

## The Preventative Measures Against the Transmission of COVID-19

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### ABOUT THE STUDY

During the COVID-19 pandemic, the spread of infectious respiratory diseases reduced in the United States. This decrease was made possible in emergency rooms by the use of personal protective equipment and COVID-19 masking regulations. Specifically with patients suspected of having the measles and mumps, this analysis focuses on how COVID-19 safeguards decreased the likelihood of emerging infectious diseases transmission in emergency departments. Infectious respiratory illness cases declined in the US during the COVID-19 pandemic. With 1,282 cases, the CDC recorded the most measles cases since 1992 in 2019. With only 13 cases, the CDC reported the fewest cases of measles in the United States in more than ten years one year later. 3,780 instances of the mumps were reported in 2019, which was a slowdown in the number of cases to 616 in 2020 and 154 in 2021. Additional research has revealed a connection between masking regulations and a decline in pertussis cases.

Emerging illnesses should rise if COVID-19 community limitations are eased and travel rises. The identification, isolation, and education of new illnesses must once more be the primary emphasis of emergency departments. Nevertheless, when patients are evaluated and separated for COVID-19-like symptoms and are compelled to wear a mask in all hospital areas, the danger of transmission in emergency rooms may be avoided.

This study will concentrate on how detecting and isolating COVID-19 individuals using an emerging disease screen may reduce the likelihood of other infectious illnesses spread in emergency rooms *via* droplet or airborne pathways. The report will pay special attention to the measles and mumps since, prior to the COVID-19 pandemic; these two illnesses had lately showed growing case trends inside the United States.

Currently, COVID-19 safety precautions call for the wearing of a N95 mask, a gown, gloves, and eye protection. The precautions for measles, mumps, and many other infectious illnesses are at least covered by these criteria. Patients were put on COVID-19

precautions for at least one COVID-19-related symptom throughout the epidemic. The majority of these symptoms are similar to those of newly developing illnesses. Hence, it was still more likely that during the pandemic, many people with illnesses that a screening tool missed would be isolated. When knowledge of COVID-19 symptoms declines and the risk of COVID-19 increases then the condition progresses, emergency rooms could stop screening for COVID-19 or might stop isolating patients with mild COVID-19 symptoms. As a result, there may be an increase in the risk of emerging disease transmission in emergency rooms.

The use of universal masking by both patients and staff has shown to be another preventative measure against transmission. The transmission of COVID-19 and other respiratory diseases are both impacted by masking. Despite the fact that patients with measles should wear masks, the moment a patient walks through the facility's doors, there is a chance that they will infect other patients. Use of masks from the moment somebody enters a healthcare institution has minimized transmission risk since the start of the COVID-19 epidemic. There is a chance that the risk of respiratory infections spreading in emergency rooms can be reduced if patients wear masks continuously from the moment they enter the facility.

### CONCLUSION

Many decisions will need to be made as the epidemic draws to a close in hospitals. In the hospital context, removing mask requirements and relaxing COVID-19 regulations, such as less stringent screening, may raise the danger of emerging disease transmission rates there. When masking is stopped, though, patient and staff satisfaction may rise. Thus, hospital administration will need to balance patient disease transmission risks, employee happiness, and patient satisfaction. Considering the data presented in this research, source control masking based on a patient's symptoms, sophisticated and stringent emerging disease screenings, at emergency rooms, travel history and exposure are strongly advised.

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