

Medical Transfer from Overseas; Guidance for Local Public Health England Centres

The recent identification of Middle East respiratory syndrome coronavirus (MERS-CoV), causing a severe acute respiratory illness, is a reminder that continuing vigilance is required for new and emerging public health threats, as well as for those which are already well understood. Since September 2012 more than 50 cases of MERS-CoV have been identified globally, including in European countries, with approximately half of these people having died. While all cases identified so far have had either a direct or indirect connection with the Middle East, some cases in travellers from the Middle East have resulted in local, non-sustained transmission to close contacts, including health care staff. Although such threats may emerge anywhere in the world, including in the UK, the experience of Severe Acute Respiratory Syndrome in 2003 demonstrated the potential for rapid global spread and significant public health consequences in countries importing cases of serious acute infectious illness from abroad.

All clinicians and hospital management in both the public and private sectors are reminded of the importance of appropriate public health risk assessment for medical transfers from overseas. The purpose of such assessment is to ensure that appropriate measures are taken where necessary to protect health care workers and the wider public in the UK from potential infectious disease threats. There are no detailed data available on medical transfers to the UK each year. It is probable that the majority of medical transfers will not pose any infectious risk. However it is important that public health risk assessment is carried out where a possible infectious disease threat may exist. To this end an algorithm has been developed by Public Health England (PHE) for receiving clinicians/hospitals to encourage them to seek advice from their local PHE centre about medical transfers from overseas, and to help them decide when this is appropriate. This algorithm is available at: http://www.hpa.org.uk/AboutTheHPA/WhatTheAgencyDoes/PortHealth/PortHealthM edicalTransfersFromOverseas/. The algorithm endeavours to limit the number of unnecessary calls to local PHE centres while simultaneously ensuring that patients with potentially significant conditions are brought to the attention of the local PHE centre so that appropriate infection control and public health action may be recommended. It also reminds clinicians in England and Wales of their statutory duty to notify a 'Proper Officer' of any infection or contamination which could present a significant risk to human health.

When called by a receiving clinician/hospital about a patient to be transferred from overseas, the local PHE centre will need to perform a public health risk assessment and offer advice with respect to, for example;



- whether the hospital is the most appropriate one to receive the transfer in terms of its available facilities to manage both the clinical issues and the risk of possible infection, or whether a different destination should be considered
- appropriate infection control procedures during transfer of the patient from the arrival point in the UK to the hospital, and on admission, including the use of appropriate isolation facilities as required.
- appropriate use of Personal Protective Equipment including the use of FFP3
 respirators by staff who have been fit tested; staff who have not been fit
 tested for these masks should avoid patient contact.
- limitation of personnel exposed to the patient and recording of contact details of all people potentially exposed
- follow up action with respect to any health care workers/ other contacts of the patient

Each situation will need to be risk assessed and advice developed on a case by case basis, though standard principles will in most cases apply. The local PHE centre may itself seek further advice and support via usual mechanisms from disease specific experts at the PHE Centre for Infectious Disease Surveillance and Control (CIDSC, Colindale), Microbiological Services (MS), and from the Imported Fever Service, which provides 24-hour telephone access to expert clinical and microbiological advice to support patient management, infection control and public health interventions.

http://www.hpa.org.uk/ProductsServices/MicrobiologyPathology/LaboratoriesAndReferenceFacilities/RareAndImportedPathogensDepartment/ImportedFeverService/

Local PHE centres are asked to also inform the UK International Health Regulations National Focal Point at CIDSC (ihrnfp@phe.gov.uk) of any instances where they are approached by a receiving hospital/clinician for advice about a medical transfer from overseas so that the numbers of such approaches can be monitored, and so that any public health risk of potential national or international importance is captured.