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KAMPUS UNISZA









Programs Offered

- Diploma in Radiography
 - 3 years (full-time)
 - Current: 65 students
- Bachelor of Medical Imaging (Honours)
 - 4 years (full-time)
 - Current: 153 students
- Masters and Doctor of Philosophy
- Website: http://fsk.unisza.edu.my



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Radiographer (2006 – 2011)

Lecturer (2012 – 2014)

Senior Lecturer (2018 till now)

Diploma Medical Imaging

BSc Medical Imaging (Honours)
UiTM

Radiology Department at Damai Service Hospital (HQ), Kuala Lumpur.



MSc Medical Imaging

UiTM Puncak Alam

KL Metropolitan University College

Radiographic Equipment; Healthcare Management; Physics for Radiographers; Nuclear Medicine. 2015 – 2018 Further PhD at University of Sydney, Australia.

Head of School of Medical Imaging, Faculty of Health Sciences, UniSZA

Computed Tomography; Digital Imaging Process; Writing for Scientific Purpose; Research Methodology

In this presentation, we will be looking at two ways perspectives:-

- ✓ Steps taken by the Hospital Administration
- ✓ Steps taken by the Radiology Department



Steps Taken by Hospital Administration



Creation of a Communication Infrastructure

- Pandemic Management Team (Task Force)
- All departments nominate pandemic representatives
- Daily updates
 - Video conferences (ONLINE meeting, Whatsapp, Telegram etc.)
 - Dedicated intranet page (Radiology portal, Staff portal etc. including website links)



RESPONSIBILITIES OF TASK FORCE

Receive report and begin to act

Contact PIC/HOD

Isolate the suspected

Schedule disinfection

Mengambil tindakan segera terhadap aduan jika seseorang di tempat kerja dikesan mempunyai gejala COVID-19.

2. Berhubung dengan
Penyelaras atau
Pegawai
Perubatan (jika ada) untuk
dimaklumkan
kepada majikan.

3. Mengasingkan orang yang bergejala COVID-19 ke tempat khas yang disediakan dan seterusnya dirujuk ke hospital untuk pemeriksaan lanjut.

4. Membantu majikan melaksanakan kerja disinfeksi di tempat yang dikenalpasti bersama agensi berkaitan (jika perlu)











Patient Management

- Elective procedures cancelled / postponed (3 6 months)
- Ban on vacations and official trips
- Dedicated COVID-19 emergency unit
- Dedicated hospitals/wards for COVID-19 patients (currently 40 COVID-19 hospitals in Malaysia)
- Expanded intensive care capacity (improve number of beds, medical equipments etc.)
- Mobile apps MySejahtera, MyGerak etc.









MyTrace

GOVERNMENT OF MALAYSIA Lifestyle 3.

Add to Wishlist





MyTrace is a mobile application (app) to help the health authority to manage the COVII MyTrace adopts a community-driven approach where participating devices exchange

MySejahtera is an application developed by the source of the series of perform health series assessment approach where participating devices to perform health series assessment approach where participating devices to perform health series assessment approach where participating devices to perform health series assessment approach where participating devices to perform health series as a series of the series and the series as a series of the series as a series of the series and the series as a series of the



Protection of Staff

- Process instruction on protective gear
- Rationing of protective gear (if limited supplies)
- PCR-testing for
 - Staff with unprotected COVID-19 contact
 - Staff returning from travels
- Vaccination for staff (influenza, pneumococci,...)



Protective gear used by Covid-19 frontliners

Number of days before stock finishes (As of March 14, 2020)



78 daysFootwear
/boot cover



52 days Protective head cover



47 days 3-ply masks



37 days N-95 masks



25 daysDisposable face shield

Source: Health Ministry



23 days Disposable fluid resistant apron











Contact Restrictions

- No visitors allowed to any wards / NEW visiting hours
- Closure of entrances, checks on staff in-out (daily temperature check etc.)
- Nearly or completely closed canteen/café (bring from home, deliveries etc.)



Steps Taken by Radiology Department



Creation of a Communication Infrastructure

- Daily communication via telephone, social apps, etc. with head of department
- Nomination of a chief coordinator for COVID-19 pandemic (person-in-charge)
- Briefing of all staff by e-mail at least twice a week (update any changes to the workflow etc.)
- Provision of information and scientific publications



Protection of staff

- Centralized storage and distribution of protective gear (dedicated room, have PIC and control in-out)
- Ordering of larger amounts of protective gear and disinfectants (as back up if required)
- Information on psychological counselling services (mental health)
- Simulation trainings donning and doffing PPE
- Follow specific hygiene guidelines (SOP) for each modality (CT, MRI, Mobile, Ultrasound etc.)



WORKFLOW AND WORK PROCESS FOR RADIOLOGICAL EXAMINATION DURING COVID-19 OUTBREAK

1. Mobile X-ray

- · Request made manually or online
- The ward staff shall call and inform the radiology personnel of the examination to be performed.
- An appropriate time is determined for the examination to be carried out.

1.1.Registration

All request for radiological exam shall be pre-registered prior to receiving the patient.

1.2. The Radiographer

- The radiographer has to abide by the precautions given in the Infection Prevention and Control measures (Annex 8) on the necessary steps to limit COVID-19 transmission.
- Recommended to have just a core number of radiographers trained for this exercise.

1.3.Lead gown

- Clean on both sides (front and back).
- Lead gown to be worn before the radiographers donned the PPE for infection control.



ANNEX 8

THE INFECTION PREVENTION AND CONTROL (IPC) MEASURES WHEN 2019 NOVEL CORONAVIRUS (2019-nCoV) INFECTION IS SUSPECTED OR CONFIRMED

THE INFECTION AND PREVENTION CONTROL GUIDING PRINCIPLES

The principles of IPC for acute respiratory infection patient care include:

- Early and rapid recognition AND source control that includes promotion of respiratory hygiene
 - Early recognition and investigation, prompt implementation of IPC precautions, reporting and surveillance, and supportive treatment to make patients noninfectious by strictly adhering to Interim definitions of the epidemiological AND Clinical Criteria in the case definition
 - Post visual alerts (in appropriate languages) at the entrance to outpatient facilities (e.g., emergency departments, physicians' offices, outpatient clinics) instructing patient and the persons who accompany them to inform healthcare personnel of symptoms of a respiratory infection when they first register for care, and practice respiratory hygiene/cough etiquette
- a) Application of routine IPC precautions (Standard Precautions) for all patients;









Wearing appropriate protective gear at department.





Radiographer is going to do mobile examination.





Waiting Area – social distancing, disinfection

Contact Restrictions

- Reception counters closed (only phone registration)
- Only scheduled examinations of outpatients
- Limited access to waiting areas
- Guiding for staff accompanying patients isolated because of COVID-19 / suspected
- Restrictions for staff in control room



- Only allow teams of two radiographers for Xray, CT, MRI:
 - Surgical masks in control room.
 - Surgical/FFP masks, gloves, coats, face shields when handling patient in examination room.
 - Visiting Team will wait in corridor with patient transport service/critical care team accompanying patient and will then disinfect the room and equipment.

Patient Management

- Dedicated scanners / rooms for COVID-19 patients
- CT: Structured reporting of chest and head scans (for fast results); patient is isolated before and after exam.
- Ultrasound: All isolated patients are examined bedside (at Ward/Room).
- X-ray: Separate X-ray unit in COVID-19 emergency unit. Disinfect before/after examination.







