

Attachment A

Disease management protocols followed by HSP

Disease	Diagnosis	Management	Comments
Chlamydia	On symptoms and signs and pathology.	Azithromycin	Contacts in foreign countries. Clients counselled.
Crypto-sporidium	Symptoms and stool for culture.	Fluids.	Personal hygiene and education for contacts.
Dengue	Symptoms and signs in very recent boat arrivals.	Rapid test; if positive – to hospital for treatment.	CI has Aedes albopictus, mosquito, which is a secondary vector. There is no Aedes egypti detected so far. Inform WA PHU
Gonorrhoea	On symptoms and signs and pathology.	Ceftriazone 250mg IM	Contacts in foreign country. Client counselled.
Hand, foot and mouth	Clinical.	Symptomatic.	Exclusion from school and other children. Inform Public Health CI.
Hep B	On induction blood.		All chronic carriers are counselled. WA PHU informed.
Hep C	Blood test arise offered to patient with past history of drug use.	Further test for viral loads and LFT	Notifiable disease
Hepatitis A	On clinical grounds.	To hospital for blood tests and isolation. Contact tracing.	Vaccinate contacts.
Impetigo (School sores)	Skin diagnosis.	Antibiotics	Hygiene for self and contacts. Exclusion from school.
Influenza	Signs and symptoms.	Fluids, analgesics.	Education for the compound. Seasonal vaccination.
Malaria	Diagnosed on symptoms.	Blood tests at hospital and treatment.	CI does not have Anopheles mosquitoes (ie. clients do not contract Malaria on CI). Inform Public Health CI and WA PHU.
Measles, Mumps and Rubella	Clinical.	Isolation during infective phase.	Inform Public Health CI. Exclusion from school. Early MMR vaccination in new arrivals when indicated.
Meningococcal	Signs and symptoms.	Ceftriaxone. Hospitalisation.	Education and vaccination. Inform Public Health CI. Antibiotic prophylaxis for possible contacts
Pertussis	Clinical and blood test.	Erythromycin. Quarantine.	Notifiable disease. Exclusion from school.
Shingles / Herpes Zoster	Clinical.	Famvir/Valtrex	Contagious for patient with no previous chicken pox
Syphilis	On induction blood tests.	Bicillin 1.8gm weekly x three weeks	All latent, past or present syphilis are treated. WA PHU informed.
TB (active)	Clinical diagnosis of haemoptysis. Chronic cough, weight loss and night fever. Diagnosis on CXR.	Mask on immediately. Inform Public Health, CI and Chest Clinic, Perth and WA PHU. Contact tracing.	Positive active TB clients are treated in hospital for two weeks, before returning to the detention facility. Inform Public Health, CI and Chest Clinic, Perth and WA PHU.

TB (latent)	Granulomas on CXR and no respiratory symptoms.	No treatment (this is consistent with main stream management in the Australian population).	This has been agreed with the Chest Clinic in Perth.
Tetanus	Clinical and history.	Diazepam	Medivac out
Typhoid	Symptoms and signs.	Send to hospital for stool collection.	Treatment starts in hospital. Clients on return will have own toilet. Repeat stool two weeks after start of treatment. Inform WA PHU.
Varicella (Chicken Pox)	Clinical grounds.	Symptomatic	Excluding from school and other children during infective period. Inform Public Health CI. Contact tracing. Vaccinate adult contacts, if no previous disease.
Viral Gastroenteritis	Symptoms and stool for culture.	Fluids	Personal hygiene and education for contacts.