

## Body Handling Protocol (BHP): Ebola Virus Disease

*The Body Handling Protocol (BHP) contains critical information for AHS and funeral home employees regarding the safe transportation and final disposition of bodies from deceased patients suspected or known to have been infected with Ebola Virus Disease (EVD).*

### Context

In patients who die with Ebola virus infection, the virus can be detected throughout the body. Ebola virus can be transmitted in postmortem care settings by laceration and puncture with contaminated instruments used during postmortem care, through direct handling of human remains without appropriate personal protective equipment, and through splashes of blood or other body fluids (e.g. urine, saliva, feces) to unprotected mucosa (e.g., eyes, nose, or mouth) which occur during postmortem care.

### General Principles

- Individuals handling Ebola-infected remains must wear sufficient PPE (as outlined below)
- Personnel involved in postmortem care must be trained in handling infected human remains
- Autopsies on patients who die of Ebola should be **avoided**. If an autopsy is necessary, it should involve extensive consultation between the Autopsy team, IPC, and Public Health
- Once sealed, the body bag and coffin must not be opened

### Personal protective Equipment (PPE) for Postmortem Care Personnel

Prior to contact with body, postmortem care personnel must wear PPE consisting of: an impermeable gown with full sleeve coverage, gloves, eye protection (e.g., face shield, goggles), surgical procedure mask, and shoe covers. Additional PPE (leg coverings, apron, head covers, double gloves) might be required in certain situations (e.g., copious amounts of blood, vomit, feces, or other body fluids that can contaminate the environment).

PPE should be in place **BEFORE** contact with the body, worn during the process of collection and placement in body bags, and should be removed immediately after and discarded as regulated medical waste. Use caution when removing PPE as to avoid contaminating the wearer. Hand hygiene (washing your hands thoroughly with soap and water or an alcohol based hand rub) should be performed immediately following the removal of PPE. If hands are visibly soiled, use soap and water.

### Postmortem Preparation

At the site of death, the body should be placed in a fluid-impermeable body bag. The body should be placed in the bag in a way that prevents contamination of the outside of the bag. Change your gown or gloves if they become heavily contaminated with blood or body fluids. Leave any intravenous lines or endotracheal tubes that may be present in place. Avoid washing or cleaning the body. Zipper the body into the bag, and immediately place the bag into a hermetically sealed container (a container which is sealed by welding, soldering, or the use of gaskets and screws)

**The charge nurse is responsible for ensuring the hermetically-sealed container has been prominently and legibly labeled** *“This body is infected with a communicable disease specified in Schedule 1 to the Bodies of Deceased Persons Regulation and must be handled in accordance with that Regulation. Do not remove this label and do not open the hermetically sealed container.”* Since the hermetically sealed container may not

be opened, information identifying the body must be accessible (i.e. not a tag inside the hermetically sealed container) in a manner consistent with privacy legislation.

Following the removal of the body, the patient room should be cleaned and disinfected. Reusable equipment should be cleaned and disinfected according to standard procedures.

PPE is not required for individuals driving or riding in a vehicle carrying human remains, provided that drivers or riders will not be handling the remains of a suspected or confirmed case of Ebola, and the remains are safely contained and the body is in a hermetically sealed container as described above. The vehicle in which the body is transported must be cleansed and disinfected in accordance with the *Bodies of Deceased Persons Regulation* and in consultation with the Environmental Public Health Department of Alberta Health Services.

## Mortuary Care

Requirements for the disposition of deceased persons with a Schedule 1 Communicable Disease are outlined in the *Bodies of Deceased Persons Regulation* of the *Public Health Act* available at [http://www.qp.alberta.ca/documents/Regs/2008\\_135.pdf](http://www.qp.alberta.ca/documents/Regs/2008_135.pdf)

- Contact with the body must be as limited as possible
- The body must be enclosed in a hermetically sealed container as soon as possible after the time of death
- The body must not be embalmed
- The body must be buried or cremated in the hermetically sealed container

The body may not be viewed and the hermetically-sealed container and/or body bag may not be opened. Mortuary care personnel should wear PPE listed above when handling the bagged remains. In the event of leakage of fluids from the body bag, thoroughly clean and decontaminate areas of the environment in consultation with the Environmental Public Health Department of Alberta Health Services.

It must be sensitively communicated to the family that the following will need to be avoided: religious/ritual preparation of the body, washing, dressing, viewing, touching or kissing of the deceased. Items of clothing visibly contaminated should be safely disposed of, and other items of clothing autoclaved prior to laundering. Wedding rings, jewelry, and other physical artefacts should be autoclaved or decontaminated using a validated disinfectant. Relatives should be alerted that some personal effects may be adversely affected or destroyed by autoclaving or disinfection.

## References:

1. CDC: Guidance for Safe Handling of Human Remains of Ebola Patients in U.S. Hospital and Mortuaries <http://www.cdc.gov/vhf/ebola/hcp/guidance-safe-handling-human-remains-ebola-patients-us-hospitals-mortuaries.html>
2. *Public Health Act – Bodies of Deceased Persons Regulation* [http://www.qp.alberta.ca/documents/Regs/2008\\_135.pdf](http://www.qp.alberta.ca/documents/Regs/2008_135.pdf)
3. Advisory Committee on Dangerous Pathogens: Management of Hazard Group 4 viral haemorrhagic fevers and similar human infectious diseases of high consequence [http://www.hpa.org.uk/webc/HPAwebFile/HPAweb\\_C/1194947382005](http://www.hpa.org.uk/webc/HPAwebFile/HPAweb_C/1194947382005)