



NOTE: Does Being Vaccinated Make Any Difference?

Currently, **no specific change in policy** for any individuals who are fully vaccinated against COVID-19

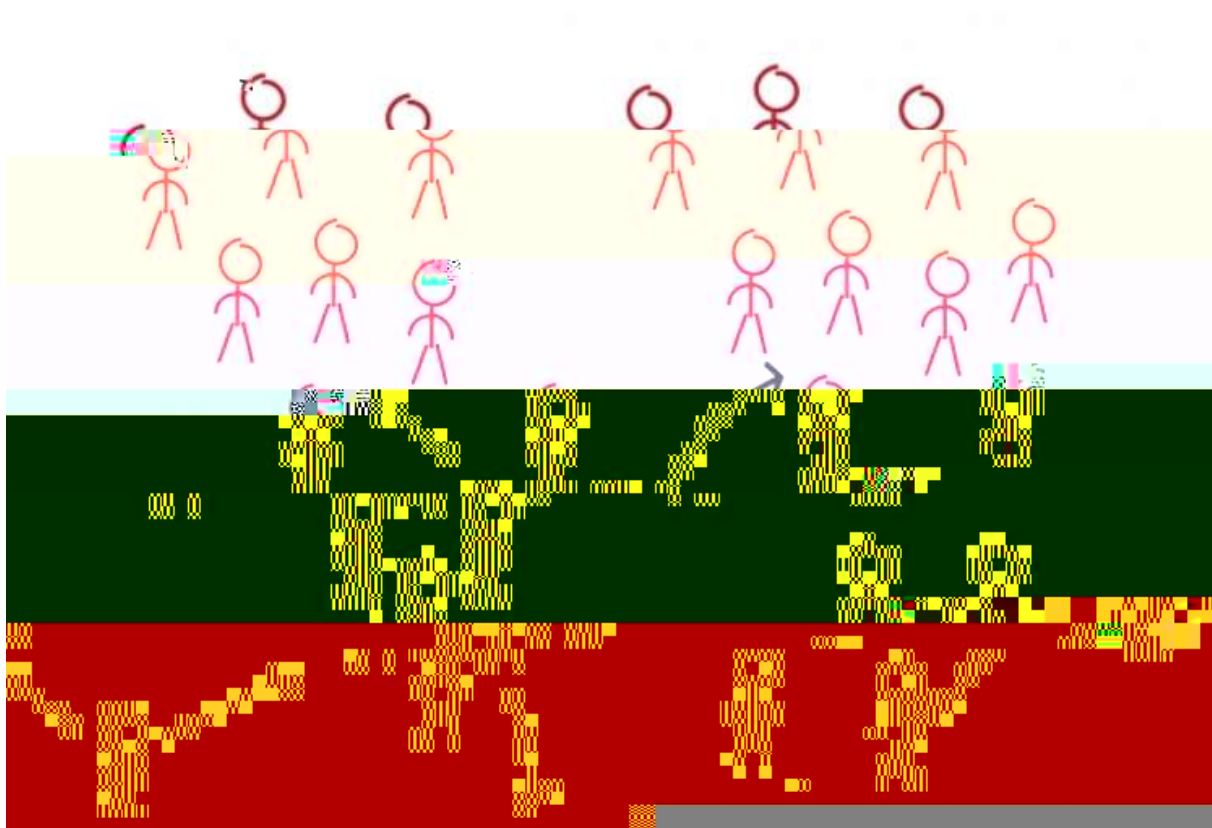
Because according to WHO:

Positive evidence that the vaccine prevents severe disease/death,

But **NO EVIDENCE YET** it stops transmission of the virus

Therefore, WHO recommends that for vaccinated persons all precautions (e.g. masking, hygiene, quarantine) continue.

Break the Chain of Transmission through Early Detection



Symptoms To Monitor Daily Amongst UN Personnel

Fever or chills

Cough

**Shortness of breath or
difficulty breathing**

General

weakness/fatigue

Muscle or body aches

Headache

New loss of taste or smell

Sore throat

Congestion or runny nose

Nausea or vomiting

Diarrhea

Altered mental status



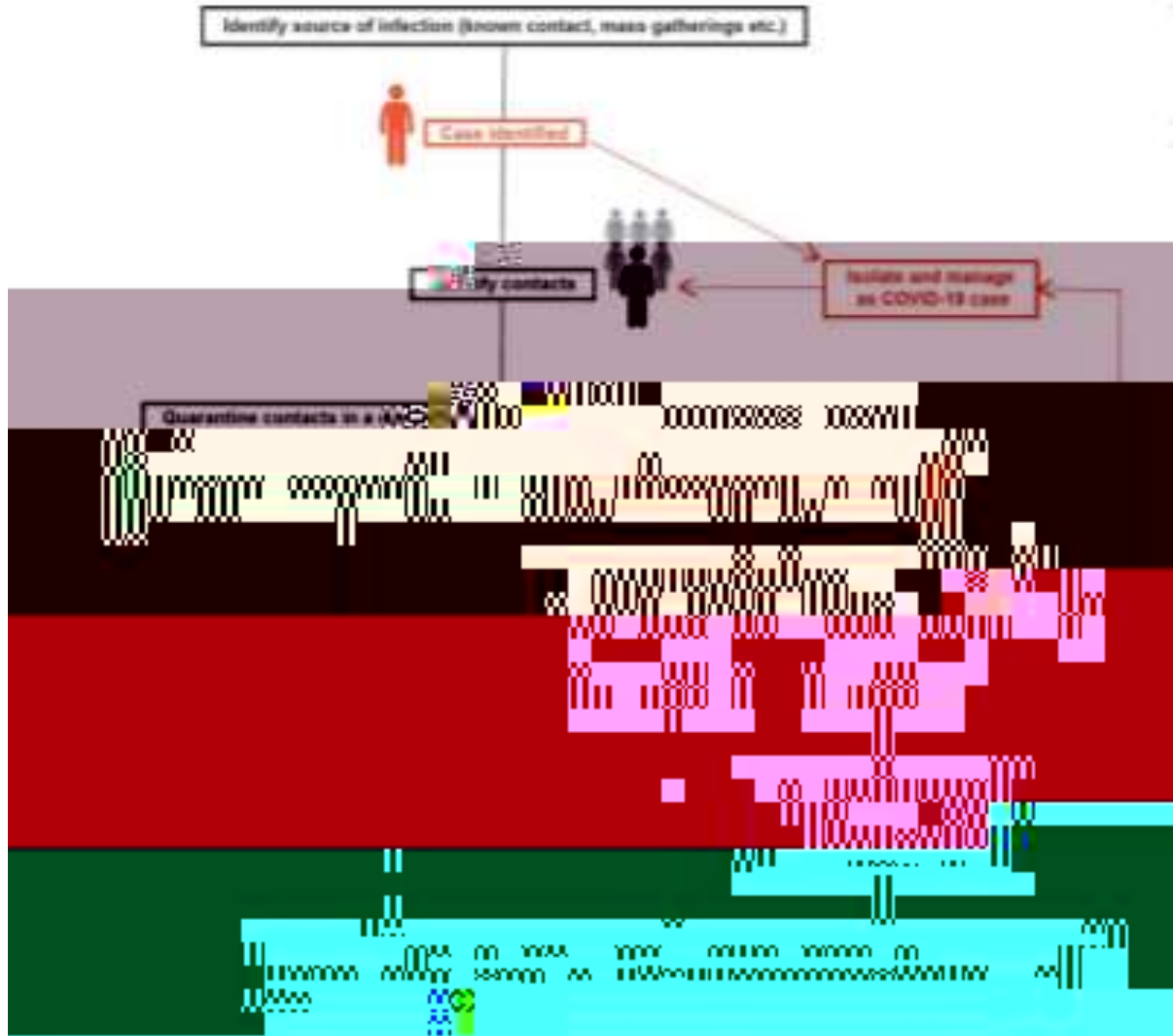
Testing is only one part of response plan

Testing by itself will not reduce transmission/

Mask & Isolate
Quarantine
Test



Contact Tracing







Who Must Be Quarantined for 14 days?

1. All **contacts** of lab-confirmed or suspected cases
2. Mandatory 14-day routine quarantine for incoming rotations of formed troops into field missions

Monitor them for fever and symptoms twice daily.

https://www.un.org/sites/un2.un.org/files/coronavirus_comms_tempsymptomlog.pdf

NOTE: Local health authorities may recommend testing of asymptomatic contacts

If symptoms develop/ PCR+, immediately mask & isolate

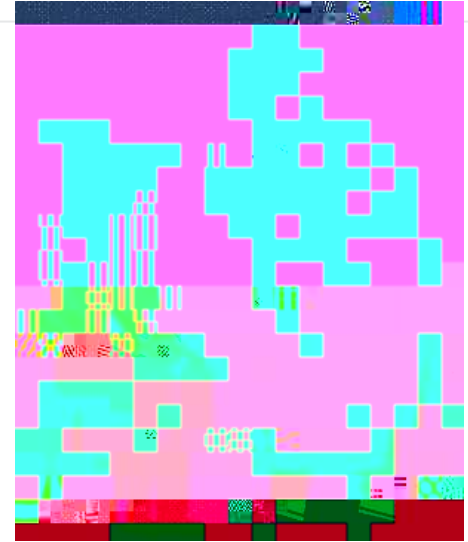
Quarantine vs Isolation Word on Terminology



PCR Testing Strategy?

PCR Tests should be prioritized for

- symptomatic persons
- or units with PCR+ cases



If planning to mass test with PCR tests, leadership must be prepared:

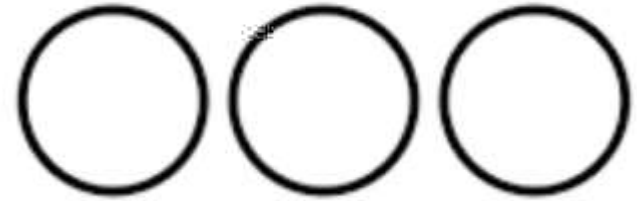
May find **many asymptomatic persons** who are PCR+

Must have **isolation area for large number** of cases

Must have **quarantine area for large number** of contacts

HCW must have **sufficient PPE** to care for PCR+ cases

Segregate the Different Groups



- 1. ISOLATION: Confirmed PCR+** cases (can be symptomatic or asymptomatic)
- 2. ISOLATION: Suspect** (i.e. symptomatic) cases
- 3. QUARANTINE: Contacts**

Isolation area:

Have dedicated bathrooms and no mixing of isolated persons with others

Need to be thoroughly cleaned and disinfected before use by other groups.

Have separate dining area/food supply

When to Release from Isolation?



COVID-19 who is symptomatic:

At least 10 days have passed since symptoms first appeared AND

At least 3 days without fever and respiratory symptoms

PCR+ COVID-19 case who is asymptomatic:

At least 10 days from specimen collection date

NOTE that PCR testing at the end of isolation is not required however countries can chose to do this.

Please urgently notify up the chain:

Anyone with fever and/or respiratory symptoms

Clusters of >2 persons with fever and/or respiratory symptoms

Anyone with suspect/confirmed COVID-19

Anyone with severe shortness of breath without an identified cause

Sudden death



Strict Segregation of Different Groups

DO NOT mix the following 3 groups.

Keep each group under strict isolation/quarantine and away from each other

- 1. Suspect COVID case**
- 2. Lab Confirmed COVID cases**
- 3. Contacts who are well (NOT infected) but were exposed (at risk of infection)**

Please strictly segregate these **FOUR** Different Groups No Mixing Of These Groups with Each Other / Well Persons

ISOLATION

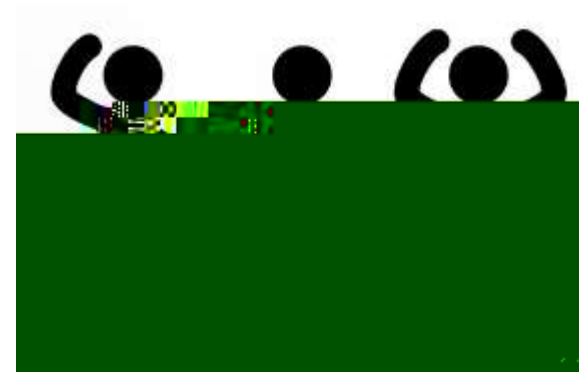
**Suspect
COVID Case**
(symptomatic but
labs not
done/pending)

QUARANTINE

Well Contacts
(non-sick people
but who were
exposed to a
COVID case)

**Lab Confirmed
COVID Case**
(can be
symptomatic or
asymptomatic)

REGULAR INDIVIDUALS



When to Release from Isolation or Quarantine?

(Please consult also your Local Health Authorities)





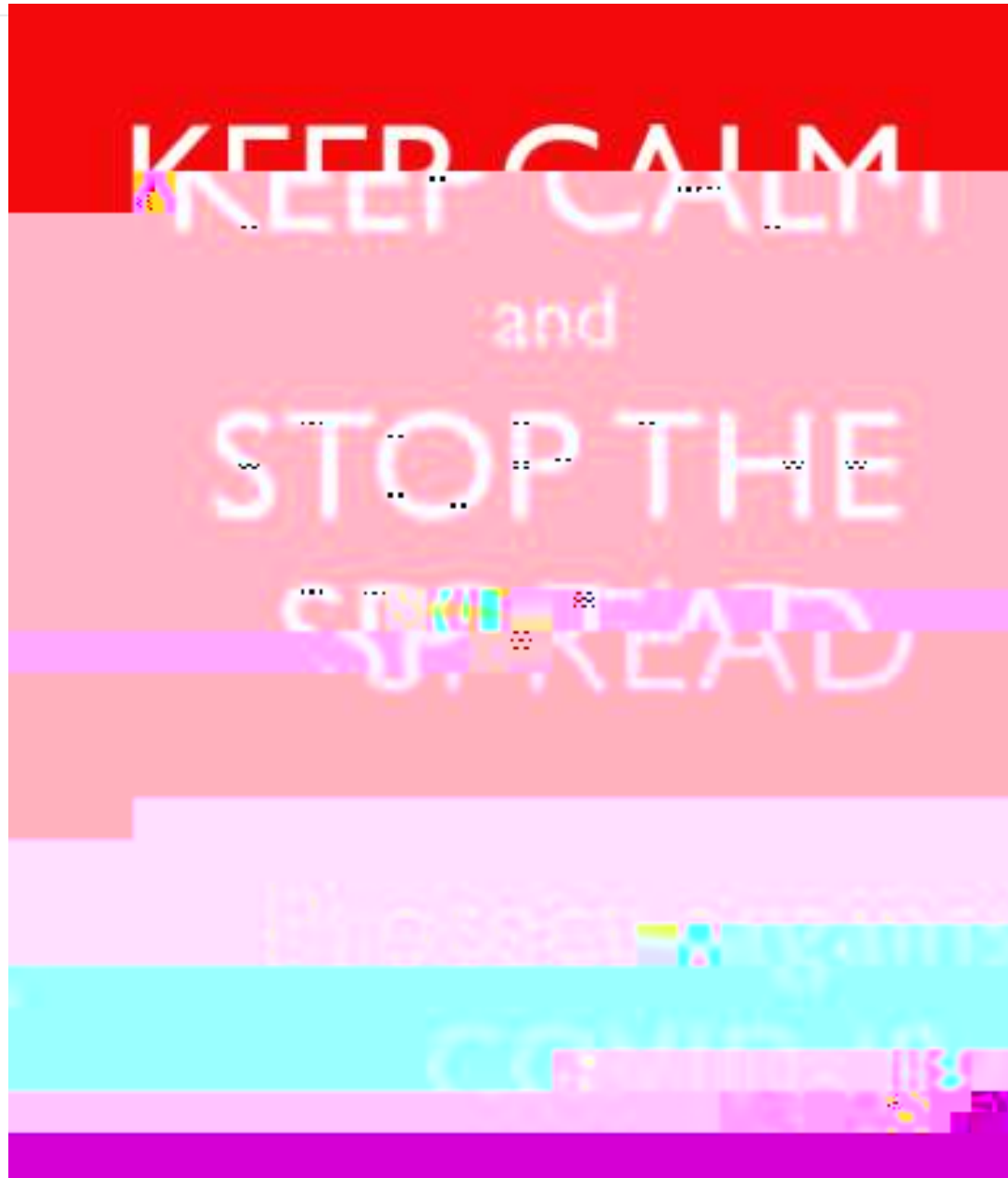


Take the Threat Seriously You Set the Tone as Leaders

Develop a clear COVID-19 SOP for outbreak prevention and management

Run a simulation drill for your office / duty station







Thank you

**Any Questions for the Public Health Team:
dos-dhmosh-public-health@un.org**

**UN Guidance:
<https://www.un.org/en/coronavirus/reference-documents-administrators-and-managers>**

**WHO Guidance:
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>**

Suspected case of SARS-CoV-2 infection

- A** A person who meets the clinical **AND** epidemiological criteria:
Clinical Criteria:

1. At least one of fever AND

2. At least two of cough, sore throat, shortness of breath, loss of taste or smell

3. At least one of diarrhea, vomiting, conjunctivitis, rash

4. At least one of muscle aches, headache, fatigue, malaise

5. At least one of new-onset anosmia, ageusia

6. At least one of new-onset loss of consciousness, confusion

7. At least one of new-onset acute respiratory distress syndrome, pneumonia

Criteria for diagnosis of SARS-CoV-2 infection

- B** A patient with severe acute respiratory illness:
(SARI: acute respiratory infection with history of fever or measured fever of ≥ 38 C°; and cough; with onset within the last 10 days; and requires hospitalization).
- C** Asymptomatic person not meeting epidemiologic criteria with a positive SARS-CoV-2 Antigen RDT¹.

¹ Signs separated with slash (/) are to be counted as one sign.

² NAAT is required for confirmation, see [Diagnostic testing for SARS-CoV-2](#)

See [Antigen detection in the diagnosis of SARS](#)





