

# PREVCOVID-BR NEWSLETTER!

## IMPACTS OF PREVCOVID-BR

### Training Workshop "How do I know it is COVID-19"?

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**F**ellows Ana Beatriz Pagliaro Amorim and Ariane Souza do Nascimento developed extensive training with different professionals and sectors of the **Vila Alpina State Hospital**. This training also had the cooperation and participation of nurses **Daiane Romão Sanches Ramalho** and **Elaine Aparecida Andrade**, and physicians **Dr. Juliana Salles de Carvalho**, **Dr. Régia Damous Feijo Fontineli** and **Dr. Ariane Ramos dos Santos Melaré** of the Hospital Infection Control Committee (HICC) and was held in December 2020 and January 2021.



During the application of the project form entitled "Assessment of Health Care Establishments Capacities to Confront Coronavirus 2019 Disease (COVID-19)", the fellows realized that the professionals needed improvement on the recognition of

the signs and symptoms of the COVID-19.

Thus, they proposed the training workshop "How do I know it is COVID-19?", which had as objectives to enable the identification of the main signs and symptoms of suspected cases of COVID-19, Gripal Syndrome (GS) and Severe Acute Respiratory Syndrome (SARS), as well as the process of detection of suspected

cases in patients and among professionals of the institution.

The workshop was offered to professionals from several sectors of the hospital, being these administrative (Computing, Billing, Scheduling, Bed Management, Medical Archive Service and Statistics, Human Resources, Financial, Receptionists, Clinical Engineering, Supplies/Purchases and Clothing); Assistance (Adult Emergency Room, Child Emergency Room, Normal Birth Center, Joint Accommodation, Neonatal Intensive Care Unit, Pediatric Intensive Care Unit, Pediatric Hospitalization, Medical Clinic, Surgical Clinic, and Outpatient); or support teams (Nutrition, Safety, Material and Sterilization Center, Permanent Education, Hygiene, Social Service, Pharmacy, Laboratory, Image Examination Team and Collection Examination Team).

To promote participation and debate among the training participants, the fellows developed case studies (Figure 1) based on the institution's own real situations, with reference to the definition for GS and SRAG cases (suspected of COVID-19) of the Ministry of Health's Surveillance Guide ([https://portal.arquivos.saude.gov.br/images/af\\_gvs\\_coronavirus\\_6ago20\\_ajustes-finais-2.pdf](https://portal.arquivos.saude.gov.br/images/af_gvs_coronavirus_6ago20_ajustes-finais-2.pdf)). For each sector of the hospital, two case studies were selected, according to the characteristics of the patients attended or characteristic of the administrative sector. The workshops lasted an average of 15 minutes and the workers were distributed in small groups to discuss the cases, and at the end a discussion was held with all the workers of the group, fellows and members of SCIH. During the workshops the official definition of GS and SRAG was also presented. The fellows used illustrative material to present the case studies and video of the Ministry of Health of Brazil on symptoms and prevention recommendations of COVID-19 (<https://m.youtube.com/watch?feature=youtu.be&v=Y6JazX3kFYg>).

Besides the main theme of the workshop, other subjects were suggested by the workers and included in the discussion, such as periods of isolation and collection of specific exams. The 339 participating workers received a notebook and a pen as a gift, and each sector received a certificate of participation.

The fellows reported that the *"experience was wonderful and the HICC participated and supported the entire workshop process. In addition, the workers were receptive to the educational*

*activity and we were able to publicize the PREVCOVID-BR project. We are grateful to the Vila Alpina State Hospital and the HICC team".*



**Figure 1 - Case studies (CS) and discussion at the workshop "How do I know it is COVID-19?", São Paulo, 2021.**

<p><b>CS:</b> Woman Nurse at Vila Alpina Hospital has been coughing, sore throat and indisposition for 02 days, denies fever.</p> <p><b>Discussion:</b> Suspicious case. It was highlighted the information that the fever may be absent, besides the importance of monitoring in health professionals.</p>
<p><b>CS:</b> Puerperal admitted to the Joint Lodging refers to headache, olfactory and taste disorders, reports fever 2 days ago, at the time of physical examination the temperature measured is 36.7°C.</p> <p><b>Discussion:</b> Suspicious case. It was pointed out that the fever can be referred or measured, introduction of anosmia and ageusia in the definition of the Ministry of Health and the importance of monitoring patients hospitalized for other causes/diagnosis.</p>
<p><b>CS:</b> Male, 70 years old, admitted to the Medical Clinic, in the morning physical examination presents O2 saturation of 78%, sleepiness and dry cough.</p> <p><b>Discussion:</b> Suspicious case. It was highlighted the drop in saturation, absence of fever, somnolence (which is a criterion for the elderly according to the Ministry of Health) and the importance of monitoring hospitalized patients.</p>
<p><b>CS:</b> A 9-year-old child admitted to Pediatrics with nasal obstruction, dry cough and associated diarrhea.</p> <p><b>Discussion:</b> Suspicious case. The presence of nasal obstruction and symptoms that are not respiratory and are less frequent such as diarrhea, absence of fever and the importance of monitoring hospitalized patients were discussed.</p>
<p><b>CS:</b> Male, 57 years old seeks care with fever 38 degrees, dry cough for 4 days, evolving with shortness of breath to small efforts.</p> <p><b>Discussion:</b> Suspicious case. Besides the main symptoms, the importance of checking for acute disease (4 days) and paying attention to shortness of breath at the efforts reported was discussed.</p>
<p><b>CS:</b> 30-year-old woman presents with fever and myalgia. The patient is being monitored because she is a confirmed case contactant for COVID-19 at the medical clinic.</p> <p><b>Discussion:</b> Suspicious case. We discussed the true reports of contactors admitted to the institution emphasizing the importance of monitoring and isolation.</p>
<p><b>CS:</b> A 69-year-old patient with previous history of systemic arterial hypertension, diabetes melito and chronic obstructive pulmonary disease, admitted for heart attack on the 3rd day of hospitalization, underwent angioplasty in another institution, evolving well cardiologically. On the 8th day he underwent chest CT scan and description of the report was infiltration at the base. On the 10th day of hospitalization he presents fever, O2 saturation of 80% (in nasal catheter of O2 2L/Min) and dyspnea.</p> <p><b>Discussion:</b> Suspicious case (later confirmed). We discussed the monitoring of hospitalized patients, the definition of SARS and signs and symptoms presented, and about tomography reports that it is necessary to have some care in the disposal or confirmation only by this report.</p>
<p><b>CS:</b> A 66 year old patient admitted for heart attack and history of positive case contact of COVID19. Presents vesicular murmurs decreased on the 3rd day of hospitalization using a 99% saturated O2 catheter. On the 8th day of hospitalization he presents dyspnea and needs orotracheal intubation.</p> <p><b>Discussion:</b> Suspicious case (later confirmed). We discussed the monitoring of hospitalized patients, signs and symptoms presented and the definition of SARS.</p>
<p><b>CS:</b> Nutritionist at Vila Alpina Hospital, aged 66, previously healthy, comes to work complaining of shortness of breath (dyspnea), cough and myalgia. In the PS at physical examination he presented fever (37.8° C), respiratory rate of 27 RPM (respirations per minute), blood pressure of 110×70 mmHg, and partial oxygen saturation (SpO2) of 93%.</p> <p><b>Discussion:</b> Suspicious case. The importance of monitoring employees and signs and symptoms that fulfill the definition for SARS was discussed.</p>
<p><b>CS:</b> 61-year-old hypertensive male who arrives at the hospital with fever, dry cough and difficulty breathing. He also reports feeling tired and uneasy, on physical examination his temperature is 38.7 °C and his oxygen saturation is 88%. Thoracic radiography shows bilateral pulmonary infiltrates and thoracic computed tomography reveals multiple bilateral lobular and subsegmental areas with frosted glass opaqueness.</p> <p><b>Discussion:</b> Suspicious case. A case definition of SARS was discussed.</p>