DATE
April 1, 2020

SUBJECT
Update and Interim Guidance on Outbreak of Coronavirus Disease 2019 (COVID-19)

INSTRUCTIONS
Distribute to your local HAN contacts. This HAN is intended for general sharing of information.
- Time for Forwarding: As Soon As Possible
- Please forward to DPHHS at hhshan@mt.gov
- Remove this cover sheet before redistributing and replace it with your own

Please ensure that DPHHS is included on your HAN distribution list. hhshan@mt.gov

Categories of Health Alert Messages:
- **Health Alert**: conveys the highest level of importance; warrants immediate action or attention.
- **Health Advisory**: provides important information for a specific incident or situation; may not require immediate action.
- **Health Update**: provides updated information regarding an incident or situation; unlikely to require immediate action.
- **Information Service**: passes along low level priority messages that do not fit other HAN categories and are for informational purposes only.

Please update your HAN contact information on the Montana Public Health Directory
DATE
April 1, 2020

SUBJECT
Update and Interim Guidance on Outbreak of Coronavirus Disease 2019 (COVID-19)

SITUATION UPDATE
Epidemiology Update
The number of reported cases in the United States has increased significantly over the past week. To date, over 186,000 cases of COVID-19 including 3,603 deaths have been reported in the U.S., with community wide transmission identified in many states across the nation.

Montana is reporting 209 cases of COVID-19 as of 8:00 am 4/1/2020. Of these, 17 individuals have been hospitalized and five have died. The average age of reported cases is 46.6 years (range: 13 – 91 years). Approximately half of Montana COVID-19 cases are female. Contact investigations have determined that the most likely sources of transmission are: 1) travel outside of Montana (36.7%), 2) contacts to a confirmed case (23.8%), and 3) clusters of cases related to events (10.2%). Community wide transmission has been associated with 21.8% of reported cases. There are additional cases that are still pending investigation.

On Tuesday, the CDC updated recommendations for COVID-19 case investigations (link below) due to the number of areas in the U.S. experiencing community-wide transmission. Specifically:

- Individuals identified as contacts now include those who were in contact with a case from the 48 hours prior to symptom onset until appropriate control measures are in place.
- Risk levels have been adjusted to simplify communications and implementation
- The definition of a contact has been adjusted as well based on growing evidence of transmission risk from infected persons without symptoms or before the onset of recognized symptoms. Factors to consider when defining close contact include: proximity, the duration of exposure (e.g., longer exposure time likely increases exposure risk), whether the individual has symptoms (e.g., coughing likely increases exposure risk) and whether the individual was wearing a facemask (which can efficiently block respiratory secretions from contaminating others and the environment).

CDEpi investigation guidelines for COVID-19 will be updated and sent to local health jurisdictions by a separate email.

CDC updated recommendations for COVID-19 case investigations:

For the latest Montana updates visit https://covid19.mt.gov, which includes a map of cases (updated at 8:00 am and 4:00pm), and the CDEPI page for some descriptive epidemiology:
https://dphhs.mt.gov/publichealth/cdepi/diseases/coronavirusmt
Laboratory Update

The volume of testing at the Montana Public Health Laboratory (MPHL) has increased significantly, and supplies continue to be limited. As a result, reporting times for patient results may vary. Again, please be judicious with ordering so we can accommodate the high priority patients within a reasonable turn-around time. Specimens received after 11:00 AM will generally be tested the following day.

Be aware that we are running multiple batches of tests per day. You can check your facility’s results at any time using our online results system, Copia: https://copia.hhs.mt.gov/. If you are unsure of your login information or if your facility has not yet set up an account, please give us a call at 800-821-7284.

In addition, CDC has updated its recommendations for respiratory sampling to diagnose COVID. Please see the attached DPHHS Technical Guidance, and the message below from Greg Armstrong, Deputy Incident Manager, CDC:

Dear CSTE Colleague:

CDC has updated its recommendations for respiratory sampling to diagnose COVID. This update is based on data presented to FDA that prompted FDA to change its guidance:


The new recommendations allow for sampling of anterior nares, mid turbinate or oropharynx (OP); they also allow for “on-site” (i.e., under the supervision of healthcare professionals) of these samples. We believe this will greatly reduce the need for PPE when collecting specimens and also reduce the need for nasopharyngeal (NP) swab-collection devices.

FDA guidance states the NP swabs are still the best option when possible. However, given the nationwide shortage of PPE and NP swab-collection devices, we anticipate that most sites will switch immediately to the alternate sampling options (i.e., on-site nasal, mid-turbinate, or oral).

The data on which these recommendations are based should be available soon. The researchers involved in the study note a very strong correlation between Ct values (an inverse correlate of viral load) and either self-collected nasal or self-collected mid-turbinate swabs and provider-collected NP swabs. The correlation between NP swabs and oral swabs may not be as strong.

CDC's updated recommendations for respiratory sampling are available at:


Also, MPHL recently received a limited number of nasopharyngeal swabs. If your facility is in need, please give us a call and we will do our best to accommodate as we are able.

If you have any questions or concerns, please call MPHL at 800-821-7284

EMS & PUBLIC HEALTH

There is no new information or recommendations. Please refer to previous HANs for most recent guidance. The HANs are located at: https://dphhs.mt.gov/publichealth/han
HEALTHCARE

Alternate Care Sites and Isolation Sites. CDC has provided guidance on establishing isolation sites and alternate care sites to help address surge in response to COVID-19:


Guidelines for Infection Prevention for Dental Settings. The CDC dental-specific recommendations should be used with CDC’s Interim Infection Prevention and Control Recommendations for patients with COVID-19. This information supplements, but does not replace, the general infection prevention and control (IPC) recommendations for COVID-19.


Long-Term Care

CDC released updated guidance for mask use within the long term care setting. Below are the additional measures being recommended.

Additional Measures. Cancel communal dining and all group activities, such as internal and external activities. Remind residents to practice social distancing and perform frequent hand hygiene. Create a plan for cohorting residents with symptoms of respiratory infection, including dedicating HCP to work only on affected units. In addition to the actions described above, these are things facilities should do when there are cases in their community but none in their facility.

Healthcare Personnel Monitoring and Restrictions. Implement universal use of facemask for HCP while in the facility. Consider having HCP wear all recommended PPE (gown, gloves, eye protection, N95 respirator or, if not available, a facemask) for the care of all residents, regardless of presence of symptoms. Implement protocols for extended use of eye protection and facemasks. Consider implementing universal use of facemasks for HCP while in the facility. In addition to the actions described above, these are things facilities should do when there are cases in their facility or sustained transmission in the community.

Resident Monitoring and Restrictions. Encourage residents to remain in their room. If there are cases in the facility, restrict residents (to the extent possible) to their rooms except for medically necessary purposes. If they leave their room, residents should wear a facemask, perform hand hygiene, limit their movement in the facility, and perform social distancing (stay at least 6 feet away from others). Implement protocols for cohorting ill residents with dedicated HCP.

To learn more, please visit CDC’s long term care facilities webpage for COVID-19:

CORONERS & MEDICAL EXAMINERS

To support Montana’s coroners and medical examiners, MT DPHHS would like to outline CDC guidelines for examining deaths that may be related to coronavirus disease 2019 (known as COVID-19). When an unattended death occurs, protocols should be in place to prevent infection of coronavirus disease (COVID-19) with staff members and a specimen collection protocol to test for SARS-CoV-2 (the virus that causes COVID-19).

Recommendations
Specimen Collection to Test for COVID-19

Medical examiners, coroners, and other healthcare professionals should use their judgment to determine if a decedent had signs and symptoms compatible with COVID-19 during life and whether postmortem testing should be pursued. If COVID-19 is suspected in an unattended death in a home setting, please contact your local health department to report the death. Each health department has an after-hours number to contact for immediate notification. Local health department staff will also be able to identify if testing results are available or pending for that individual. If a specimen collection is indicated, contact your local health department or hospital to obtain the necessary supplies. Testing for other causes of respiratory illness (e.g., influenza) is also strongly encouraged.

https://dphhs.mt.gov/publichealth/fcss/countytribalhealthdepts

Per CDC guidelines, if an autopsy is performed for a suspected COVID-19 case, collection of the following postmortem specimens is recommended:

- Postmortem swab specimens for COVID-19 testing:
  - Upper respiratory tract swab: Nasopharyngeal Swab (NP swab)
  - Lower respiratory tract swab: Lung swab from each lung
- Separate swab specimens for testing of other respiratory pathogens and other postmortem testing, as indicated
- Formalin-fixed autopsy tissues from lung, upper airway, and other major organs

If an autopsy is NOT performed for a suspected COVID-19 case, collection of the following postmortem specimens is recommended:

- Postmortem Nasopharyngeal Swab (NP swab) specimen for COVID-19 testing
- Separate NP swab for testing of other respiratory pathogens

If an autopsy is performed for a confirmed COVID-19 case, collection of the following postmortem specimens should be considered:

- Postmortem swab specimens for testing of other respiratory pathogens,
- Other postmortem microbiologic and infectious disease testing, as indicated
- Formalin-fixed autopsy tissues from lung, upper airway, and other major organs

In addition to postmortem specimens, any remaining specimens (e.g., NP swab, sputum, serum, stool) that may have been collected prior to death should be retained. Please refer to Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons for Coronavirus Disease 2019 (COVID-19) for more information.


After collection, specimens can be submitted to the Montana Public Health Laboratory after packaging through pick-up at the courier locations (attached) or through your local laboratory. Please also review the attached laboratory information sheet from the Montana Public Health Laboratory.

Preventing Contact with Infectious Body Fluids

The best prevention is frequent handwashing with soap and water. SARS-CoV-2 is most often spread by respiratory droplets when an infected person coughs or sneezes, similar to how influenza and other respiratory infections spread. Transmission from respiratory droplets is not a concern when handling human remains or performing postmortem procedures. However, those handling human remains should take precautions to avoid contact with potentially infectious body fluids.
When handling human remains with known or suspected COVID-19 infection, individuals handling decedents should use Standard Precautions to ensure protection from body fluids splashing or contaminating eyes, mouth, nose, hands, or clothing. At a minimum, mortuary workers should:

- Wear nonsterile, nitrile gloves when handling potentially infectious materials.
- Wear heavy-duty gloves over the nitrile gloves if there is a risk of cuts, puncture wounds, or other injuries that break the skin.
- Wear a clean, long-sleeved fluid-resistant or impermeable gown to protect skin and clothing.
- Use a plastic face shield or a face mask and goggles to protect the face, eyes, nose, and mouth from splashes of potentially infectious bodily fluids.

Preventing Infectious Aerosols

COVID-19 could potentially be transmitted by infectious aerosols generated by using an oscillating saw, suctioning body fluids, or other aerosol generating procedure. If aerosol generating procedures are anticipated, refer to US Centers for Disease Control and Prevention’s guidance for postmortem specimens from deceased persons under investigation for COVID-19 for information on procedures that should be avoided, additional safety precautions, ventilation requirements, and respiratory protection.


Cleaning and Disinfection for COVID-19

Use an Environmental Protection Agency (EPA)-registered, hospital-grade disinfectant for routine cleaning and disinfection. Follow the instructions on the label and disinfect all equipment and surfaces potentially contaminated with infectious fluids, including the body bag. Use appropriate personal protective equipment (PPE) and respiratory protection following the disinfectant instructions for use.

GENERAL INFORMATION

Potential Medical Professionals in Montana Needed to Assist during the COVID-19 Pandemic

In the light of the COVID-19 pandemic, the Montana Healthcare Mutual Aid System (MHMAS) may be activated. MHMAS is the emergency system for the advanced registration of volunteer healthcare professionals for the State of Montana. MHMAS is a secure, web-based online registration system used to register all levels of medical professionals to be used in a major disaster of a public health emergency.

Once you register you are under no obligation to respond to a request, you decide when and where you would like to respond. MHMAS does ask for personal information (e.g., SSN, and DOB, etc.) this is needed so we can conduct a background check once a request is made for a medical professional.

If your license is expired, inactive or terminated and you are interested in renewing to assist during this pandemic, please click here (web page will be developed by tomorrow) to visit the DLI web page.

If you would like to register, please follow the link: https://mhmas.org/

PHEP Distribution of PPE

The State has now received two shipments and is in the process of receiving a 3rd shipment of PPE from the Strategic National Stockpile (SNS). The first shipment was sent out on March 23rd to Hospitals, high volume EMS providers, federally qualified health care centers and State hospitals. All deliveries were completed by March 26th.

A second shipment of PPE was shipped out on March 24th to hospitals, long-term care facilities, and county and tribal DES. Those shipments should be received by Thursday (March 26th), but due to the weather overnight the shipments
to the highline and eastern part of the State will be delayed. If you have not received your shipment by close of business Friday, please contact Colin Tobin @ 406-444-3011 or Kevin O’Loughlin @0406-444-1611.

PHEP has started to receive a 3rd shipment that should be completely received by the end of today (April 1st). Based on the quantities that were projected from SNS we did submit a distribution proposal to the task force for approval. Once approved we will notify the entities that will be receiving PPE and county and tribal DES. We have been informed by the SNS warehouse that this will be the last distribution of PPE from them unless more PPE is received by SNS.

We encourage everyone to keep working with you normal vendors to request supplies from them.
How do I order a COVID-19 PCR test?

We are not requiring pre-approval for testing, but we are asking facilities to be judicious with ordering.

Please make sure to document signs and symptoms of COVID-19, or if you have highly suspect patients (hospitalized, healthcare workers, or first responders) in the comment section to help us prioritize these patients. Epi consultation for these suspect patients is also helpful in identification.

Specimen Types

As of March 24, 2020, CDC is allowing for anterior nares, mid turbinate, or oropharyngeal sampling if nasopharyngeal swabs are unavailable.

Swabs should have a synthetic tip (e.g., polyester, dacron) and an aluminum or plastic shaft. Do not use swabs with cotton tips and wooden shafts or swabs made of calcium alginate.

*Place swab into at least one mL of viral transport media or universal transport media or sterile saline.

Specimen Storage

Refrigerate all specimens promptly after collection. Specimens should be shipped within 72 hours of collection on cold packs. Only freeze if transport will be over 72 hours.

Specimen Labeling and Documentation

All specimens must be labeled with:

- Patient name and a unique identifier, such as medical record number or date of birth
- Specimen type
- Date collected

How do I fill out the requisition

Use MTPHL's standard Public Health Laboratory Request Form and mark COVID-19 or write it in the "Comments" section.

Please make sure the facility information and account number is in the upper right hand side of the requisition. Contact MTPHL if you need a request form.

Be sure to fill out all Patient Information, including medical record number, DOB, sex, and patient zip code, along with Specimen Type and Date of Onset.

When are results available?

If the sample is received by 11 AM, PCR results are typically available the same day or day after receipt at MTPHL, depending on volume and priority. Testing is being performed seven days/week at this time.

How do I transport the specimen to the laboratory?

Specimens may be transported by courier or overnight by FedEx or UPS. Courier service has been expanded to include additional sites Monday through Friday only. Weekend pickup will be at the usual sites, but will also include Saturday (please check our website for times: https://dphhs.mt.gov/publichealth/LaboratoryServices/CourierRoutesSampleDelivery).

Specimens must be packaged as Category B and sent in cold condition (on dry ice if specimens were frozen.) Package specimens separately from other specimens.

Safety Note

Health care personnel collecting clinical samples from potentially infectious patients should follow infection prevention and control recommendations.

Sample processing should be performed in at least a Class II biological safety cabinet following a minimum of biosafety level 2 guidelines. Please refer to the CDC website for specimen handling and biosafety guidelines.


Who should I contact for testing information?

Collection supplies are limited, but we are trying to accommodate all orders.

MTPHL lab toll free number 1-800-821-7284
<table>
<thead>
<tr>
<th>Facility</th>
<th>City/Town</th>
<th>Mon-Fri Pick-Up time</th>
<th>Military Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Billings Clinic</td>
<td>Billings</td>
<td>5:00 PM</td>
<td>17:00</td>
</tr>
<tr>
<td>St. Vincent Health Care</td>
<td>Billings</td>
<td>4:45 PM</td>
<td>16:45</td>
</tr>
<tr>
<td>Bozeman Health</td>
<td>Bozeman</td>
<td>4:00 PM</td>
<td>16:00</td>
</tr>
<tr>
<td>Blackfeet Community Hospital</td>
<td>Browning</td>
<td>11:15 AM</td>
<td>11:15</td>
</tr>
<tr>
<td>St. James Community Hospital</td>
<td>Butte</td>
<td>5:45 PM</td>
<td>17:45</td>
</tr>
<tr>
<td>Crow Agency IHS</td>
<td>Crow Agency</td>
<td>4:00 PM</td>
<td>16:00</td>
</tr>
<tr>
<td>Benefis Healthcare-East</td>
<td>Great Falls</td>
<td>4:00 PM</td>
<td>16:00</td>
</tr>
<tr>
<td>Northern Montana Hopsital</td>
<td>Havre</td>
<td>1:15 PM</td>
<td>13:15</td>
</tr>
<tr>
<td>Kalispell Regional Medical Center</td>
<td>Kalispell</td>
<td>12:30 PM</td>
<td>12:30</td>
</tr>
<tr>
<td>Lame Deer IHS</td>
<td>Lame Deer</td>
<td>3:15 PM</td>
<td>15:15</td>
</tr>
<tr>
<td>Livingston Healthcare</td>
<td>Livingston</td>
<td>7:30 PM</td>
<td>19:30</td>
</tr>
<tr>
<td>Holy Rosary Healthcare</td>
<td>Miles City</td>
<td>3:00 PM</td>
<td>15:00</td>
</tr>
<tr>
<td>Community Medical Center</td>
<td>Missoula</td>
<td>9:00 PM</td>
<td>21:00</td>
</tr>
<tr>
<td>St. Patrick's Hospital</td>
<td>Missoula</td>
<td>9:00 PM</td>
<td>21:00</td>
</tr>
<tr>
<td>Marcus Daly Memorial Hospital</td>
<td>Hamilton</td>
<td>5:30 PM</td>
<td>17:30</td>
</tr>
<tr>
<td>North Valley Hospital</td>
<td>Whitefish</td>
<td>12:15 PM</td>
<td>12:15</td>
</tr>
<tr>
<td>Barrett Hospital</td>
<td>Dillon</td>
<td>11:00 AM</td>
<td>11:00</td>
</tr>
<tr>
<td>Northern Rockies Medical Center</td>
<td>Cut Bank</td>
<td>11:00 AM</td>
<td>11:00</td>
</tr>
<tr>
<td>Poplar Indian Health</td>
<td>Poplar</td>
<td>12:00 PM</td>
<td>12:00</td>
</tr>
<tr>
<td>Wolf Point Indian Health</td>
<td>Wolf Point</td>
<td>12:30 PM</td>
<td>12:30</td>
</tr>
<tr>
<td>Pryor Indian Health</td>
<td>Pryor</td>
<td>11:40 AM</td>
<td>11:40</td>
</tr>
<tr>
<td>Lodge Grass Indian Health</td>
<td>Lodge Grass</td>
<td>1:35 PM</td>
<td>13:35</td>
</tr>
<tr>
<td>Harlem Indian Health</td>
<td>Harlem</td>
<td>11:45 AM</td>
<td>11:45</td>
</tr>
<tr>
<td>Granite County Health Care</td>
<td>Philipsburg</td>
<td>1:15 PM</td>
<td>13:15</td>
</tr>
<tr>
<td>Community Hospital of Anaconda</td>
<td>Anaconda</td>
<td>2:00 PM</td>
<td>14:00</td>
</tr>
<tr>
<td>Montana State Hospital</td>
<td>Warm Springs</td>
<td>2:20 PM</td>
<td>14:20</td>
</tr>
<tr>
<td>Montana State Prison</td>
<td>Deer Lodge</td>
<td>3:00 PM</td>
<td>15:00</td>
</tr>
<tr>
<td>Mineral Community Medical Center</td>
<td>Superior</td>
<td>12:30 PM</td>
<td>12:30</td>
</tr>
<tr>
<td>Clark Fork Valley Hospital</td>
<td>Plains</td>
<td>1:30 PM</td>
<td>13:30</td>
</tr>
<tr>
<td>St. Joseph Medical Center</td>
<td>Polson</td>
<td>3:30 PM</td>
<td>15:30</td>
</tr>
<tr>
<td>St. Luke Community Hospital</td>
<td>Ronan</td>
<td>4:00 PM</td>
<td>16:00</td>
</tr>
<tr>
<td>Liberty Medical Center</td>
<td>Chester</td>
<td>12:00 PM</td>
<td>12:00</td>
</tr>
<tr>
<td>Marias Medical Center</td>
<td>Shelby</td>
<td>1:00 PM</td>
<td>13:00</td>
</tr>
<tr>
<td>Malmstrom AFB</td>
<td>Great Falls</td>
<td>2:00 PM</td>
<td>14:00</td>
</tr>
<tr>
<td>Great Falls Clinic Hospital</td>
<td>Great Falls</td>
<td>4:15 PM</td>
<td>16:15</td>
</tr>
<tr>
<td>Central Montana Medical Center</td>
<td>Lewistown</td>
<td>10:00 PM</td>
<td>22:00</td>
</tr>
<tr>
<td>Facility</td>
<td>City/Town</td>
<td>Saturday Pick-Up Time</td>
<td>Sunday Pick-Up Time</td>
</tr>
<tr>
<td>--------------------------</td>
<td>-------------</td>
<td>-----------------------</td>
<td>---------------------</td>
</tr>
<tr>
<td>Billings Clinic</td>
<td>Billings</td>
<td>11:00 AM</td>
<td>11:00 AM</td>
</tr>
<tr>
<td>St. Vincent Health Care</td>
<td>Billings</td>
<td>11:30 AM</td>
<td>11:30 AM</td>
</tr>
<tr>
<td>Bozeman Health</td>
<td>Bozeman</td>
<td>2:15 PM</td>
<td>2:15 PM</td>
</tr>
<tr>
<td>Blackfeet Community Hospital</td>
<td>Browning</td>
<td>11:00 AM</td>
<td>8:30 AM</td>
</tr>
<tr>
<td>St. James Community Hospital</td>
<td>Butte</td>
<td>3:45 PM</td>
<td>3:45 PM</td>
</tr>
<tr>
<td>Benefis Healthcare-East</td>
<td>Great Falls</td>
<td>4:00 PM</td>
<td>4:00 PM</td>
</tr>
<tr>
<td>Northern Montana Hospital</td>
<td>Havre</td>
<td>2:00 PM</td>
<td>2:00 PM</td>
</tr>
<tr>
<td>Kalispell Regional Medical Center</td>
<td>Kalispell</td>
<td>1:00 PM</td>
<td>1:00 PM</td>
</tr>
<tr>
<td>Livingston Healthcare</td>
<td>Livingston</td>
<td>1:15 PM</td>
<td>1:15 PM</td>
</tr>
<tr>
<td>Community Medical Center</td>
<td>Missoula</td>
<td>3:45 PM</td>
<td>3:45 PM</td>
</tr>
<tr>
<td>St. Patrick's Hospital</td>
<td>Missoula</td>
<td>3:45 PM</td>
<td>3:45 PM</td>
</tr>
</tbody>
</table>