

## 7.1 Action card – Suspected HCID ongoing management- Lead clinician for the patient (usually Consultant or GP)

<b>Lead clinician for the patient (usually Consultant or GP)</b>		
<b>Situation: Patient under your care has been assessed as suspected HCID by infection specialist. Patient is at home or in your healthcare facility. Infection specialist has discussed patient with you and agreed initial management plan.</b>		
<b>Actions (all must be performed)</b>	<b>Notes</b>	<b>Done</b>
Inform Lead Nurse that patient is to be managed as 'suspected HCID'	Signpost Lead nurse to their action card	
Inform NHSH Duty microbiologist of patient	<p>This is important and may not have been done yet.</p> <p>Inform of patient location and whether isolated.</p> <p>Inform of likely clinical care needs and risk of deterioration.</p>	
Continue to look after patient until handed over to SAS or stepped down.	<p>Minimise staff exposure to patient</p> <p>If face to face care or contact required:</p> <ul style="list-style-type: none"> <li>• HCID assessment PPE should be worn (as per National Infection Prevention and Control Manual Scotland). Obtain advice from IPC duty nurse</li> <li>• Care should be provided by the most experienced clinical staff who are FFP3 fit tested and trained in HCID PPE donning and doffing</li> </ul>	
With duty manager plan for staffing of ongoing clinical care until retrieved	See duty manager action card	

Patient samples	<p>No patient samples to be taken without authorisation from consultant microbiologist, including for point of care testing.</p> <p>If samples are taken follow guidance on how to take and transport safely given in this document</p>	
If GP – arrange ambulance for transfer	This is after transfer has been agreed with receiving ID consultant, usually in Glasgow or Grampian	