

# ***The clinical statuses of exposed healthcare works with covid-19 patients while the provision of care in a pandemic situation at one of the specialized healthcare setup in Karachi Pakistan***

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## ***Abstract***

All staffs who are working in deferent departments of any healthcare facility have a significant value to carry out the effective implementation of healthcare management in a hospital. At the situation of COVID-19 pandemic outbreak, all healthcare workers are at on high risk to acquire the infection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) and may increase the result of harm while caring of patients in a hospital however they can get severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) from their family and community as well.

**Purpose:** 1. To establish a system of Contact Tracing of all healthcare workers in the hospital.

2. To early identification of a person with signs and symptoms of COVID-19 among Healthcare Workers.

3. To establish a system for the diagnose of exposed and symptomatic healthcare workers, based on their clinical status and test reports.

**Methodology:** Setting: Observation was conducted in all units including Inpatient Units, Emergency Room, Triage Room, OPD, Day Care, Housekeeping, Laboratory, X-Ray, Ultra Sound, Passive Immunization, Reception, Security, Food Service Department, Pharmacy, Purchase, IT (Information and Technology) Marketing, Account, Transport and Admin units at a specialized hospital.

Population: All Staffs including clinical and non-clinical who are working in the hospital. Inclusion Criteria: All staff who a history of contact with any has suspected or confirm COVID-19 patient in hospital, family & friend circle, and community.

Selection criteria: high risk, high cost, high volume, problem-prone and requirement of IPC

**Results:** In the COVID-19 pandemic situation, we started our management with the establishment of triage room on 8<sup>th</sup> March 2020 including dedicated staff for all 3 shifts, and initially, we started to monitor their health status but later it was extended to other units including clinical and non-clinical.

**Conclusion:** Proper handling of the COVID-19 pandemic situation was very challenging for anyone as an institution, as an IPC team and as an individual too.



## ***Biography:***

Riffat Shaheen is from Karachi, Pakistan and working since more than in the field of IPC, QA, and Healthcare management. Currently Working as consultant QA and IPC with National Institute of Blood Diseases (NIBD) in Karachi.

## ***Speaker Publications:***

1. "The clinical statuses of exposed healthcare works with covid-19 patients while the provision of care in a pandemic situation at one of the specialized healthcare setup in Karachi Pakistan"; Asia Pacific Journal of Infectious Diseases & Therapy/ V (8), 2020.

[16<sup>th</sup> World Congress on Infection Prevention and Control; Webinar- September 16-17, 2020.](#)

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