

Appendix F

Patient Information Sheets

Date Reviewed: May, 2015

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Please see the following pages for the various Patient Information Sheets referred to within the manual.

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Ceftriaxone

What is Ceftriaxone?

- It is an antibiotic given by injection.
- It is the preferred treatment for gonorrhea.
- It is also provided to some people who have been exposed to a person with bacterial meningitis.

What are common side effects?

- Local reaction at injection site including pain, induration (hardness) and tenderness.

*Call your doctor if any of these symptoms are severe or do not go away.

What are less common side effects?

- Skin rashes/hives;
- Allergic reactions;
- Nausea/vomiting/diarrhea;
- Swelling of the intestines (colitis);
- Blood disorders; and
- Headache/dizziness.

*Call your doctor **immediately** if these symptoms occur.

Who should not take Ceftriaxone?

- People with a known allergy to ceftriaxone, other cephalosporins or penicillin.
- Tell your health care provider if you have any bleeding, gall bladder, pancreas, liver or kidney disorders.

Counseling Guidelines

- Should only be used during pregnancy if the likely benefits outweigh the potential risk to the fetus and the mother.

What might be felt after receiving Ceftriaxone?

- Local reaction at the injection site:
 - pain; and
 - induration (hardness) and tenderness.
- Ceftriaxone is usually given with lidocaine to reduce any discomfort.
 - Please tell the doctor or nurse if you have had a reaction to either of these medications in the past.

Care of Yourself Following Treatment

- Please wait in the clinic for 15 minutes after your treatment.
- If you have any reaction following treatment (rash, itchiness, difficulty breathing), please inform a staff member immediately.

Special Instructions

- Do not have sex until:
 - One week after you finish treatment; and
 - Your sex partner(s) has (have) also been treated.
- Tell your health care provider if:
 - You have sex with an untreated partner, or
 - You have sex before either you or your partner's treatment is complete.
- If you are using a hormonal form of birth control (oral, patch, injection), use an extra method of protection until your present cycle is complete.
- **Azithromycin 1 gram** is provided along with Ceftriaxone for the treatment of gonorrhea.

Adapted from Saskatoon Health Region and British Columbia Center for Disease Control (BCCDC)

November 2014

Hand Washing

ENVIRONMENTAL HEALTH

Why is hand washing important?

Washing your hands is the most important thing you can do to protect yourself from becoming sick.

By regularly washing your hands you get rid of germs that you have picked up from other people, contaminated surfaces or from animals and animal waste.

How do germs cause disease?

Germs means bacteria, viruses or parasites. Germs are all around us. They are very small organisms and some germs can cause disease.

Germs can spread disease when they pass from one person's hands to another hand or surface. You might infect yourself when you touch your mouth, eyes, or nose if you have germs on your hands.

Hand washing is one of the best ways to stop the spread of germs and disease.

How do you wash your hands?

- Wet hands with warm water.
- Use liquid soap and build a lather.
- Scrub all surfaces of hands including backs of hands, wrists, between fingers and under fingernails for at least 20 seconds
- Rinse hands in warm running water.
- Dry your hands with a clean towel, then use this towel to turn off the water.

It is estimated that one out of three people does not wash their hands after using the restroom. Wash your hands after you use the restroom.

When do you wash your hands?

- Before, during and after you prepare food,
- Before you eat,
- After you use the restroom or your bathroom,
- After handling animals or animal waste,
- When your hands are dirty, and
- More frequently when someone in your home is sick.

Wash your hands often. You can't see germs with the naked eye.

What else is important?

DON'T use a single damp cloth to wash a group of children's hands.

DON'T use a standing basin of water to rinse hands.

DON'T use a common hand towel. Always use disposable towels in day care or food preparation settings or in public restrooms.

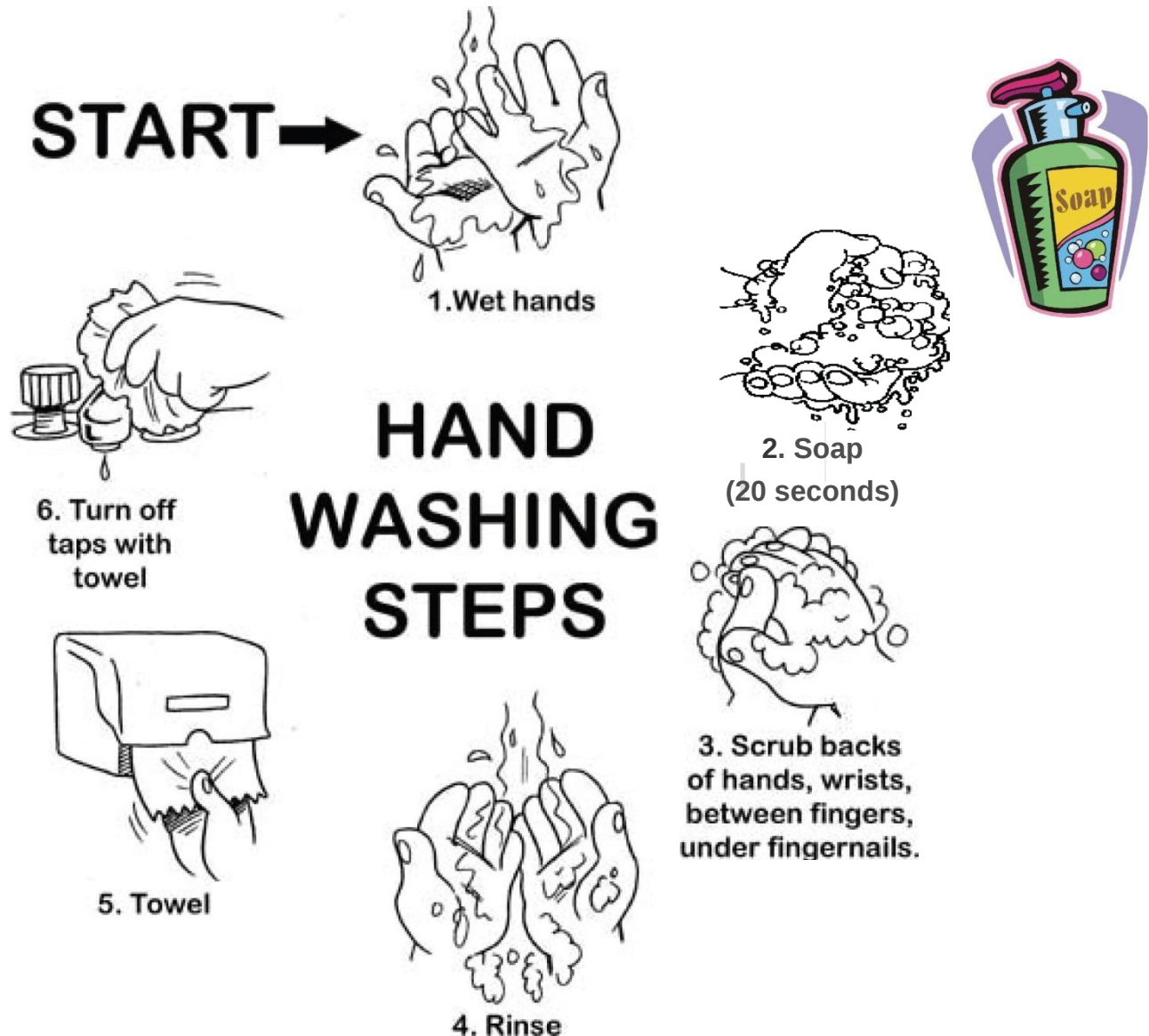
For general information contact the HealthLine at:



(Sources: Health Canada, Centre for Disease Control and Prevention, Community and Hospital Infection Control Association of Canada)

Did you know that 1 in 3 people don't wash their hands after using the restroom?

Don't be the One. Wash your hands!



One of the best ways to stop the spread of disease and germs is also one of the easiest things to do. Washing your hands only takes 30 seconds, about the time it takes to sing the ABC's.

(Sources: College of Registered Nurses of Manitoba, USFDA, © 2011 Jupiter Images Corporation)

Group A Streptococcus (Severe disease)

COMMUNICABLE DISEASES

What is Group A Streptococcus?

- Group A Streptococcus (GAS) are bacteria that are commonly found in the throat and on the skin. A person may have the bacteria without being sick.
- The infections can range from mild to severe or even life threatening.
- Common, mild GAS infections include “Strep Throat” or Impetigo.
- Severe GAS infections happen when the bacteria get into parts of the body where bacteria are not usually found such as the blood, muscle, fat, joints, brain or lungs.
- Some examples of severe GAS infection include: necrotizing fasciitis (flesh eating disease), toxic shock syndrome, meningitis, and septic arthritis.

Why do severe Group A Streptococcal infections occur?

- Health problems that weaken a person’s immune system can make severe infection more likely.
- The bacteria may already be living in the nose and throat.
- Some types of the GAS bacteria are more likely to cause severe infection than others.

How common are severe Group A Streptococcal infections?

- Millions of people will get “Strep Throat” or Impetigo every year but very few will get severe infections.

How is Group A Streptococcus spread?

- The bacteria are spread by direct contact with droplets from the nose and mouth of infected persons or by touching infected sores on the skin.
- Treatment with antibiotics for 24 hours or longer will stop the bacteria from being spread.
- Plates, cups, and toys are not a high risk for spreading the bacteria.

Who is most at risk of getting a severe Group A Streptococcal infection?

- Although healthy people can get a severe infection from GAS, people with chronic health problems such as cancer, diabetes, heart disease, HIV, lung disease, people on dialysis, people who take steroid medications or who abuse alcohol or drugs are at higher risk.
- Anyone with breaks in their skin has a way for the bacteria to enter their body.

How is Group A Streptococcal infection treated?

- Can be treated with different antibiotics.
- Early treatment may reduce the risk of death from severe infection, but even the right treatment cannot prevent death in every case.
- If an antibiotic is prescribed, it is important to take all of the medicine given by your doctor.

What can be done to prevent severe Group A Streptococcal infection?

- Good personal hygiene is the best protection against the spread of disease. This includes:
 - washing hands frequently
 - using an alcohol-based hand rub when soap and water are not available and hands are not visibly dirty
 - keeping hands away from the nose and mouth
 - not sharing personal items such as eating utensils, cigarettes, lipstick, lip gloss, toothbrushes, mouth pieces of musical instruments or water bottles
 - do not drink from the same container
 - do not take bites from other people's food.
- Keep sores and cuts clean and watch for possible signs of infection such as redness, swelling, pus, and increasing pain at the site of the wound.
- If signs of infection are present, especially if also with a fever, please see a doctor.

What if someone I know has a severe Group A Streptococcal Infection?

- Close contacts may be at a slightly increased risk of developing a similar infection. A public health nurse will contact you if you are at risk.
- Close contacts are usually limited to people living in the same house, those who have had direct contact with the infected person's saliva or who have shared injection drug equipment with the infected person.
- Close contacts will be asked to watch for signs and symptoms of infection for 30 days.
- Depending on how severe the infection is, a small number of people may be advised to see their family doctor to receive an antibiotic to prevent them from becoming ill.

What symptoms should I watch for?

- If you have been in close contact with someone with a severe GAS infection and you develop any of the following symptoms, see your doctor right away. Let your doctor know that you have been in contact with someone with a severe GAS infection.
- **Symptoms to report to your doctor:**
 - fever with:
 - severe pain
 - swelling and redness at a wound site
 - dizziness
 - confusion
 - rash
 - or any symptoms out of the ordinary.

For general information regarding a communicable disease contact the HealthLine at:



Meningococcal Disease (*Neisseria meningitidis*)

COMMUNICABLE DISEASES

What is Meningococcal disease?

- Meningococcal disease is caused by a bacteria called *Neisseria meningitidis*. There are many different types of this bacteria - not all of them are responsible for outbreaks of severe illness.
- People can have the bacteria in their nose or throat, but not be sick with the disease.
- The bacteria can cause severe illness in rare cases. Meningitis is an infection of the blood or of the covering of the brain and spinal cord.
- The disease can cause permanent damage to the brain.
- Meningococcal disease can cause death. It does so in less than 10% of persons who are treated for Meningitis.

What signs and symptoms can you have?

- 10% of all people carry the bacteria but do not have symptoms and are not sick.
- Most people who get sick have not been near a person known to have the disease.
- The disease is more common in children and young adults.
- The illness usually starts 1-10 days after a person has been exposed to the bacteria.
- Symptoms of meningococcal disease develop very rapidly, over a few hours.
- The most common symptoms are high fever, severe headache, stiff neck, nausea and vomiting. A rash may also develop.
- In young children, the most significant symptom may be a sudden change in behaviour, such as sleepiness, irritability, or excessive crying.

How does a person get Meningococcal disease?

- Each year a small number of Canadians get the disease.
- The disease is spread from person to person through contact with droplets from the nose and mouth of a person who carries the bacteria. Often the person is not ill. This can happen with kissing, coughing and sneezing.

How do you treat Meningococcal disease?

- If you suspect you have meningococcal disease consult your doctor immediately. Early treatment is necessary to prevent complications.
- Persons with the disease need to be treated with antibiotics in a hospital.
- After being on antibiotic treatment for 24 hours, people can no longer spread the disease.

How can you prevent Meningococcal disease?

- Good personal hygiene is the best protection against the spread of the disease. This includes:
 - washing hands frequently
 - using alcohol hand rub when soap and water are not available and hands are not visibly soiled
 - keeping hands away from the nose and mouth

How can you prevent Meningococcal disease? (Con't.)

- not sharing personal items such as eating utensils, cigarettes, lipstick, lip gloss, toothbrushes, mouth pieces of musical instruments or water bottles
- do not drink from the same container
- do not take bites from other people's food.
- Meningococcal vaccines are available against the four most common types of the bacteria responsible for outbreaks of severe illness—Types A, C, Y, and W135.
- Vaccination against Meningococcal disease provides protection for only a few years.
- Meningococcal Type C vaccine is offered to children at 1 year of age and to students in Grade 6 as part of the routine childhood vaccine program in Saskatchewan. Meningococcal Type C is responsible for most outbreaks of severe illness among children.
- Travellers may be offered Meningococcal vaccine if travelling to countries with high rates of the disease.

- If the type of Meningococcal bacteria that has caused the illness is one that can be prevented with vaccination, vaccine may also be offered to those receiving antibiotics.

For general information regarding a communicable disease contact the HealthLine at:



What if someone I know has Meningococcal disease?

- When a person is diagnosed with Meningococcal disease, Population and Public Health Services will contact ALL persons who may be at any increased risk of getting the disease.
- People who live with or are in very close contact with someone who develops the disease may be at an increased risk of getting the disease. This can occur in the week following contact with the ill person.
- A small number of people at high risk of acquiring the disease may then be given an antibiotic to prevent them from becoming ill. This is usually limited to people living in the same house or those who have direct contact with the infected person's saliva.

Rifampin

What is Rifampin?

- It is an antibiotic
- It is provided to some persons who have been exposed to a person diagnosed with bacterial meningitis

What are possible side effects?

- Signs of an allergic reaction:
 - Hives
 - Difficulty breathing
 - Swelling of your face, lips, tongue or throat
- Signs of other serious side effects also include:
 - Fever, chills, body aches or flu symptoms
 - Joint pain or swelling
 - Easy bruising or bleeding
 - Urinating less than usual or not at all
 - Nausea, stomach pain, loss of appetite, itching, dark urine, clay-colored stools, jaundice (yellowing of skin or eyes).

*Call your doctor **immediately** if these symptoms occur

What are less serious side effects?

- Tired feeling
- Red or orange colored urine, stools, tears, sweat or saliva

Who should not take Rifampin?

- People with a known allergy to rifampin.
- Tell your doctor if you have liver disease or porphyria (a genetic enzyme disorder that causes symptoms affecting the skin or nervous system).
- Tell your doctor if you are pregnant - Other medications should be provided to pregnant women.
 - Rifampin should only be considered in pregnancy if there is no alternate medication that can be provided and if the likely benefits outweigh the potential risk to the fetus and the mother.

Counseling Guidelines

- Rifampin may turn urine and other body fluids orange for up to three days. It may be wise to consider using:
 - Disposable diapers for individuals in diapers
 - Old linens on the beds of those who may wet the bed;
 - Glasses for those who wear contact lenses (especially soft lenses) as it may permanently stain them.
- Rifampin may interfere with the actions of other medicines. Tell your doctor about all the prescription and non-prescription medicines you use (including vitamins, minerals, herbal products).

Special Instructions

- Take the medicine as instructed.
- Keep the medicine at room temperature because it crystalizes if refrigerated.
- Take the medicine one hour before meals.
- Rifampin may interfere with the action of birth control pills or other hormonal forms of birth control. Use an extra method of protection until your present cycle is complete.

Adapted from Healthwise

January 2015

Safe Food Handling in Your Home

ENVIRONMENTAL HEALTH

Is Food Safety a New Idea?

Food safety has been important for centuries.

- The Romans brought ice from the Alps, stored it in caves and then used it the next summer to keep food from spoiling.
- In the Middle Ages people preserved food by smoking, salting and drying.
- Fruitcake was also part of provisions in the Middle Ages. Fruitcake, filled with nuts and dried fruits, is sometimes soaked in rum or brandy. The liquor slows mould growth. There are cases of well-tinned and brandied fruitcakes lasting 20 years!

Canadians enjoy one of the safest food supplies in the world. Everyone wants Safe-to-Eat food, but safe food doesn't just happen. The Canadian Food Inspection Agency checks both imported and Canadian processed food.



Saskatchewan Public Health Inspectors check restaurants and food stores. They also teach safe food handling classes.

You, however, have one of the most important food safety roles. By taking a few precautions you can help keep your food safe to eat.

(Sources: © 2011 Jupiter Images Corporation, Ontario Home Economics Association, Canadian Partnership for Consumer Food Safety Education, HC, CFIA, CRFA and with permission of USDA)

What can I do?

You cannot see, smell or taste microorganisms (bacteria, viruses, parasites) that could make you sick. In every step of food preparation, remember to keep food safe.

- **Clean** - Wash hands and surfaces often.
- **Separate** - Keep raw food from cooked food.
- **Cook** - Cook to the right temperatures.
- **Chill** - Refrigerate promptly.

What can I do at the Food Store?

- Buy food in its original package.
- Buy food in cans without rust, bulges, leaks or big dents.
- Buy inspected meat from approved sources, such as your local grocery store.
- Buy commercially pasteurized milk and honey.
- Buy eggs with clean shells, without cracks.
- Read the handling labels on food packages.
- Pick up eggs, milk, meat, poultry and fish last. After checkout, go right home and put these away first! Use a cooler in hot weather.

Food is freshest, tastiest and at its best quality before the "Best Before" date. In Canada "Expiry Date" is only used for natural health products, medicines and Baby Food.

Make grocery shopping the last stop before you go home.

Wash reusable grocery bags often. Use a separate cloth bag for raw meat, poultry or fish.

How Do I Safely Store Food?

We may buy safe-to-eat food. We may get it home right away. However, food handling mistakes in your kitchen could make you sick.

Did you know that some bacteria can double in number every 20 minutes in warm food?

Bacteria multiply quickly in warm temperatures, particularly in perishable foods (meat, fish, poultry, milk, dairy products and eggs). Refrigerate or freeze perishable foods as soon as you get home.

Set your fridge to 4°C (40°F) or colder. Food can be stored longer when the temperature is cold because cold slows bacterial growth.

Did you know that the bacteria in 1 drop of raw meat juice is enough to cause diarrhea in some people? Store your raw meat, fish and poultry on the bottom shelf of the refrigerator. This will help keep the raw juices from dripping onto other food.

Leave space between food items so air can flow around and keep the food cold.

Set your freezer to -18°C (0°F) or colder. Freezing will kill most but not all micro organisms. Frozen food still needs careful handling.

Store canned food in a cool, dry place. Discard cans that are dented, leaking, bulging, or rusted.

Store food only in containers designed for food storage. Do not use opened cans for storing food. Keep food covered.

Keep household cleaners and other chemicals away from food, food equipment and food preparation surfaces. Keep cleaning supplies in clearly marked containers. They should be out of reach of children and preferably locked.

Keep all insects, mice, rats and animals out of food storage cupboards and areas.

What is the best way to thaw food?

Bacteria will not multiply as fast if food is thawed using one of the following methods:

- Thaw food in a refrigerator to keep food temperatures below 4°C (40 °F).
- Thaw food under cold running water.
- Thaw food in a microwave oven and then cook immediately.
- Thaw food as part of the cooking process.

Plan ahead when thawing large pieces of frozen food. It can take more than a day to thaw large pieces of meat or a turkey.

Is Hand Washing Important?

Hand washing is the most important way to protect yourself from micro organisms that can make you sick.

Wash your hands with warm water and soap, for at least 20 seconds:

- before you start working with food,
- after touching raw meat, poultry or eggs,
- after preparing food,
- after using the toilet,
- after blowing your nose, coughing or sneezing,
- after touching your pets,
- whenever your hands are dirty, and
- more often whenever you or anyone in your home is sick.

By regularly washing your hands you get rid of microorganisms that you have picked up from other people, contaminated surfaces or from animals and animal waste.



Hand washing helps prevent the spread of disease!

How do I Safely Prepare Food?

It is always a good idea to handle food safely when we prepare our meals.

Always wash your hands before and after handling food.

All raw meat, poultry, fish and egg items should be considered contaminated. Use a separate cutting board. All utensils, items and surfaces used to prepare these foods should be cleaned and sanitized before and after preparing the food.

Use pasteurized eggs for homemade eggnog and hollandaise sauce.

Ensure food products are cooked to the proper temperature. Use a probe thermometer to check cooking temperatures.

- 63 C (145 F) for medium rare beef steak and roasts,
 - 71 C (160 F) for medium, and
 - 77°C (170°F) for well done
- 71 C (160 F) or above for pork, ground beef, ground fish.
- 74 C (165 F) or above for ground poultry, stuffed fish, stuffed meat, stuffed pasta, stuffed poultry or stuffing containing fish, egg dishes, stuffing, casseroles and leftovers.
- 85 C (185 F) for poultry including chicken and turkey.

Serve food as soon as it is done. Use clean utensils and clean serving dishes. If you do need to wait a few minutes to serve, keep your food at 60 C (140 F) or hotter.

Food products should not be left out at room temperature in 'the danger zone' for longer than 2 hours. The danger zone is between 4°C (40°F) and above 60 C (140°F). Bacteria multiply quickly in these temperatures.

Throw out perishable food that was left at room temperature for more than 2 hours. Food with high levels of bacteria may not look, smell or taste different. When in doubt, throw it out!

How do I Safely Store Leftovers?

Refrigerate leftovers to below 4°C (40 °F) as soon as possible. Put food in small containers to cool. Cut meat into small pieces to cool faster.

Quick cooling does not give bacteria a chance to grow. Cooling food at room temperature gives bacteria a chance to multiply to dangerous levels.

Leftovers should be eaten within 2-3 days. Freeze leftovers right away if they will not be eaten within 3 days.

How do I Clean and Sanitize?

Clean and sanitize your work area and utensils before and after preparing food. This includes cutting boards, and counter tops.

For the sanitizing solution to work properly, the work area must first be cleaned with soap and water, then rinsed.

A sanitizing solution can be made easily by adding 1tsp (5mL) of bleach to 3 cups (750mL) of water. Spread this over the area and let it air dry.

Sponges easily pick up microorganisms and provide an ideal home for bacteria to keep growing. Sanitize wet sponges in a microwave, set on high, for 1 minute. Let these sit for a few minutes - they will be hot!

Keep your dishes, utensils, kitchen equipment and work surfaces clean. Sanitize food contact surfaces regularly.

The home kitchen is a proven source of foodborne illness. An innocent mistake can give bacteria or other micro organisms a chance to multiply in the food.

For general information contact the HealthLine at:



Refrigerator and Freezer Storage Chart

	Refrigerator 4°C (40°F)	Freezer -18°C (0°F)
Meat, Poultry, Fish		
Beef-Steaks, Roasts	2-4 days	10-12 months
Pork, Lamb - Chops, Roasts	2-4 days	8-12 months
Ground Meat	1-2 days	2-3 months
Chicken, Turkey - whole	2-3 days	1 year
Fresh Lean fish (e.g., cod, flounder)	3-4 days	6 months
Fresh Fatty fish (e.g., salmon)	3-4 days	2 months
Shellfish, Scallops, Shrimp	12-24 hours	2-4 months
Ham, fully cooked (half & slices)	3-4 days	2-3 months
Bacon	1 week	1 month
Sausage, raw (pork, beef, turkey)	1-2 days	1-2 months
Pre-cooked, smoked links or patties	1 week	1-2 months
Hotdogs	2 weeks	1-2 months
Deli meats	3-4 days	2-3 months
Dairy, Eggs		
Eggs - Fresh in shell	3-4 weeks	Do not Freeze
Eggs - Fresh out of shell	2-4 days	4 months
Eggs - Hard cooked	1 week	Does not freeze well
Egg substitutes,	10 days	1 year
Milk	Check Best Before date	6 weeks
Cottage cheese	Check Best Before date	Does not freeze well
Yogurt	Check Best Before date	1-2 months
Cheese - Soft	1 week	Does not freeze well
Cheese - Semi-soft	2-3 weeks	8 weeks
Cheese - Hard	10 months	Up to a year
Prepared food		
Cooked meat, egg, or vegetable dishes	3-4 days	2-3 months
Gravy & meat broth	1-2 days	2-3 months
Cooked poultry and fish	3-4 days	4-6 months
Soups	2-3 days	4 months
Store-prepared or homemade salads	3-5 days	Do not freeze
TV Dinners / Frozen Casserole	Keep frozen until ready to serve	3-4 months
Commercial mayonnaise		
(refrigerate after opening)	2 months	Do not freeze
Canned ham	6-9 months	Do not Freeze
Canned Food		
Tomatoes, grapefruit, pineapple	12 to 18 months **in a cool, clean, dry place if the can remains in good condition	
Vegetables	2 to 5 years **if the can remains in good condition and has been stored in a cool, clean, and dry place.	

These safe, but short, time limits will help keep food from spoiling or becoming dangerous to eat. These are recommended storage times only. Store food according to the packaging information. When in doubt, throw it out!

(Source: Adapted from Canadian Partnership for Consumer Education)

