

PROPER SANITATION IS THE ONLY METHOD TO SUCCESSFULLY BEAT A CHOLERA OR SHIGELLOSIS OUTBREAK!

What to use for disinfection*:

Chlorine product	Hands and skin	Floors, clothes, bedding, equipment.	Body fluids** (Rice Water stool, Diarrhea, Vomit treated in large containers)
	Final concentration: 0.05% active chlorine	Final concentration: 0.5% active chlorine	Final concentration: 2% active chlorine. Wait at least 2 hours before dumping.
Household bleach (5% active)	0.1 liters of bleach to 9.9 liters of water (WRITE: 0.05%)	1 liter of bleach mixed with 10 liters of water (WRITE: 0.5%)	4 liters of bleach mixed with 6 liters of water (WRITE: 2%)
Household bleach (30% active chlorine)	Add 16 grams or 1 tablespoon to 10 liters of water (WRITE: 0.05%)	16 grams or 1 tablespoon to 1 liter of water (WRITE: 0.5%)	64 grams or 4 tablespoons to 1 liter of water (WRITE: 2%)
Calcium hypochlorite powder or chlorine granules (70% active chlorine)	7 grams or 1/2 a tablespoon to 10 liters of water (WRITE: 0.05%)	7 grams or 1/2 a tablespoon to 1 liter of water (WRITE: 0.5%)	28 grams or 2 tablespoons to 1 liter of water (WRITE: 2%)

* ALWAYS label the solutions with a permanent marker.

** Note that if chlorine is limited, body fluids can be treated with a final concentration of 0.5% chlorine, but the fluids must be held and occasionally stirred for at least 6 HOURS before dumping.

Education of Patient Caretaker (Family Member):

Inform the Patient Caretaker of their duties in terms of how the patient waste should be handled, where the bathrooms or latrines are located, where hand washing stations are located, and what food items (including at what time) the family is expected to provide and what food items the treatment center will provide.



**COTS Program
Health Promotion Worker
Pocket Card**

WHO messages to avoid diarrhea:

- Wash your hands with soap:
 - After using toilets/latrines
 - After disposing of children’s feces
 - Before preparing food
 - Before eating
 - Before feeding children
- Boil or disinfect water with chlorine solution
- Only eat freshly cooked food
- Do not defecate near water sources
- Use latrines and keep them clean
- Peel it, cook it, or leave it

**Food and Water Hospital Policies
(in addition to WHO messages above):**

- ORS should not be stored for more than 6 hours.
- Health care workers should **NOT** handle food or water
- The kitchen should be **SEPERATE** from the hospital; kitchen staff should not handle hospital waste
- Dispose of all unused cooked food if there is no refrigeration (below 10°C)
- All food should be cooked thoroughly to at least 70°C
- Keep raw and cooked foods separately
- A treatment center must have 40-60 liters of clean water per patient per day
- Rice-water stool (diarrheal fluids) and vomitus fluids should be disposed of by the sanitation team

What to use for disinfection?

Follow the directions on the General Knowledge Pocket Card on how to make working bleach solutions.

Collecting diarrheal and vomitus waste from buckets and basins:

- Empty all buckets at least every 8 hours into a large container on a trolley.
- Providing a small basin will allow the patients to vomit more easily at the bedside. Empty these basins at the same time that the buckets are emptied into the same large container. Be careful -- this vomit may also contain *V. cholerae* or *Shigella* spp. may also contain *V.*

Cleaning latrines:

- The slabs and the floors of the latrine should be washed at least daily.
- The slabs and the floors should be disinfected with cresol or bleaching powder regularly.
- Once the latrine is 2/3 full (1.3 meters high from the bottom or 0.7 meters from the top), or when it will no longer be needed, fill it with soil and compact the soil.

Disposing of waste. There are two options for waste disposal:

- Disinfect the waste with bleach as described on the General Knowledge Pocket Card. If the waste is ultimately dumped into a sewer system, we strongly advise that the diarrheal waste is first bleached for fear of cross-contamination between drinking water and sewer systems.
- If there is a proper latrine designated for only the disposal of diarrheal waste from the buckets and basins, the pooled waste can be immediately dumped into the latrine. This waste does not need to be bleached.

Safety issues:

- All medical sharps (needles, razor blades, etc.) should be properly incinerated.
- Clean-up crew members should wear safety clothing in the form of rubber boots, and rubber aprons when handling large volumes of diarrheal fluids. If available, latex gloves and eye protection can be worn. The Clean-up crew should wear clothing dedicated for work at the hospital that is washed daily. At the end of the day, the Clean-up crew should carefully wash themselves with soap and change into their after-work clothing.
- Avoid skin contact with bleaching agents.
- Do not enter areas where ORS or food is being prepared because of contamination problems.
- Lift heavy things by bending at the knees and lifting with your legs instead of bending over and lifting with your back, which can cause injury.