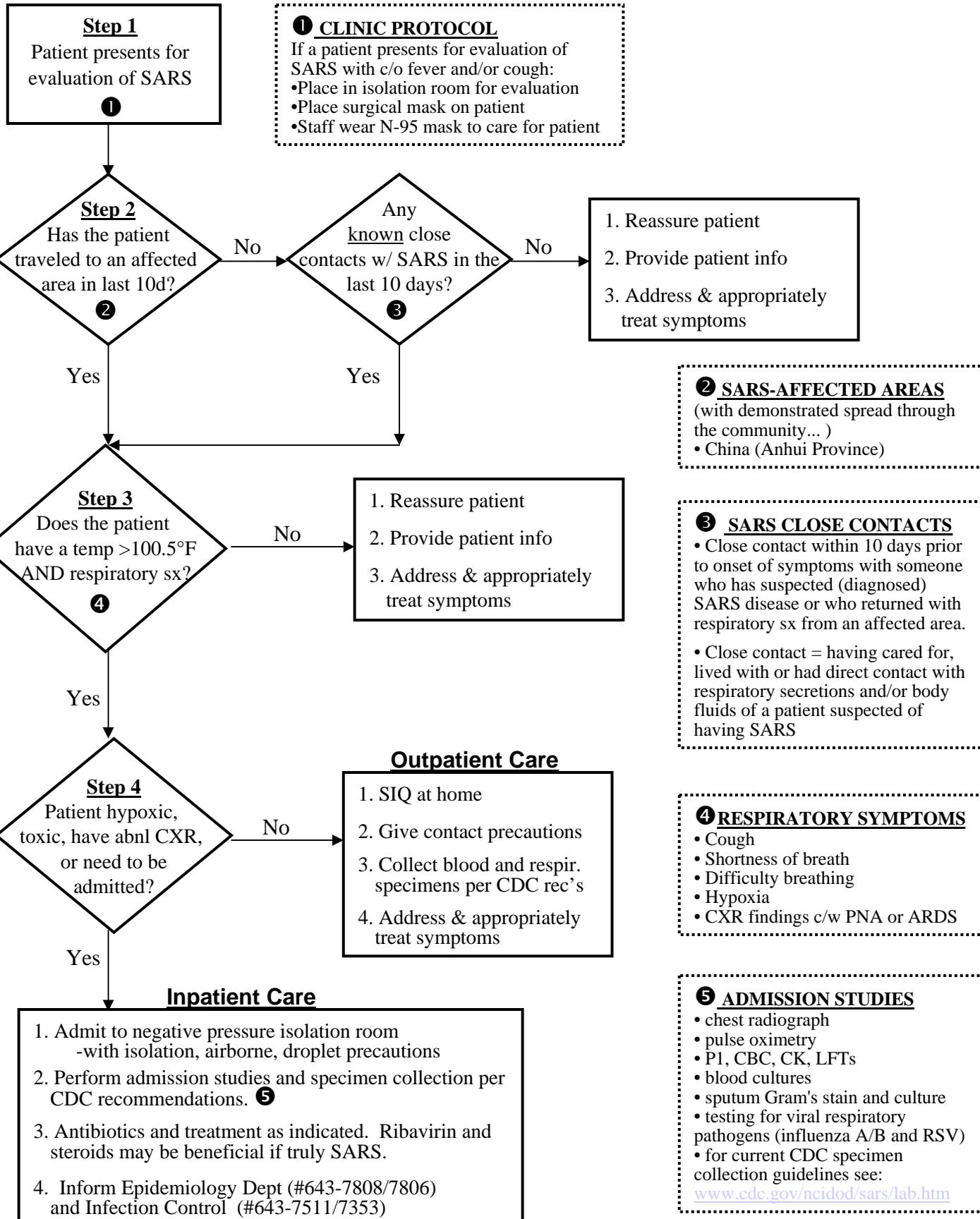


Handling a Potential SARS Patient

USNH Okinawa & Branch Medical Clinics



1 CLINIC PROTOCOL
 If a patient presents for evaluation of SARS with c/o fever and/or cough:
 •Place in isolation room for evaluation
 •Place surgical mask on patient
 •Staff wear N-95 mask to care for patient

1. Reassure patient
 2. Provide patient info
 3. Address & appropriately treat symptoms

2 SARS-AFFECTED AREAS
 (with demonstrated spread through the community...)
 • China (Anhui Province)

3 SARS CLOSE CONTACTS
 • Close contact within 10 days prior to onset of symptoms with someone who has suspected (diagnosed) SARS disease or who returned with respiratory sx from an affected area.
 • Close contact = having cared for, lived with or had direct contact with respiratory secretions and/or body fluids of a patient suspected of having SARS

4 RESPIRATORY SYMPTOMS
 • Cough
 • Shortness of breath
 • Difficulty breathing
 • Hypoxia
 • CXR findings c/w PNA or ARDS

5 ADMISSION STUDIES
 • chest radiograph
 • pulse oximetry
 • P1, CBC, CK, LFTs
 • blood cultures
 • sputum Gram's stain and culture
 • testing for viral respiratory pathogens (influenza A/B and RSV)
 • for current CDC specimen collection guidelines see:
www.cdc.gov/ncidod/sars/lab.htm