

# Protocol home isolation of a patient with COVID-19 Aruba

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## Preface

The home isolation protocol of a patient with COVID-19 for Aruba is a slightly modified version of RIVM's LCI guidelines.

Source RIVM guidelines: <https://lci.rivm.nl/covid-19/bijlage/thuisisolatie>. Version used from March 5, 2020

## Protocol home isolation of a patient with COVID-19

**(Home) Isolation:** This is used in a person with disease symptoms where isolation is indicated.

1. Isolation can be used to prevent the spread of a proven infectious disease.
2. Isolation can be applied pending diagnosis of a specific infectious disease

If isolation is indicated for a person, this can take place at home, provided that the conditions described below are met. We refer to the person in this document as the “patient”.

The general practitioner, together with staff from the Infectious Diseases Service and a medical adviser from the Department of Public Health jointly determine whether the patient can stay at home depending on the clinical picture. If necessary, a medical specialist (internist, infectologist, pulmonologist, pediatrician) will be consulted.

Personnel from the Infectious Diseases Service and a medical adviser from the Department of Public Health determine whether the patient's home situation lends itself to isolation.

The prerequisite for home isolation is that the patient must be able to take care of himself (this concerns the ADL functions) and that contact between the patient and housemates (as much as possible) can be avoided. Personnel from the Infectious Diseases Department and a medical adviser from the Public Health Department also take into account the medical situation of the patient and the housemates. The doctor also examines to what extent the knowledge and behavior of the patient and housemates allows for home isolation. It may sometimes be advisable for housemates (eg children, the elderly, or high-risk individuals) to stay elsewhere during the isolation period.

If home isolation is not possible, the patient should be moved to a different location.

## Informed consent

The patient must be formally informed (signed by him) of the obligation to remain in isolation to prevent the spread of COVID-19, otherwise the provisions of the communicable disease law (Landsverordening Infectieziekten) will apply.

## Conditions

- The patient stays in his home and does not leave it. Staying in your own garden or balcony is allowed, provided that contact with others is avoided.
- Limit presence in the same room with roommates and others.
- Housemates may not leave the house and must go in quarantine.
- People who do not live there may not come to the house where the patient is staying (except the Public Health Department or general practitioner).
- Good hygiene, ventilation and use of personal protective equipment for others is possible.
- The patient may abandon home if essential and/or urgent activities justify his departure. This must be consulted with the Department of Public Health.

## Limit contact with others

Try to keep contact with housemates to a minimum, this includes hugging or kissing and sexual contact. They cannot be in contact with body fluids and feces.

If the patient should nevertheless be in contact or be present in the same room with others, the patient should keep as much distance as possible (at least 2 meters) and the person entering the room where the patient is located should wear an N95 mouth mask. Keep the number of housemates caring for the patient to a minimum. The caregiver must be healthy himself. Avoid contact of the housemates with body fluids and defecation of the patient.

The patient must be informed that during the time of isolation, home visits cannot take place. Patients need to limit contact with animals until further notice.

## Good hygiene and protection

The Public Health Department emphasizes the importance of good hand and cough hygiene in the patient (see Annex) and explains this to both the patient and the housemates and caregiver (s). In addition, the Public Health Department is in daily contact with the patient and is available for questions about the protocol.

The Department of Public Health will instruct the patient to monitor his/her temperature twice a day and to keep a daily record of the health conditions.

## Use of the room in which the patient is staying

The number of spaces that the patient uses is kept to a minimum. The patient sleeps and stays in a private (sleeping) room and has a private bed. The patient uses his/her own toothbrush and his/her own eating and drinking utensils, towels, bed linen and other items in the house. The patient uses a private bathroom and toilet if possible. The rooms used by the patient must be well ventilated, for example by opening a window. Areas normally used with air conditioning should also be ventilated from time to time by opening a window. The sun and wind in Aruba counteract the virus.

If certain rooms (for example the kitchen, bathroom) are still used by the patient and housemates, they must be well ventilated (30 minutes) and cleaned daily.

## Personal Protective equipment

The Public Health Department provides advice on which personal protective equipment should be present in the home. This mainly concerns the use of disposable gloves and nose masks. The Public Health Department also gives instructions on how to put on the masks and how to put on and take off the gloves.

The patient wears an N95 nasal mask when leaving the room and entering other common areas in the home if roommates are present. After removing the mask, hand hygiene is applied. Preferably, however, the patient is not in a common room when housemates are present.

The housemates and other visitors (the general practitioner and the Public Health Department) wear N95 mouth masks when they enter the patient's room.

If the patient nevertheless has to be in close contact (<2m) with others for a long time (> 15min) - such as during care provision and physical examination by a health care professional - the health care professionals should use an N95 nasal mask.

Each mask should fit the face well. After placing the mask, the mask should no longer be touched. If the mask becomes dirty, it must be replaced. After use, the mask is thrown into a waste bag and immediate hand hygiene is applied.

Housemates and all visitors use disposable gloves during:

- all contact with the patient or the immediate environment of the patient, after entering the room in which the patient is staying and during cleaning of all surfaces and spaces used by the patient
- handling of laundry, dishes or waste and contact with all materials with which the patient has come into contact

## Treatment of stool, waste and body fluids

Avoid contact with stool and body fluids. Discard any waste that has come into contact with the patient in a separate waste bag in the patient's room. Wear gloves when removing the waste bag and dispose of it with the rest of the household waste.

The patient's waste, including the disposable material used by the sick person (gloves, handkerchiefs, masks), must be disposed of in a plastic bag (BAG 1) in a dustbin arranged in the room, preferably with a lid and pedal opening, without making any separation for recycling.

- The plastic bag (BAG 1) must be closed properly and put in a second garbage bag (BAG 2), next to the exit of the room, where the gloves and mask used by the caregiver will also be deposited and will be closed properly before leaving the room.
- BAG 2, with the previous waste, will be deposited in the garbage bag (BAG 3) with the rest of the household waste. BAG 3 will also be closed properly. Immediately after, a complete hand hygiene will be carried out, with soap and water, for at least 40-60 seconds.
- BAG 3 will be deposited in the residential garbage container without separating it from the rest of the domestic garbage.

## Laundry treatment

Discard laundry that has been in contact with the patient or in the immediate vicinity into a separate laundry basket. Wash towels, bed linen and clothing (if possible) at a minimum of 60 ° C with a full wash program and normal detergent. Let the laundry dry well in a tumble dryer or on the clothesline in the sun if possible. Wear gloves when handling laundry and then apply hand hygiene. Dishes used by the patient should be washed separately with standard detergent and hot water, or in the dishwasher on an extended washing program.

## Cleaning

Dishes used by the patient should be washed separately with standard detergent and hot water, or in the dishwasher on an extended washing program. Clean surfaces that are frequently touched by the patient, such as bedside tables and bedroom furniture, door handles and light switches, as well as all sanitary ware, such as bathroom and toilet, on a daily basis. Rooms that are shared should be cleaned daily. Use a household cleaner for cleaning.

Then clean the hand contact points such as toilet flush handles, door handles and light switches (the usual concentration is 40,000 ppm chlorine in a bottle). To do this, prepare a fresh solution in the ratio of 250 ml bleach to 10 liters of water (or 5 tablespoons bleach per gallon of water or 4 tablespoons of bleach per quart of water) prepared the same day that it is going to be used. Other disinfectants and house cleaners such as quaternary ammonium, ethanol are effective too.

Always use disposable gloves when cleaning and apply hand hygiene after cleaning.

## Duration of isolation

The duration of the isolation is determined by the staff of the Infectious Diseases Service and the medical advisor of the Department of Public Health. The isolation lasts until there are no more health complaints (including an improvement in respiratory symptoms and no presence of fever) and has been tested twice for the corona virus with a 24-hour interval and both tests are negative (= no more virus detected).

After discharge, consider self-monitoring for an additional 14 days. After discharge, patients are recommended to continue 14 days of isolation management and health monitoring, wear a mask, live in a single room with good ventilation, reduce close contact with family members, eat separately, keep hands clean and avoid outdoor activities.