

NEST360°

Newborn Essential Solutions and Technologies

RESPONDING TO THE COVID-19 PANDEMIC: Resources Compiled by NEST for Use in Hospital-Based Newborn Care

Last updated on 15 May, 2020

USE INSTRUCTIONS

Intended use of this guidance is to aid clinicians and hospital staff to manage COVID-19 response efforts in newborn care units in sub-Saharan Africa. The guidance material includes a combination of NEST-developed and compiled documents from various organizations and institutions. It also links to further information developed by national bodies. To view the complete document see the [NEST360° COVID-19 Resources](#) webpage.

DISCLAIMER: COVID-19 guidance continues to evolve rapidly. We intend to update the material as new resources become available and will work with others to bring together the best available information. As such, we include a qualifier of “Last Updated on [date]” as reference. We encourage use of this guidance alongside local operational policies developed by your institutions and organizations.

CONTENTS

PROFESSIONAL RISK EXPOSURE

COVID-19 Patient Care

Handling of Deceased Patients (COVID-19 Confirmed or Suspected)



PROFESSIONAL RISK EXPOSURE

Last updated on 15 May, 2020

[back to contents →](#)



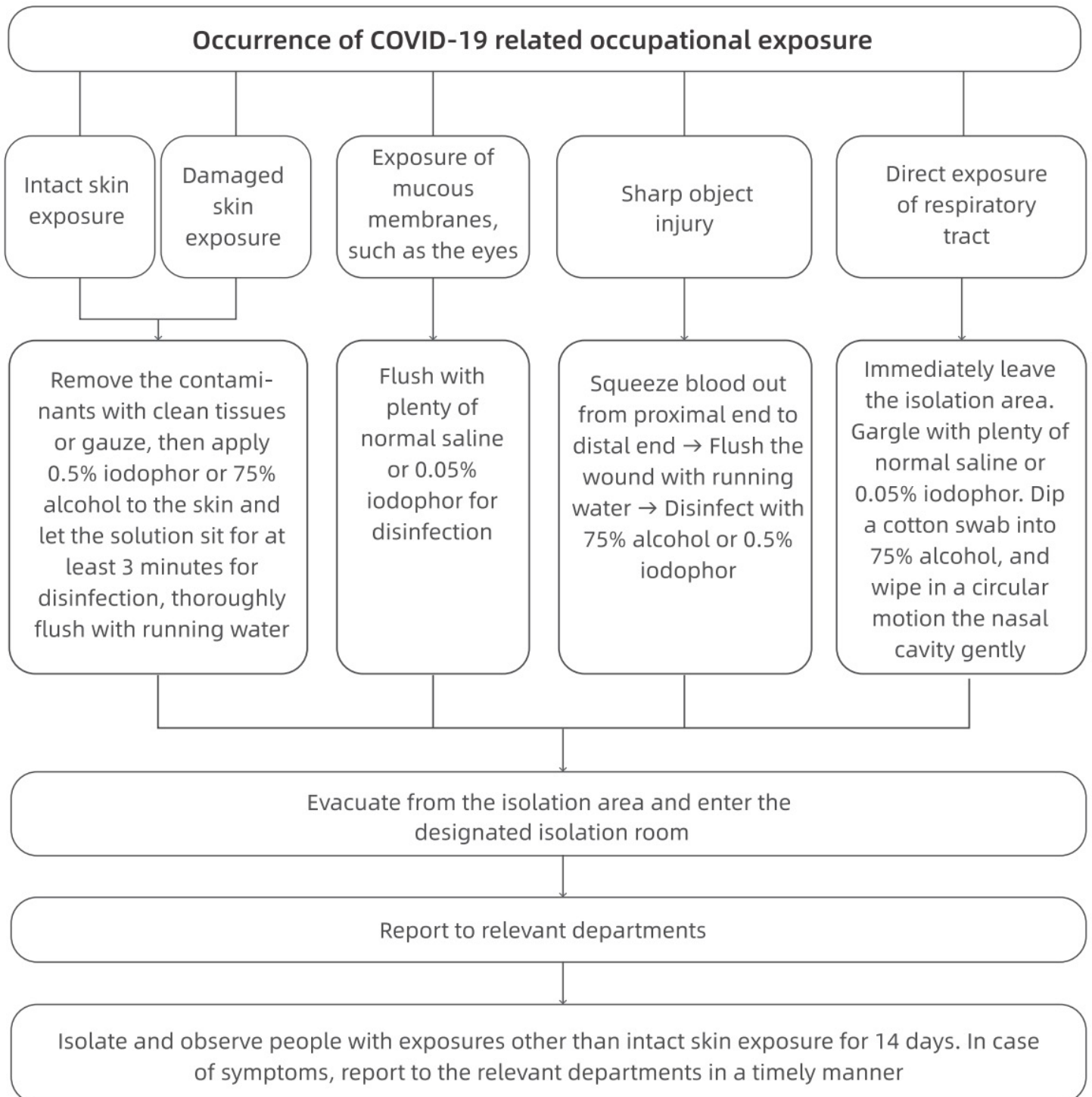
PROFESSIONAL RISK EXPOSURE:

COVID-19 Patient Care

Last updated on 15 May, 2020

[back to contents →](#)

COVID-19 GUIDANCE: PROFESSIONAL RISK EXPOSURE



Source: <https://video-intl.alicdn.com/Handbook%20of%20COVID-19%20Prevention%20and%20Treatment.pdf>



PROFESSIONAL RISK EXPOSURE:

Handling of Deceased Patients (COVID-19 Confirmed or Suspected)

Last updated on 15 May, 2020

[back to contents →](#)

COVID-19 GUIDANCE:

PROFESSIONAL RISK EXPOSURE

PROCEDURES FOR HANDLING BODIES OF DECEASED SUSPECTED OR CONFIRMED PATIENTS

(1) Staff PPE: The staff must make sure they are fully protected by wearing work clothes, disposable surgical caps, disposable gloves and thick rubber gloves with long sleeves, medical disposable protective clothing, medical protective masks (N95) or powered air purifying respirators (PAPRs), protective face shields, work shoes or rubber boots, waterproof boot covers, waterproof aprons or waterproof isolation gowns, etc.

(2) Corpse care: Fill all openings or wounds the patient may have, such as mouth, nose, ears, anus and tracheotomy openings, by using cotton balls or gauze dipped in 3000-5000 mg/L chlorine-containing disinfectant or 0.5% peroxyacetic acid.

(3) Wrapping: Wrap the corpse with a double-layer cloth sheet soaked with disinfectant, and pack it into a double-layer, sealed, leak-proof corpse wrapping sheet soaked with chlorine containing disinfectant.

(4) The body shall be transferred by the staff in the isolation ward of the hospital via the contaminated area to the special elevator, out of the ward and then directly transported to a specified location for cremation by a special vehicle as soon as possible.

(5) Final disinfection: Perform final disinfection of the ward and the elevator.

Source: <https://video-intl.alicdn.com/Handbook%20of%20COVID-19%20Prevention%20and%20Treatment.pdf>

NEST Adaptations to the Guidance of Procedures for Handling of Deceased Patients

1 STAFF PPE

Staff to ensure they are fully protected. This means wearing work clothes, disposable surgical cap, disposable gloves, and thick rubber gloves with long sleeves. medical disposable protective clothing, medical protective masks (N95) [a powered air purifying respirator may not be available], protective face shield, work shoes or rubber boots, waterproof boot covers, waterproof aprons or waterproof isolation gowns, etc.

2 CORPSE CARE

Fill all openings the patient may have, such as mouth, nose, ears, anus, and tracheotomy openings. Ensure usage of cotton balls or gauze dipped in 3000-5000 mg/L chlorine-containing disinfectant as indicated; 0.5% peroxyacetic acid is not required.

3 WRAPPING

Wrap the deceased in a double layer cloth sheet soaked with disinfectant. After this, if a corpse wrapping sheet is not available, a double layer of plastic is a suitable outer option.

4 TRANSPORT

Depending on the hospital unit and layout of the newborn ward, if special elevator access is not possible, the body shall be transferred to a designated area by staff in the isolation area, and then out of the hospital via dedicated transport vehicle to cremation location as soon as possible.

5 FINAL DISINFECTION

It need only occur in the areas in which the body was held (the ward) and the form of transport (a dedicated COVID transport trolley). If an elevator was not used for transport, it need not be disinfected.