COVID-19
Precautions to be Taken in Physical Therapy and Rehabilitation Centers

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Patient Management

1. The number of patients served in the center should be reduced. The treatments other than urgent and mandatory treatments should be postponed.

2. In urgent and mandatory situations, patients should be questioned for respiratory symptoms such as fever, cough, and shortness of breath.

3. It is appropriate to re-schedule the routine follow-up appointments and offer home programs with trainings on printed, visual material for any non-emergency situation.

4. Physical therapy services of the definite/possible COVID-19 patient should be postponed.

Health Worker

1. The number of workers in the center should be reduced. Personnel who care for the group with severe course of disease (over 60 years of age, with diabetes, chronic cardiovascular system and lung disease, hypertension, cancer, etc.) should not work if possible.

2. Periodic training should be provided to healthcare professionals about the symptoms of COVID-19 and prevention methods, and training should be recorded.

3. The trainings should be compatible with the guidelines and other materials prepared and published by the Ministry of Health.

4. Personal protective equipment (protective apron, medical mask, goggles / face protection, gloves) should be kept available for the healthcare worker.

5. When wearing and removing personal protective equipment, care should be taken to wear (gown, medical mask, goggles, face shield and gloves) and take off (gloves, goggles, face shield, gown, medical mask) them in accordance with the rules in proper order. Especially the mask should be taken off upon leaving the station and then hand hygiene should be ensured immediately.

6. The used gloves, gown, medical mask and disposable face shield should be thrown into the medical waste bin. Non-disposable material (glasses and face shield) can be disinfected with 70% alcohol and reused. Reusable textile gowns
can be washed at 60-90°C and reused.

7. The healthcare worker who cares for a definite/possible COVID-19 patient should take standard, contact and droplet isolation measures.

8. A minimum distance of 1 meter should be provided between the staff and patients, and if it is necessary to approach at a distance of less than 1 m, the healthcare worker should use gowns, goggles/face shield and gloves in addition to the medical mask.

9. Correct use of gloves is very important. Since non-replaced gloves will cause contamination, care should be taken not to touch the patient's environment and hand hygiene.

10. Hand hygiene can be achieved for at least 20 seconds by hand washing with soap and water, or by hand rubbing with an antiseptic containing alcohol.

11. Cleaning and disinfection should be concentrated on the places that are frequently touched by hand (electric switches, door handles etc.). Surface disinfection can be achieved by using a disinfectant preferred in hospital disinfection after cleaning with water and detergent. 1/100 diluted bleach (Sodium hypochlorite Cas No: 7681-52-9) or chlorine tablet (according to product recommendation) can be used. Chlorine compounds can cause corrosion on surfaces. Chlorine is a recommended disinfectant for durable surfaces. 1/10 diluted bleach (Sodium hypochlorite Cas No: 7681-52-9) or chlorine tablet (according to product recommendation) is used on surfaces contaminated by patient extracts. 70% alcohol can be used for surface disinfection for 1 minute.

12. All healthcare workers should be questioned every day for COVID-19 symptoms and contact history.

13. Arrangements should be made so that the distance between tables and chairs is at least 1 meter (preferably 2 meters) in the dining hall and resting areas of the staff. In order to make contact follow-up easy, meal times should be determined according to the groups and if possible, the same people should eat at the same table.

14. Staff with signs and symptoms of respiratory system should be referred to a pandemic hospital with a medical mask for evaluation against COVID-19.

15. If COVID-19 positivity is detected in the personnel, the management of the other personnel is planned by the relevant department according to the Evaluation of Healthcare Worker with Contact algorithm. Those in close contact with the infected staff should be identified and followed up by the Provincial Health Directorate.