

EVD/VHF Probable/Suspect/Confirmed Case RAAPID Process Algorithms

Clinical team to consult zone MOH for any probable, suspect or confirmed case of EVD/VHF. MOH will conduct risk assessment, if the individual meets suspect case criteria, the zone MOH will arrange RAAPID call (details below).

Process Algorithm – RAAPID Call #1A

For [PROBABLE/SUSPECT/CONFIRMED case] in community setting (non-designated receiving site)

Purpose: To coordinate testing, need for admission, need for transfer, and coordination of testing & safety of HCWs.

Minimum required participants for RAAPID Call #1A:

- MOH
 - For transfers across zones, both Zone MOHs must be on the call.
- ER/UCC physician MD (2)
 - Sending and receiving sites if applicable.
- Charge nurse (2)
- Infectious Diseases physician
- CLS Microbiologist-On-Call (MOC) at designated testing/receiving site **and** ProvLab Virologist-On-Call (VOC)
- Infection Prevention and Control MD on-call & operations on-call
- Critical Care/Intensive Care Unit physician on-call
- Workplace Health & Safety
- Communicable Disease Control (CDC) Team Nursing Lead
- EMS Manager
 - (optional if transport is required – i.e., patient not presenting at designated Ebola site)
- Zone Admin On-Call (2)
 - For transfers across zones, preferably both zones will be represented.
- Site Admin On-Call (2)
 - Sending and receiving sites if applicable.
- E/DM On-call (2)
 - Sending and receiving zones if applicable.
- Integrated Operations Centre (IOC)
- Others as deemed necessary by MOH

Note: RAAPID also has this participant list. MOH may request additional participants.

Template Agenda:

1. Role Call
2. Review of clinical presentation by assessing MD
3. Coordinate testing
4. Determine need for admission, and coordination thereof (if applicable)
5. Determine need for transfer, and coordination thereof (if applicable)
6. Site considerations (sending & receiving)
7. Roundtable
8. Communications plan
9. Next meeting

Post meeting MOH to circulate summary (with support of admin/RAAPID) to all participants via email, and MOH to coordinate RAAPID #2 if indicated.

Process Algorithm – RAAPID Call #1B

For [PROBABLE/SUSPECT/CONFIRMED case] presenting at designated receiving site

Purpose: To coordinate testing, need for admission, and coordination of testing & safety of HCWs.

Minimum required participants for RAAPID Call #1:

- MOH for zone
- ER/UCC physician MD
- Charge nurse ED
- Infectious Diseases physician
- CLS Microbiologist-On-Call (MOC) at designated testing/receiving site and ProvLab
- Virologist-On-Call (VOC)
- Infection Prevention and Control MD on-call & operations on-call
- Critical Care/Intensive Care Unit physician on-call
- Workplace Health & Safety
- Communicable Disease Control (CDC) Team Nursing Lead
- Zone Admin On-Call
- Site Admin On-Call
- E/DM On-call
- Integrated Operations Centre (IOC)
- Others as deemed necessary by MOH

Note: RAAPID also has this participant list. MOH may request additional participants.

Template Agenda:

1. Role Call
2. Review of clinical presentation by assessing MD
3. Coordinate testing
4. Determine need for admission, and coordination thereof (if applicable)
<clinical team is excused>
5. Site considerations
6. Roundtable
7. Communications plan
8. Next meeting

Post meeting MOH to circulate summary (with support of admin/RAAPID) to all participants via email, and MOH to coordinate RAAPID #2 if indicated.

Process Algorithm – RAAPID Call #2

Purpose: Clinical Update, Operations Coordination & Reporting

This two part meeting will first provide an update on case situation, and then provide update to senior leadership, Alberta Health, communications, +/- EOC if activated.

Minimum required participants for RAAPID Call #2:

- MOH for zone
- ER/UCC physician MD (optional only MRP needed for update)
- Infectious Diseases physician
- CLS Microbiologist-On-Call (MOC) at designated testing/receiving site and ProvLab Virologist-On-Call (VOC)
- Infection Prevention and Control MD on-call & operations on-call
- Critical Care/Intensive Care Unit physician on-call (optional only MRP needed for update)
- Workplace Health & Safety
- Communicable Disease Control (CDC) Team Nursing Lead
- Zone Admin On-Call
- Site Admin On-Call
- E/DM On-Call
- MOH
- Alberta Health: OCMOH-on-call at 780-638-3630
 - Note OCMOH can initiate authorization process for Ebola medications.
- AHS Senior Medical Officer of Health at 403-607-9694
- AHS Communications-on-call
- AHS Senior Leadership (can identify who should be called through Admin-on-call)
- EOC leadership (if applicable)

Template Agenda:

1. Role Call
2. Summary of situation by MOH
3. Update of clinical situation by MRP, lab, and others as needed
4. Pending clinical actions
<clinical team is excused>
5. Review of Control measures
 - a. Public Health/CDC
 - b. Site/WHS
6. Site considerations
7. Roundtable
8. Communications plan
 - a. To site
 - b. To health partners
 - c. Public reporting
9. Senior leadership & reporting coordination
10. Next meeting

Post meeting MOH to circulate summary (with support of admin/RAAPID) to all participants via email.