMPUS

(as of February 5, 2020)

Fever	Respiratory Infection	Travel History for the past 14 days	History of	Case Category				
≥38°C	(cough AND / OR colds)	in China (includes Macau and Hongkong)	Exposure*					
+	+	+	+	14.				
+	+	+	-	1).				
+	+	-	+	-0'				
+	-	+	+	Person Under Investigation (PUI)  Wear mask and isolate.				
	+	+	+ 3	Call to inform the hospital of your choice in your				
+	-	+	c-0	area.  • Defer travel to UPLB within the next 3 weeks.				
-	+	+	-	Defer travel to 01 LD within the next 3 weeks.				
+	-	- 1X	1+					
-	+	-0	<b>∀</b> +					
-	-	(D)	+	Person for Monitoring				
-	<b>=</b> 0	No	-	<ul><li>Go on home quarantine for 14 days.</li><li>Monitor body temperature daily.</li></ul>				
-	18'	7	+	<ul> <li>Observe any signs and symptoms of respiratory infection.</li> <li>If symptoms worsen, call to inform the hospital of your choice in your area.</li> </ul>				
9	16,			Defer travel to UPLB.				

<sup>\*</sup>Exposure History includes:

Reference: RITM-Department of Health, 30 January 2020

a. close contact with a confirmed case of 2019-nCoV infection or,

b. a healthcare facility in a country where 2019-nCov infections have been reported; or,

c. visiting / working in a live animal market in Hubei province, China

d. direct contact with animals in countries with circulating 2019-nCov in human and animals



#### **UNIVERSITY HEALTH SERVICE**

Office of the Vice-Chancellor for Community Affairs U.P. Los Baños



## DAILY MONITORING SHEET FOR PATIENTS UNDER MONITORING AGAINST EMERGING DISEASES

Date of Arrival in the

Patient's Name Close Contact's Name														es 'Place	of
	,											Lay	over/	S	
Signs /	Days											Observations:			
Symptoms	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Observations:
No symptom															0.3/10
Headache															2500
Fever (indicate temperature in °C)															10,
Cough												1		3	•
Colds											-0	1	U		
Difficulty of breathing									8	1	V				<b>University Health Service</b> 049-536-3247, 536-2470 local 109



# **DECISION TOOL**





# FOR INDIVIDUALS AT THE UPLB CAMPUS

(as of February 5, 2020)

Fever	Respiratory Infection	Travel History for the past 14 days	History of	Bo				
≥38°C	(cough AND / OR colds)	in China (includes Macau and Hongkong)	Exposure*	Case Category				
+	+	+	+	0.				
+	+	+	-					
+	+	-	+	9.				
+	-	+	+	Person Under Investigation (PUI)				
-	+	+	+	<ul> <li>Immediately wear mask and isolate.</li> <li>Call the University Health Service or the hospital of</li> </ul>				
+	-	+	- 4	your choice.				
-	+	+	C-6					
+	-	- \	+					
-	+	- 14	+					
-	-	+0/	+	Person Under Monitoring (PUM)				
-	-	180	-	<ul> <li>Go on home quarantine for 14 days.</li> <li>Monitor body temperature daily.</li> </ul>				
	-·X	1/1	+	<ul> <li>Observe any signs and symptoms of respiratory infection.</li> <li>If symptoms worsen, call the University Health</li> </ul>				
	12	0		Service or the hospital of your choice.				

<sup>\*</sup>Exposure History includes:

Reference: RITM-Department of Health, 30 January 2020

a. close contact with a confirmed case of 2019-nCoV infection or,

b. a healthcare facility in a country where 2019-nCov infections have been reported; or,

c. visiting / working in a live animal market in Hubei province, China

d. direct contact with animals in countries with circulating 2019-nCov in human and animals

## QUARANTINE PROCEDURES



# There is only **ONE WAY** to properly wear your face mask.

Hold mask with the COLORED SIDE FACING OUTWARD.

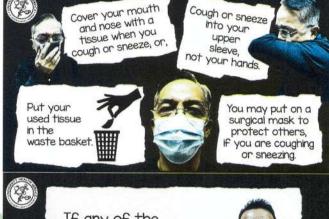
cough

etiquette.

The white side should be next to the face.

- Tie all the strings
  (for tie-on masks) or
  pull the rubber bands
  tight around the ears
  (for ear-loop masks) properly.
  Confirm that the mask is
  secure to ensure protection.
- Secure the nosepiece comfortably over the bridge of the nose by CRIMPING THE METALLIC WIRE TO PREVENT LEAKAGE.
- Pull the mask down to cover the chin. The face mask should fully cover the nose, mouth, as well as the chin.

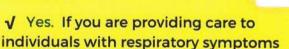






## Should you wear a mask?

√ Yes. If you have respiratory symptoms - cough, difficulty breathing



√ Yes. If you are a health worker and attending to individuals with respiratory symptoms

X NOT needed for general public who do not have respiratory symptoms



## PROPER INFECTION CONTROL









#### UNIVERSITY HEALTH SERVICE

University of the Philippines Los Baños, College, Laguna

#### TRIAGE QUESTIONNAIRE FOR U.P. LOS BAÑOS

Name (Last, First, Middle)

Date Today

With travel history <u>abroad</u> (within the last 14 days)? O YES O NO Where, including layover/s?

Exposed to somebody with travel history abroad O YES O NO (within the last 14 days)? If yes, where was the travel within the last 14 days?

Exposed to somebody who has/had 2019-nCoV? O YES O NO If the answer is YES to any of the questions, state the following:

Date of Arrival in the Philippines:

### TICK (√) ALL THE SYMPTOMS YOU HAVE

If yes, since when:
If yes, since when:

I declare that all the above

information are true and correct.

Signature of Patient

#### RECOMMENDATION/S

- ☐ Wear a medical mask. Observe proper cough and sneeze etiquette.
- □ Observe quarantine procedures.
- Proceed with your transaction.
- □ Proceed & present this form to the UHS Holding Area.

UHS HOTLINES:

Signature of Triage Staff

536-3247, 536-2470 loc 109

\*Keep this copy for documentation and future reference. (28th January 2020, revised 5th February 2020)



## UNIVERSITY HEALTH SERVICE University of the Philippines Los Baños, College, Laguna

TRIAGE QUESTI	ONNAIRE FOR U.P. LOS BAÑOS
Name (Last, First, Middle)	Date Today
With travel history abrow	nad (within the last 14 days)? O YES O NO
Exposed to somebody	with travel history abroad O YES O NO
14 days?	If yes, where was the travel within the last who has/had 2019-nCoV? O YES O NO
If the answer is YES to a Date of Arrival in the Phil	ny of the questions, state the following:
TICK (√) AL	L THE SYMPTOMS YOU HAVE
O Fever	If yes, since when:
O Headache	If yes, since when:
O Cough	If yes, since when:
O Colds	If yes, since when:
O Difficulty of breathing	If yes, since when:
I declare that all the information are true an	
RE	COMMENDATION/S
□ Wear a medical mask.	Observe proper cough and sneeze etiquette.
☐ Observe quarantine p	
Proceed with your tra	neaction

\*Keep this copy for documentation and future reference. (28th January 2020, revised 5th February 2020)

**UHS HOTLINES:** 

536-3247, 536-2470

loc 109

Proceed & present this form to the UHS Holding Area.

Signature of Triage Staff