



Standard Operational Guidance

Infection Control Policy for Staff who come into contact with Patients with Meningococcaemia

Document Control Information

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Infection control policy for staff who come into contact with patients with meningococcaemia

1. Purpose

This guideline outlines the procedures recommended when managing the retrieval of a child who has suspected Meningococcal Disease. It is based on the current Health Protection Agency Meningococcus Forum advice. (HPA2011). The main points of this document are also applicable to other GOSH staff. Individual exposures should be discussed with infection control or microbiology and reported as clinical incidents.

2. Background

Secondary Meningococcal Disease in health care workers is rare.

- Chemoprophylaxis is recommended **only for those** whose mouth and nose is directly exposed to large particle droplets/secretions from the respiratory tract of a probable or confirmed case of meningococcal disease during acute illness phase until completed 24 hours of systemic antibiotics.
- This type of exposure will only occur among staff who are working close to the face of the case without wearing a mask or other mechanical protection.
- **General medical and nursing care of cases is not an indication for prophylaxis.**
- The clearance of nasopharyngeal organisms is not immediate following IV antibiotic administration and **it is recommended that all precautions are maintained up to 24 hours after the first IV antibiotic dose.**
- In a retrospective survey of risk in healthcare workers in England and Wales, 3 pairs of primary cases of health-care workers with secondary infections were identified (1982-96).
- One of these cases was following an airway insertion and another followed exposure to a patient cough during fundoscopy examination. None had worn masks.
- The estimated secondary infection rate of 0.8 per 100 000 health-care workers at risk, is a risk **25 times that of the general population (p=0.0003).**

3. Recommended use of Personal Protective Equipment (PPE).

The risk appears to be that of unprotected airway exposure to nasopharyngeal droplets/secretions. Intubation and airway suctioning are high risk procedures for cross infection. Potential risk also occurs within 3 feet of a patient whilst he or she is coughing.

All medical, nursing and ambulance team members should wear the following Personal Protective Equipment at all times when near the patient.

This includes:

- Surgical mask (eye protection visor preferable but not essential if unavailable)
- Plastic aprons (if available)
- Standard disposable gloves

4. Post Exposure Prophylaxis

Effective use of Personal Protective Equipment removes the need for prophylactic antibiotics. However, if unprotected nose/mouth exposure did occur the following antibiotics are recommended for CATS team members:

Ciprofloxacin 500 mg orally as a single dose or rifampicin 600 mg orally twice daily for 2 days.

Pregnancy: Ceftriaxone (IM) or azithromycin can be used as chemoprophylaxis in pregnancy (HPA 2011).

Below are drug information sheets to aid drug selection for a particular team member. The prescribing doctor should discuss these health issues in confidence.

- **Prescription sheet** is below.
- Print out a **drug advice** sheet for the team members (below).
- GOSH pharmacy will dispense the antibiotics.
- There will be no pharmacy fee.
- **Ring pharmacy in advance** to expedite request, ask to speak to a senior pharmacist.
- **Our of hours bleep the on-call pharmacist on 0714 ASAP.**
- If both drugs are contraindicated **IM ceftriaxone** is an alternative.
- Please discuss with the on-call infection control Consultant.

Please be aware that the pharmacist has to input all your details on their system which can take some time especially if a number of staff require prophylaxis so a timely call is much appreciated

Exposure of the eyes to respiratory droplets (i.e. wearing a mask without a visor) is not considered an indication for prophylaxis. Such exposure may however carry a low risk of meningococcal conjunctivitis and subsequent invasive disease. Staff should be counselled about this risk and advised to seek early treatment if conjunctivitis should develop within 10 days of exposure.

5. Vaccination

Meningococcal vaccination is available from occupational health for all CATS and ITU staff. It does not provide protection against most strains so vaccinated staff should take precautions to prevent exposure and should be prophylacted if exposed.

Further Reading;

1. Guidance for Public Health Management of Meningococcal Disease in the UK, Reviewed March 2012

POST EXPOSURE TO MENINGOCOCCAEMIA GUIDANCE

PPE PROTECTION USED (MASKS/VISORS/APRONS/GLOVES)
WHEN DEALING WITH THE UNPROTECTED AIRWAY

YES

EFFECTIVE PPE USE
SHOULD REMOVE THE NEED
FOR PROPHYLACTIC
ANTIBIOTICS

NO

ON RETURN TO CATS OFFICE
SPEAK TO YOUR CONSULTANT RE
PROPHYLAXIS. IF YOU ARE AWARE OF
OF OTHER STAFF WHO MAY HAVE
BEEN EXPOSED, ENSURE THAT THEY
ARE CONTACTED

PRINT OFF PRESCRIPTION SHEET AND
DRUG ADVICE SHEET
FOUND ON THE CATS//DRIVE IN THE SOPS
FOLDER HEADED "QUICK GUIDE TO.."

RIFAMPICIN or **CIPROFLOXICIN** ARE APPROPRIATE
CHOICES AND WILL BE DISPENSED BY THE
PHARMACY AT GOSH. THE CHOICE OF WHETHER TO
PRESCRIBE RIFAMPICIN OR CIPROFLOXACIN
SHOULD BE BASED UPON OTHER CONCOMITANT
MEDICATIONS AND POSSIBLE DRUG INTERACTIONS

CALL GOSH PHARMACY IN ADVANCE TO EXPEDITE
REQUEST.
OUT OF HOURS CONTACT THE ONCALL PHARMACIST
ON **BLEEP 0714**
TAKE PRESCRIPTION SHEET TO PHARMACY
(THERE IS NO CHARGE FOR THIS SERVICE)

Meningococcal Disease Post Exposure Prophylaxis

Rifampicin Prescription

Name:

Date of Birth: / /

Hospital Number:
(if known)

Drug allergies/sensitivities:

Allergies/sensitivities must be documented before administration except in exceptional circumstances

RIFAMPICIN milligrams orally twice daily for 2 days

(Recommended dose in adults and children over 12 years old is rifampicin 600milligrams orally twice daily for 2 days)

Is member of staff on any concomitant medications? Y / N

If yes, please specify:

.....
.....

Have drug interactions been checked? Y / N

Please specify:

.....
.....

Has the member of staff's pregnancy status been checked? Y / N

Prescriber's Name:

Prescriber's GMC/NMC No:

Prescriber's Signature:

Date:



Rifampicin Advice Sheet

The antibiotic you will be given is called rifampicin. It comes as either tablets or syrup and is suitable for people of all ages. The meningococcal germs that cause meningitis and septicaemia can be carried in the nose and throat, this antibiotic will kill them. Rifampicin is an antibiotic which is frequently used to treat lots of different conditions. It is recommended in national guidelines for close contacts of someone with meningococcal disease.

Administration

Rifampicin must be taken twice a day for 2 days (morning & evening). The instructions will be clearly written on the box or bottle.

It is important that you take a 2-day course. It is taken by mouth and should be taken one hour before a meal to obtain the best effect.

You may have extra medicine left, which should be disposed of safely.

Side Effects (seek medical advices as required)

- Orange/reddish staining of urine, saliva and tears. This is normal – so do not be alarmed.
- Rifampicin may **permanently stain some contact lenses** so you should not wear contact lenses whilst on treatment or for the following week.
- Stomach upset, diarrhoea and nausea
- Skin flushing and itching, with or without a rash
- Very rarely, jaundice (yellowing of the skin or whites of the eyes)
- May reduce the effect of several medicines including
 - blood thinning medication (anticoagulants)
 - diabetic medication
 - some types of epilepsy medication (anticonvulsants)

Please tell the Prescribing CATS doctor if you

- Take any medication
- Are allergic to rifampicin
- Are pregnant or breast feeding

Contraceptive Pill

Rifampicin may interfere with the action of the oral contraceptive pill (the pill). If you are taking the contraceptive pill you should continue to take it as usual but use extra protection (e.g. condoms) whilst you are taking rifampicin and for 4 weeks afterwards. Also, you should ask the doctor who prescribed your contraceptive pills for advice as you may need to take extra contraceptive pills (as well as using other protection). Rifampicin does not affect other types of contraception.

If you are unclear or would like further information, please contact: -

Great Ormond Street Medicines Information: 0207 829 8608 or the on-call CATS Consultant

Meningococcal Disease Post Exposure Prophylaxis

Ciprofloxacin Prescription

Name:

Date of Birth: / /

Hospital Number:
(if known)

Drug allergies/sensitivities:

Allergies/sensitivities must be documented before administration except in exceptional circumstances

CIPROFOXACIN milligrams. Single dose.

(Recommended dose in adults is ciprofloxacin 500 milligrams as a single dose)

Is the member of staff on any concomitant medications? Y / N
If yes, please specify:

.....
.....

Have drug interactions been checked? Y / N
Please specify:

.....
.....

Has the member of staff's pregnancy status been checked? Y / N

Prescriber's Name:

Prescriber's GMC/NMC No:

Prescriber's Signature:

Date:

Ciprofloxacin Advice Sheet

The antibiotic you will be given is called ciprofloxacin. The meningococcal germs that cause meningitis and septicaemia can be carried in the nose and throat, this antibiotic will kill them. Ciprofloxacin is an antibiotic which is frequently used to treat lots of different conditions. It is recommended in national guidelines for close contacts of someone with meningococcal disease. If you are pregnant an alternative drug should be used eg IM ceftriaxone.

Administration

Ciprofloxacin comes in tablet form. You will receive either one or two tablets of ciprofloxacin. It is taken by mouth as a one off dose with a glass of water. It is important that you drink plenty of fluids for the rest of the day after having this antibiotic.

Do not take the tablet if you have taken antacid/indigestion medicines or preparations containing iron or mineral supplements within the last 4 hours. Please see the doctor or nurse if this is the case.

You should also avoid taking alcohol with this medication as it may make you drowsy affecting your ability to drive or operate machinery.

Side Effects (seek medical advice as required)

- **Anaphylaxis** - very rarely breathing difficulties may occur with facial swelling. **You should seek medical attention urgently if this occurs.**
- Stomach ache, diarrhoea and nausea
- Tiredness and headaches
- Rash and itching
- Pain and inflammation around the joints

Please tell the prescribing CATS doctor if you are

- Allergic to ciprofloxacin
- Pregnant or breastfeeding
- Taking any other medication
- Have a history of epilepsy or G6PD deficiency

If you are unclear or would like further information, please contact:

Great Ormond Street Pharmacy Medicines Information: 0207 829 8608 or the on-call CATS Consultant