

# Kewaspadaan standar pada tatalaksana tersangka Covid-19

Ida Safitri L

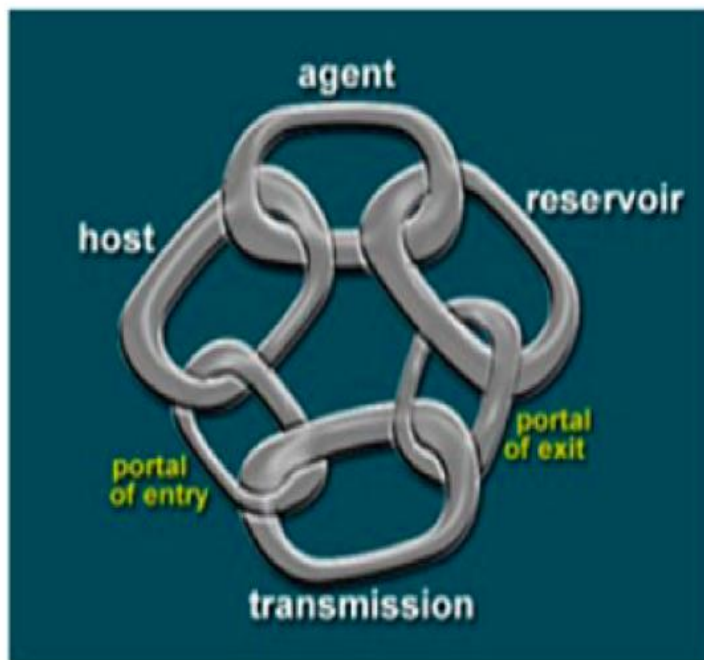
Divisi Infeksi dan Penyakit Tropis, Dept IKA FK- KMK UGM

Tim PPI - RSUP Dr Sardjito

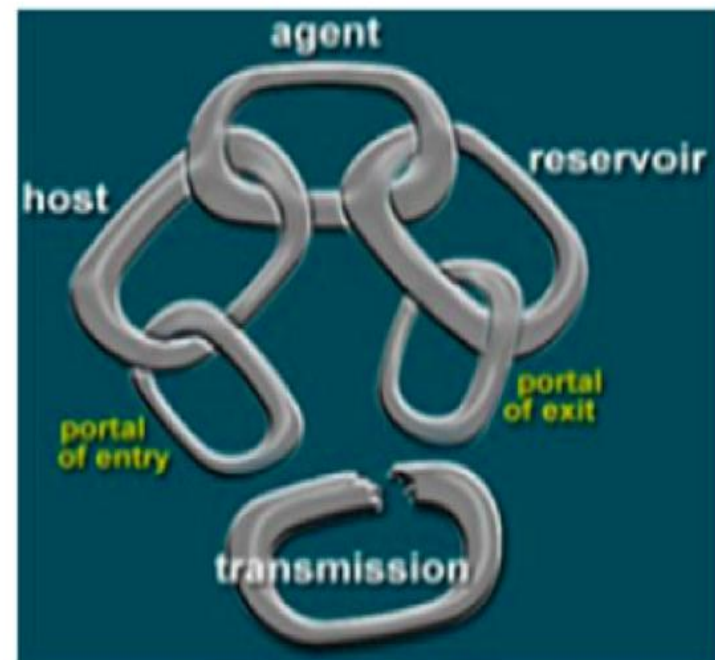
# PRINSIP PPI --- > OLEH SEMUA --- > KOMITMEN PIMPINAN --- > MUTU & KESELAMATAN

*Cost effectiveness*

The Chain of Infection



Breaking the Chain of Infection



**Figure 1a and 1b:** Chain of Infection (Permission for use of graphics provided by Dr. Donna Moralejo, Associate Professor, Memorial University School of Nursing, St. John's Newfoundland.

- Preventive measures for COVID-19 disease
- Based on the available evidence, the COVID-19 virus is transmitted between people through **close contact and droplets**, **not by airborne transmission**.
- The people most at risk of infection are those who are in close contact with a COVID-19 patient or who care for COVID-19 patients.

# KEWASPADAAN

## *Pencegahan & Pengendalian Infeksi*

- Skrining awal
- Penempatan pasien : isolasi
- Alur dan transportasi : isolasi
- Alat Pelindung Diri
- Kondisi eskalasi
- Sistem pembersihan lingkungan, dekontaminasi
- Perlindungan & surveilans petugas
- Karantina, *self isolation*
- Penetapan saat KLB selesai

- Preventive and mitigation measures are key in both healthcare and community settings. The most effective preventive measures in the community include:
- Performing hand hygiene frequently with an alcohol-based hand rub if your hands are not visibly dirty or with soap and water if hands are dirty;
- avoiding touching your eyes, nose and mouth;
- practicing respiratory hygiene by coughing or sneezing into a bent elbow or tissue and then
- immediately disposing of the tissue;
- wearing a medical mask if you have respiratory symptoms and performing hand hygiene after disposing of the mask;
- maintaining social distance (a minimum of 1 m) from individuals with respiratory symptoms.

# Langkah2 umum saat menghadapi kasus PDP/ konfirmasi

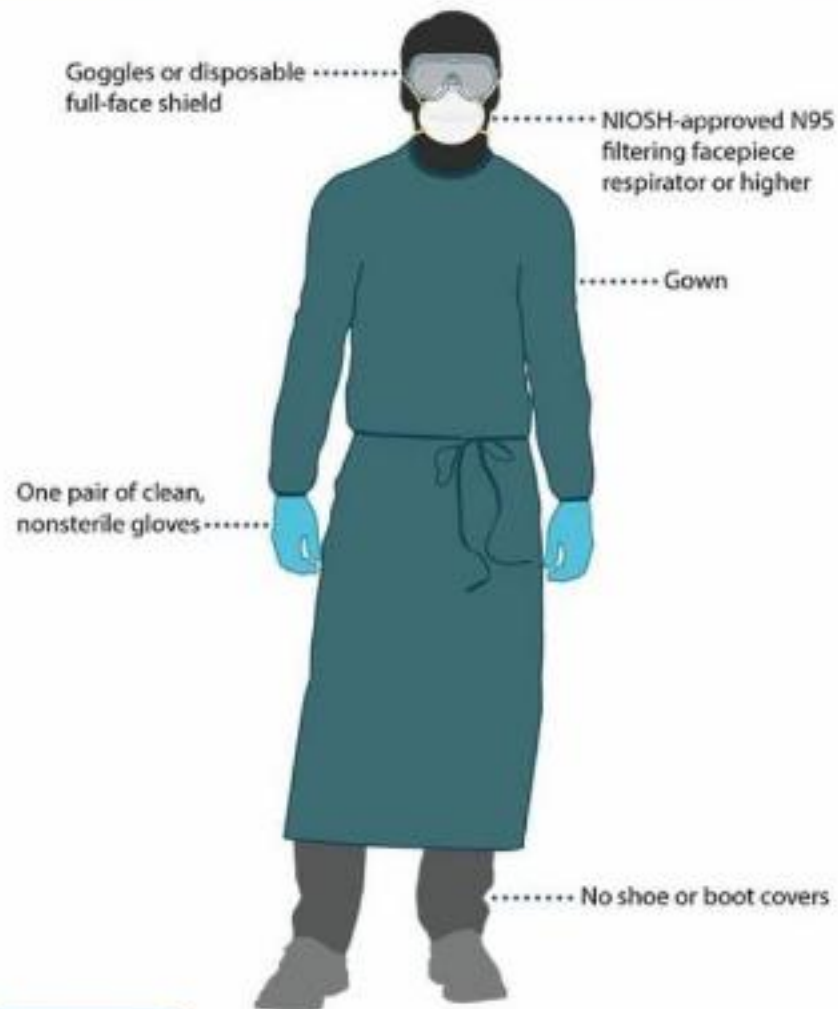
- **Contact and droplet precautions**
- in addition to using standard precautions, all individuals, including family members, visitors and HCWs, should use contact and droplet precautions before entering the room where suspected or confirmed nCoV patients are admitted;

- Patients should be placed in adequately ventilated single rooms.
- For general ward rooms with natural ventilation, adequate ventilation is considered to be 60 L/s per patient
- when single rooms are not available, patients suspected of being infected with nCoV should be grouped together ( COHORTING)

- All patients' beds should be placed at least 1 m apart regardless of whether they are suspected to have nCov infection



- Where possible, a team of Health Care Workers (HCW) should be designated to care exclusively for suspected or confirmed cases to reduce the risk of transmission;
- HCWs should use a medical mask
- HCWs should wear eye protection (goggles) or facial protection (face shield) to avoid contamination of mucous membranes;
- HCWs should wear a clean, non-sterile, long-sleeved gown



- HCWs should also use gloves
- The use of boots, coverall and apron is not required during routine care;
- After patient care, appropriate doffing and disposal
- Of all PPE's and hand hygiene should be carried out.
- A new set of PPE's is needed, when care is given to a different patient;
- Equipment should be either single-use and disposable or dedicated equipment (e.g., stethoscopes, blood pressure cuffs and thermometers). If equipment needs to be shared among patients, clean and disinfect it between use for each individual patient (e.g., by using ethyl alcohol 70%);<sup>8</sup>

- Avoid moving and transporting patients out of their room or area unless medically necessary.
- Use designated portable X-ray equipment and/or other designated diagnostic equipment.
- If transport is required, use predetermined transport routes to minimize exposure for staff, other patients and visitors, and have the patient using a medical mask.





# Evidence Tentang APD

# RESPIRATOR

- Respirator = masker
- Adalah alat yang dipakai untuk melindungi kepala setidaknya menutupi hidung dan mulut
- Tujuan : mengurangi risiko pemakainya menghirup partikel udara yang berbahaya ( gas, agen infeksius)



# JENIS MASKER

- N95
  - Dapat memfilter 95% partikel 0,3um, menahan virus.
  - APD pada penularan *airborne*
- Masker bedah
  - 3 lapis
  - Terluar : *waterproof*, cegah percikan masuk ke masker
  - Tengah : filter dapat menahan 90% partikel 5 um
  - Dalam : pelembut, absorbent, nyaman menyentuh kulit dan muk
- Masker kain (*cotton*)
  - Efisiensi menahan partikel/ virus rendah ; tebal ; pengap



# Kunci Kewaspadaan Berbasis Transmisi

- Tambahan Kewaspadaan Standar
- Tergantung tampilan gejala klinis dan epidemiologis

Kontak : sarung tangan & gaun

Droplet : pelindung mata & masker wajah

*Airborne* : respirator N95, pengaturan udara

- **Cuci tangan sebelum dan setelah merawat pasien**

# PEMAKAIAN APD SESUAI ANJURAN WHO

## 1 RUANG RAWAT PASIEN

Target personal	Aktivitas	Jenis APD atau prosedur
Petugas kesehatan	Layanan langsung px Covid 19	Masker bedah, gaun, sarung tangan <i>googles/face shield</i>
	Tindakan potensi produksi aerosol	Respirator partikulat/N95, gaun, sarung tangan, pelindung mata, apron
Cleaning service Pelaku pembersihan	Masuk kamar px covid 19	Masker bedah, gaun, sarung tangan RT, <i>googles</i> , sepatu <i>boot</i> /sepatu tertutup
Pengunjung	Masuk kamar pasien Covid 19	Masker bedah, gaun, sarung tangan

## TATALAKSANA PERAWATAN SISTEMATIS : KOHORTING

### ANALISIS RISIKO

- MASKER BEDAH
  - N95?
- GAUN dll : singleused/  
Linen
- Dll sesuai risiko

**BAJU KERJA vs JAS DOKTER**

# Efektivit as ALCUTA

	Examples of Disinfectants Used in Health Care Settings <sup>a</sup>					
Disinfectant	Bactericidal	Sporicidal	Tuberculocidal	Pseudomonicidal	Fungicidal	Viricidal
Ethyl and isopropyl alcohols	Yes	No	Yes	Yes	Yes	Yes
Chlorine disinfectants	Yes	Yes	Yes	Yes	Yes	Yes
Formaldehyde	Yes	Yes	Yes	Yes	Yes	Yes
Glutaraldehyde	Yes	Yes	Yes	Yes	Yes	Yes
Hydrogen peroxide	Yes	Yes	Yes	Yes	Yes	Yes
Iodophors	Yes	Yes, with prolonged contact time	Yes	Yes	Yes	Yes
Peracetic acid	Yes	Yes	Yes	Yes	Yes	Yes
Peracetic acid/hydrogen peroxide	Yes	Perhaps, with prolonged contact time	Yes	Yes	Yes	Yes
Phenolics	Yes	No	Yes	Yes	Yes	Yes, some viruses
Quaternary ammonium compounds	Yes	No	No	Yes	Yes	Yes, some viruses

Bagaimana melakukan rujukan yang baik?

# ALUR RUJUKAN GAWAT DARURAT

- Berdasarkan komunikasi
- Indikasi medis, indikasi rujukan
- Informed consent
- Edukasi tentang tatalaksana di faskes rujukan
- Transit cepat
- Isolasi
- Dekontaminasi





## PENGUMUMAN

Dalam rangka mengantisipasi penyebaran dan upaya pencegahan  
**COVID-19** di RSUP Dr. Sardjito



**TIDAK DIPERKENANKAN**  
bezoek pasien (Jam Kunjung Ditiadakan).



Rumah Sakit mengizinkan **penunggu pasien**  
hanya **1 orang**.



Peraturan ini berlaku mulai Senin 16 Maret 2020  
sampai batas waktu yang akan diumumkan  
kemudian.



Kebijakan pengurangan kerumunan orang  
(*Social Distancing*) untuk mencegah penularan  
melalui udara.



RSUP Dr. Sardjito tetap aman untuk pelayanan.



Pasien rawat jalan hanya boleh didampingi  
1 (satu) orang.

No. 01/HKM/POSTER/2020

HOTLINE PELAYANAN COVID-19 RSUP Dr. SARDJITO (0274) - 583613



Sardjito



RSUP\_DrSARDJITO



rsardjito\_official



RSUP Dr. Sardjito Video



Sardjito Radio