

## Community Viral Gastrointestinal (GI) Case and Cluster Containment Toolkit

A printed version of this guideline may not be the most recent version. The OFFICIAL version is located at [Infection Prevention and Control](#)






This toolkit provides guidance related to viral gastrointestinal illness (e.g. Norovirus, Rotavirus, and Adenovirus) only. If gastrointestinal illness is caused by another enteric pathogen (e.g. Escherichia coli (E. coli), Salmonella etc.) consult with the MHO or designate as recommendations may be different.

Site Applicability	
<ul style="list-style-type: none"> <li>● Vancouver Withdrawal Management/Detox</li> <li>● South Vancouver Withdrawal Management</li> <li>● Richmond Bridge House</li> </ul>	<ul style="list-style-type: none"> <li>● Vista House</li> <li>● Venture Crisis Home</li> <li>● Acquired Brain Injury Transitional Housing</li> </ul>
Case Definition	
<ul style="list-style-type: none"> <li>● 2 or more episodes of diarrhea (<a href="#">Bristol stool chart 6 or 7</a>) within a 24-hr. period, above what is considered normal for that individual <b>OR</b></li> <li>● 2 or more episodes of vomiting within a 24-hr. period, <b>OR</b></li> <li>● 1 episode each of vomiting and diarrhea within a 24-hr. period, <b>OR</b></li> <li>● 1 episode of bloody diarrhea, <b>OR</b></li> <li>● Lab confirmation of a known enteric pathogen with at least one symptom compatible with a GI infection (e.g. nausea, vomiting, diarrhea, abdominal pains, bloody stools or tenderness)</li> </ul>	
<b>1. Line List and Notification</b>	<ul style="list-style-type: none"> <li>● Frontline staff initiates a paper line list to keep track of symptomatic clients.</li> <li>● If there are <b>three or more clients in a 4-day period</b> that meet the case definition for Viral GI cases:               <ul style="list-style-type: none"> <li>○ Site to notify IPAC:                   <ul style="list-style-type: none"> <li>➢ Monday to Friday: Email <a href="mailto:ICP-ambulatorycommunity@vch.ca">ICP-ambulatorycommunity@vch.ca</a>,</li> <li>➢ Saturday/Sunday/Statutory Holidays: Review and follow the <a href="#">Ambulatory, Community &amp; Long-Term Care IPAC On-Call Algorithm</a></li> </ul> </li> <li>○ IPAC to report to MHO</li> </ul> </li> </ul>

<p><b>2. Additional Precautions</b></p>	<ul style="list-style-type: none"> <li>● Reinforce staff to use <a href="#">point of care risk assessment</a> for all client interactions</li> <li>● Place symptomatic clients that meet the case definition on <a href="#">Contact Plus Precautions</a>. Add (add <a href="#">Droplet Precautions</a> when vomiting present.</li> <li>● Maintain Additional Precautions until symptoms have stopped for <b>48 hours AND return to baseline</b> bowel movements or until infectious cause is ruled out. Refer to the <a href="#">VCH Diseases and Conditions table</a> specific enteric pathogens.</li> <li>● Post <a href="#">Contact Plus</a> (and <a href="#">Droplet</a> when vomiting present) signage at entrance to client room.</li> <li>● Post <a href="#">donning sign</a> at entrance to client room in a visible location.</li> <li>● Post <a href="#">doffing sign</a> in the doffing zone inside the client room.</li> <li>● Site leadership and ICP to review close contacts of symptomatic clients on a case-by-case basis to determine if additional precautions are required. (e.g. Roommates or tablemates where a client may have had an episode of emesis or uncontained loose stool thus exposing other clients.)</li> <li>● Where possible dedicate toileting facilities and consider using a disposable containment system such as a commode/bedpan liner (see Appendix A for products).</li> <li>● Use disposable equipment when possible (e.g. disposable blood pressure cuff).</li> <li>● If disposable equipment is not available, dedicate equipment to symptomatic clients. Clean and disinfect shared equipment using a <a href="#">2-step process</a> after every use.</li> </ul>
<p><b>3. VGI Testing</b></p>	<ul style="list-style-type: none"> <li>● Collect specimens for symptomatic clients who meet case definition. Any stool and/or emesis specimens may be collected and stored in a dedicated specimen fridge until picked up by courier service. <a href="#">Samples may be stored for ≤ 24 hours at 4°C.</a></li> <li>● Required specimen labelling (<b>must have</b> at least 2 patient identifiers):             <ul style="list-style-type: none"> <li>➢ Client’s first and last name, <b>AND</b> PHN or MRN or birthdate</li> <li>➢ Specimen type (i.e., nasopharyngeal)</li> <li>➢ Collection date and time</li> </ul> </li> <li>● Complete the <a href="#">VCH-Outpatient Requisition</a> each sample sent to VGH lab (see <a href="#">sample completed requisition</a>).</li> <li>● The following fields on the VCH Outpatient Requisition <b>must</b> be completed:             <ul style="list-style-type: none"> <li>➢ Ordering Practitioner Name (MRP), Address, Phone, MSP Billing #, copy to Practitioner/Site Name.</li> <li>➢ Client: Name AND PHN or Date OR Birth.</li> <li>➢ Site address where client located.</li> <li>➢ Date and Time of collection.</li> <li>➢ Staff signature and date.</li> <li>➢ In the “Other Tests” section, write: “Infectious Diarrhea Panel NAT” AND specimen type (i.e. feces, emesis).</li> </ul> <p><b>NOTE:</b> Information on the lab requisition must match the information on the specimen label.</p> </li> <li>● It is the responsibility of the site to send specimens to the Vancouver General Hospital Laboratory using your established courier service, taxi service or by dropping samples off. Samples should be couriered to:</li> </ul>

	<p>Vancouver General Hospital Medical Microbiology Lab Receiving 855 West 12<sup>th</sup> Avenue Jim Pattison Pavilion Vancouver BC V5Z 1M9</p> <ul style="list-style-type: none"> <li>• Samples are received daily (including statutory holidays) between 0700-2200h. Order <a href="#">sterile collection containers</a> from VCH Supply Chain (ePro # 00008431).</li> </ul>
<b>4 . Hand Hygiene</b>	<ul style="list-style-type: none"> <li>• Soap and water hand washing is the preferred method of hand hygiene when supporting a client with gastrointestinal illness. If a hand hygiene sink is not available at the point of care, use the first available method of hand hygiene (ABHR) and then proceed to a dedicated hand hygiene sink.</li> </ul>
<b>5. Symptom Screening</b>	<ul style="list-style-type: none"> <li>• Increase symptom screening of all clients to <b>twice daily</b> until <b>4 days (96 hours)</b> from last client symptom resolution.</li> <li>• Record client GI symptoms including date, time, number and type of episodes using the <a href="#">Bristol Stool Chart</a> (e.g. Type 6 or 7).</li> </ul>
<b>6. Enhanced Cleaning</b>	<ul style="list-style-type: none"> <li>• Consider enhanced cleaning when two or more VGI cases are identified on the unit</li> </ul>
<b>7. Group Activities</b>	<ul style="list-style-type: none"> <li>• Clients on Contact Plus (and Droplet) precautions may not attend group activities.</li> <li>• Asymptomatic clients may participate in group activities.</li> <li>• No shared food.</li> </ul>
<b>8. GI Monitoring - Staff</b>	<ul style="list-style-type: none"> <li>• Encourage staff to self-monitor for symptoms and stay home when symptomatic.</li> <li>• Symptomatic staff: Follow-up with own healthcare provider as needed.</li> <li>• VCH staff to report work absence to the Provincial Workplace Health Call Centre (1-866-922-9464).</li> <li>• If staff experience nausea, vomiting or diarrhea at work they should: <ul style="list-style-type: none"> <li>➢ Notify their leader or charge nurse.</li> <li>➢ Avoid further client contact.</li> <li>➢ Transfer essential duties and go directly home.</li> <li>➢ Close toileting facilities used by the symptomatic staff member until cleaned and disinfected.</li> </ul> </li> <li>• Symptomatic HCWs are <b>excluded</b> from work: <ul style="list-style-type: none"> <li>➢ Exclude ill staff from working in any health care facility until they are symptom free for <b>48 hours</b>.</li> <li>➢ Exclude ill food-handler staff from work in any health care facility until they are symptom free for <b>72 hours</b>.</li> </ul> </li> </ul>
<b>9. Discontinuing Precautions</b>	<ul style="list-style-type: none"> <li>• When Contact Plus/Droplet precautions can be discontinued, coordinate “additional precautions clean” when the client is not occupying the room.</li> <li>• Offer client a bath/shower and clean clothing when ready to discontinue additional precautions.</li> <li>• Remove additional precaution signage after environmental cleaning is complete.</li> </ul>

## Appendix A

Product	Description	Photo	Brand	Supply Chain Ordering Information
Emesis Bag w/ Absorbent Powder	Portable emesis bag with absorbent inner lining to help solidify emesis and enable disposal in garbage.		<a href="#">Hygie Canada</a>	PeopleSoft Item #: 00105357 20/Package
Vernagel Super Absorbent Powder	Polymer based powder that absorbs fluids (e.g. urine, blood, feces, vomit) into a semi-solid state enabling safer disposal.		<a href="#">Vernacare</a>	PeopleSoft Item #: 00078234 100/Box
Commode Liner/Large Emesis Basin Disposable Pulp Fibre	Disposable bed pan/commode liner		<a href="#">Vernacare</a>	PeopleSoft Item #: 00068954 100/Case
Hygienic Bedpan/Commode Cover	Disposable cover for bedpan/commode for effective management/containment of body waste at point of care.		<a href="#">Hygie Canada</a>	PeopleSoft Item #: 00095514 20/Box
Sterile Collection Container	Container Specimen Orange Top 90ml		Starplex Scientific Inc	PeopleSoft Item #: 00008431 1 each