Montana Health Alert Network

DPHHS HAN *UPDATE*

Cover Sheet

DATE

February 28, 2020

SUBJECT COVID-19 Outbreak Update and Updated Guidance Related to Evaluation of Patients Under Investigation PUIs

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Montana Health Alert Network

DPHHS HAN

Information Sheet

DATE

February 28, 2020

SUBJECT

COVID-19 outbreak update and updated guidance related to evaluation of People/Patients Under Investigation (PUIs)

BACKGROUND

As of February 27, 2020, there have been 82,294 confirmed cases (1185 new) globally. In China there have been 78,630 confirmed cases (439 new in last 24 hours) and 2747 deaths (29 new). Outside of China there have been 3664 confirmed cases (746 new) and 57 deaths (13 new). At this time the case fatality rate for COVID-19 is estimated to be between 1-2%. As a comparison, the case fatality rate for seasonal influenza is 0.1%.

The attached situation report from the WHO provides an overview of what is known. The numbers reported are only for those who are seeking care, diagnosed, and reported. Due to this, results must be interpreted with caution. It should be noted that 95% of confirmed cases are in China and 83% of China's cases are in the city of Wuhan. 47 countries outside of China (9 new) now have reported 3664 cases. There are opportunities to respond, test, and slow, if not contain, the spread of COVID-19 by implementing control measures built upon new understanding of how the disease is transmitted.

The United States is responding to a limited number of cases, virtually all with direct links to China or known cases. Currently, 14 US cases became ill after returning from China or household contact with a returning traveler. A 15th case recently identified has no known source at this time. In addition, 47 cases are considered repatriated – individuals who were evacuated from Wuhan or the Diamond Princess cruise ship.

Montana has no cases at this time.

INFORMATION

CDC continues to update many materials, including guidance related to travel and people/patients under investigation. More complete guidance is coming soon for schools, businesses and other settings. DPHHS will continue to share significant items as received and will begin providing more structured communication as planning efforts expand (see below). Please see the attached documents for a list of resources, updates, and talking points that highlights recent developments – including additional countries with travel restrictions. Monitoring of returning travelers is currently limited to China. See the attached GUIDANCELIST document for items that may be useful. Key items or activities are listed below.

- Most significant is a change in Evaluating and Reporting Persons Under Investigation (PUI). Changes made on 2/27 include the addition of additional countries to the equation. A category that removes countries from the equation if the illness is compatible with coronavirus, required hospitalization AND without alternative explanatory diagnosis (e.g., influenza). Consultation with local and/or state public health will still be required prior to ordering any testing. **DPHHS anticipates that testing will be available at the Montana Public Health Laboratory no later than March 6th.** More detail is in the chart at the bottom of this note and available at: https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html

- DPHHS' response team will be expanding planning and communication operations next week. Expect weekly HAN updates mid-week followed by situation update briefings via conference call for public health partners who then can share information with stakeholders. Topics will include the epidemiology of COVID-19, updates for hospitals/clinics/laboratories, EMS, DES, and other stakeholders such as schools and business. These conference calls will be open for questions and suggestions.

- Information on a recent webinar related to EMS may be viewed at your convenience if you were unable to view when offered. https://www.youtube.com/watch?v=ZrnbufgDqjo

RECOMMENDATIONS

Criteria to Guide Evaluation of PUI for COV-19

Local health departments, in consultation with clinicians, should determine whether a patient is a PUI for COVID-2019. The CDC clinical criteria for COVID-19 PUIs have been developed based on available information about this novel virus, as well as what is known about severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). These criteria are subject to change as additional information becomes available.

Clinical Features	&	Epidemiological Risk
Fever **or** signs/symptoms of lower respiratory illness (e.g., cough or shortness of breath)	**AND**	Any person, including health care workers, who has had close contact with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset
Fever **and** signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization	**AND**	A history of travel from affected geographic areas (see below) within 14 days of symptom onset
Fever with severe acute lower respiratory illness (e.g., pneumonia, ARDS) requiring hospitalization and without alternative explanatory diagnosis (e.g., influenza	**AND**	No source of exposure has been identified

Affected Geographic Areas with Widespread or Sustained Community Transmission

Last updated February 26, 2020

- China
- Iran
- Italy
- Japan
- South Korea

Coronavirus disease 2019 (COVID-19)
Situation Report – 38

Data as reported by 10AM CET 27 February 2020*

HIGHLIGHTS

- Nine new Member States (Brazil, Denmark, Estonia, Georgia, Greece, Norway, Pakistan, Romania, and North Macedonia) reported cases of COVID-19 in the past 24 hours.
- WHO and the World Tourism Organization released a joint statement regarding responsibility and coordination on tourism and COVID-19. For more information, please visit this webpage.
- OpenWHO, a web-based learning platform, has launched the free online courses *Introduction to Emerging Respiratory Viruses, Including Novel Coronovirus*, in Portuguese and *Health and Safety Briefing for Respiratory Diseases – ePROTECT* in French today.
- WHO is utilizing an international network of expert laboratories to provide support in the detection of the COVID-19 virus globally. For more information, please see the Subject in Focus below.

SITUATION IN NUMBERS
total and new cases in last 24 hours

Globally
82 294 confirmed (1185 new)

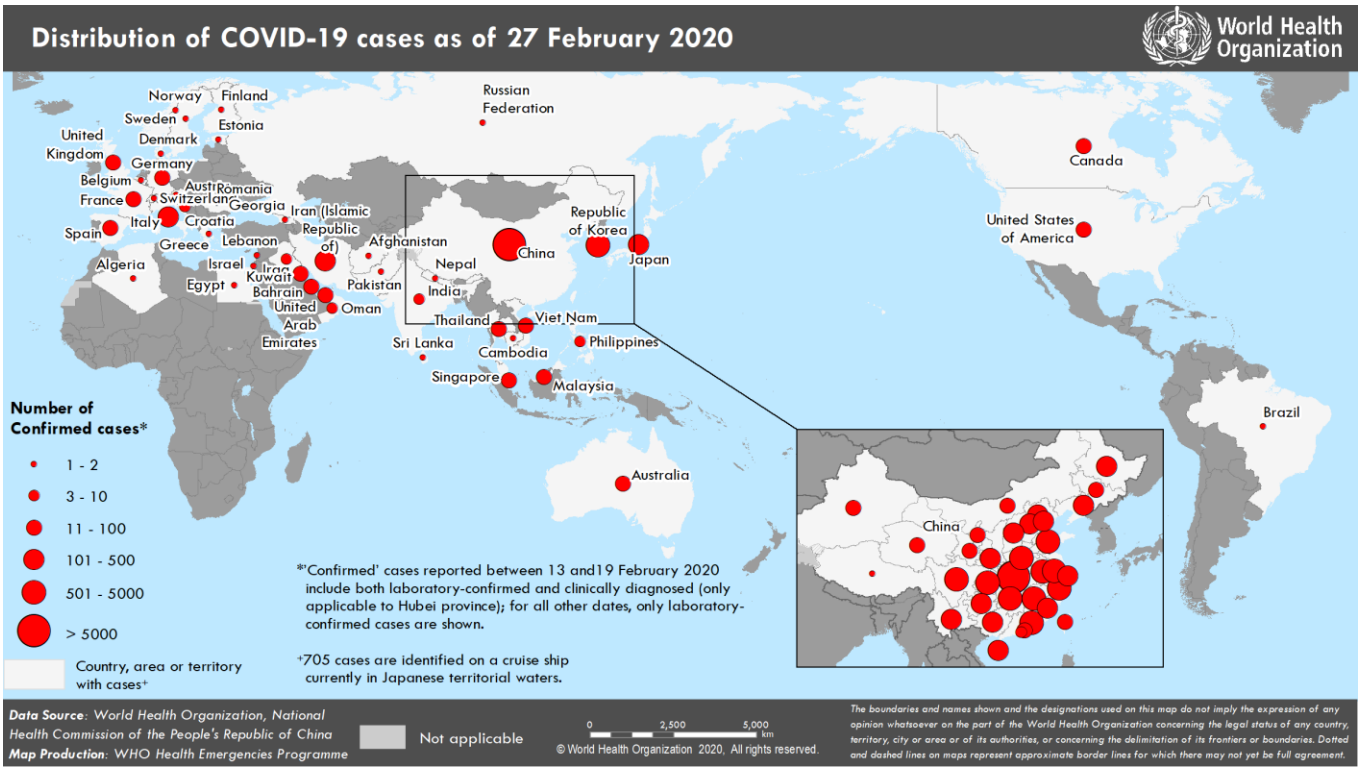
China
78 630 confirmed (439 new)
2747 deaths (29 new)

Outside of China
3664 confirmed (746 new)
46 countries (9 new)
57 deaths (13 new)

WHO RISK ASSESSMENT

China	Very High
Regional Level	High
Global Level	High

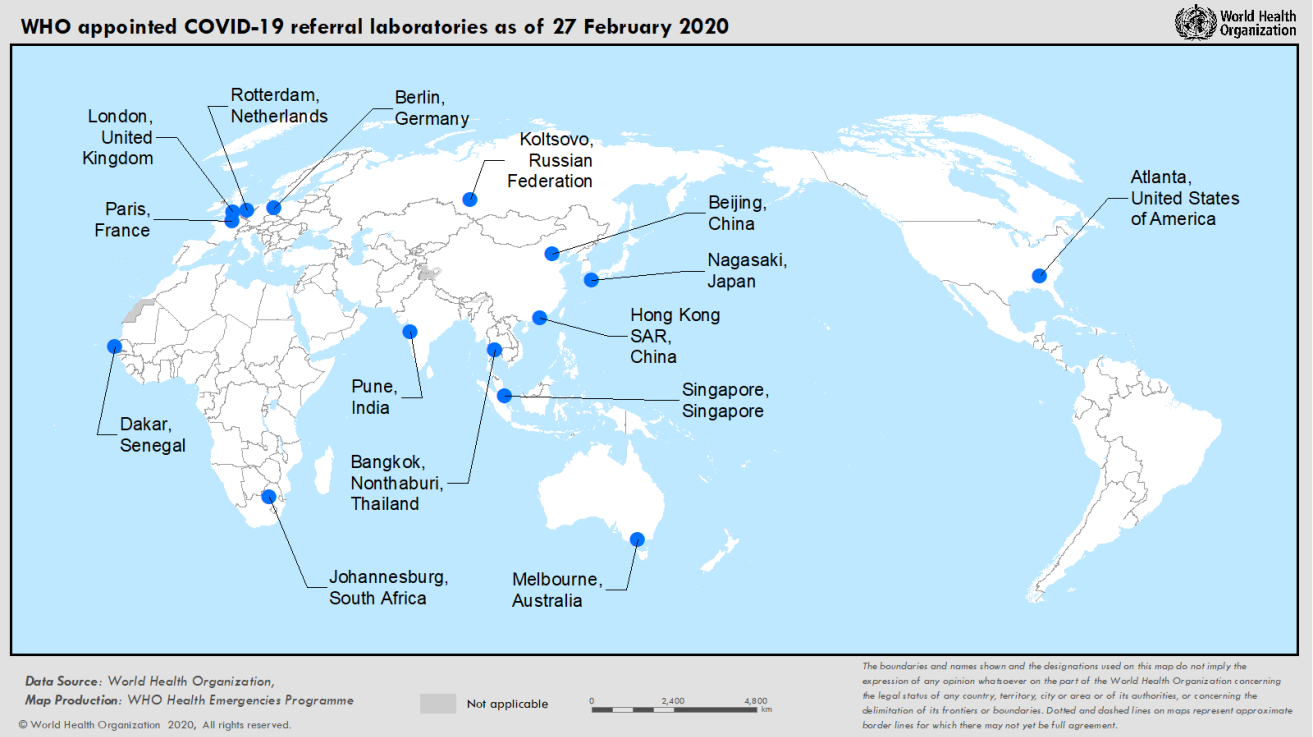
Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 27 February 2020



SITUATION IN FOCUS: Laboratory Network and Detection

On 9 January 2020, WHO published interim laboratory guidance for detection of the novel coronavirus. This guidance is continually updated as more data becomes available and includes advice on sample collection, diagnostic testing, and pathogen characterization. Specific interim guidance on biosafety in the laboratory has also been published. An update to the guidance for the international shipment of specimens will follow soon. WHO is utilizing an international network of expert laboratories to provide support in the detection of the COVID-19 virus globally.

Figure 2. WHO international expert laboratories for the COVID-19 virus.



The diagnostic landscape of this outbreak is changing quickly. The first COVID-19 cases were detected using genomic sequencing, but multiple RT-PCR commercial and non-commercial assays have since been developed. As the international case load increases, there is an urgent need to rapidly scale up diagnostic capacity to detect and confirm cases of COVID-19. WHO has taken a three-pronged approach to enhance global diagnostic capacity for the COVID-19 virus:

1) Developing a WHO network of 15 COVID-19 reference laboratories with demonstrated expertise in the molecular detection of coronaviruses. These international laboratories can support national labs to confirm the COVID-19 virus and troubleshoot their molecular assays.

2) Strengthening national capacity for detection of the COVID-19 virus so that diagnostic testing can be performed rapidly without the need for overseas shipping. Existing global networks for detection of respiratory pathogens are being utilized including, notably, the National Influenza Centers that support the Global Influenza Surveillance and Response System.

3) Ensuring ongoing test availability. WHO has procured a commercial assay (manufactured under ISO:13485) with strong performance data and shipped to over 150 laboratories globally as an interim measure for Member States requesting support. The main goal is to strengthen global diagnostic capacity for detection of the COVID-19 virus. Support is now also provided to ensure the quality of testing through the implementation of an External Quality Assurance mechanism.

Public health efforts are targeted at both interrupting further transmission and monitoring the spread of COVID-19. As reports of asymptomatic cases increase, the need for reliable serology testing is becoming more urgent. There are a number of groups working on this and developments are being monitored.

SURVEILLANCE

Table 1. Confirmed and suspected cases of COVID-19 acute respiratory disease reported by provinces, regions and cities in China, 27 February 2020

Province/ Region/ City	Population (10,000s)	Daily			Cumulative	
		Confirmed cases	Suspected cases	Deaths	Confirmed cases	Deaths
Hubei	5917	409	403	26	65596	2641
Guangdong	11346	0	0	0	1347	7
Henan	9605	1	2	1	1272	20
Zhejiang	5737	0	0	0	1205	1
Hunan	6899	1	0	0	1017	4
Anhui	6324	0	0	0	989	6
Jiangxi	4648	0	0	0	934	1
Shandong	10047	0	0	0	756	6
Jiangsu	8051	0	0	0	631	0
Chongqing	3102	0	11	0	576	6
Sichuan	8341	3	4	0	534	3
Heilongjiang	3773	0	0	1	480	13
Beijing	2154	10	10	1	410	5
Shanghai	2424	1	33	0	337	3
Hebei	7556	5	0	0	317	6
Fujian	3941	2	0	0	296	1
Guangxi	4926	0	0	0	252	2
Shaanxi	3864	0	0	0	245	1
Yunnan	4830	0	3	0	174	2
Hainan	934	0	4	0	168	5
Guizhou	3600	0	1	0	146	2
Tianjin	1560	0	20	0	135	3
Shanxi	3718	0	1	0	133	0
Liaoning	4359	0	14	0	121	1
Jilin	2704	0	2	0	93	1
Gansu	2637	0	0	0	91	2
Hong Kong SAR	745	6	0	0	91	2
Xinjiang	2487	0	0	0	76	2
Inner Mongolia	2534	0	0	0	75	0
Ningxia	688	1	0	0	72	0
Taipei and environs	2359	0	0	0	32	1
Qinghai	603	0	0	0	18	0
Macao SAR	66	0	0	0	10	0
Xizang	344	0	0	0	1	0
Total	**142823**	**439**	**508**	**29**	**78630**	**2747**

Table 2. Countries, territories or areas outside China with reported laboratory-confirmed COVID-19 cases and deaths. Data as of 27 February 2020

Country/Territory/Area	Confirmed* cases (new)	Likely place of exposure†			Total cases with site of transmission under investigation (new)	Total deaths (new)
		China (new)	Outside reporting country and outside China (new)	In reporting country (new)		
Western Pacific Region						
Republic of Korea	1766 (505)	13 (0)	4 (0)	605 (0)	1144 (505)	13 (1)
Japan	186 (22)	28 (0)	11 (3)	129 (13)	18 (6)	3 (2)
Singapore	93 (2)	24 (0)	0 (0)	69 (2)	0 (0)	0 (0)
Australia	23 (0)	12 (0)	8 (0)	3 (0)	0 (0)	0 (0)
Malaysia	22 (0)	18 (0)	2 (0)	2 (0)	0 (0)	0 (0)
Viet Nam	16 (0)	8 (0)	0 (0)	8 (0)	0 (0)	0 (0)
Philippines	3 (0)	3 (0)	0 (0)	0 (0)	0 (0)	1 (0)
Cambodia	1 (0)	1 (0)	0 (0)	0 (0)	0 (0)	0 (0)
South-East Asia Region						
Thailand	40 (0)	23 (0)	0 (0)	7 (0)	10 (0)	0 (0)
India	3 (0)	3 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Nepal	1 (0)	1 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Sri Lanka	1 (0)	1 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Region of the Americas						
United States of America	59 (6)	14 (0)	42 (6)	2 (0)	1 (0)	0 (0)
Canada	11 (1)	7 (0)	2 (1)	1 (0)	1 (0)	0 (0)
Brazil	1 (1)	0 (0)	1 (1)	0 (0)	0 (0)	0 (0)
European Region						
Italy	400 (78)	3 (0)	0 (0)	121 (0)	276 (78)	12 (1)
Germany	21 (3)	2 (0)	1 (1)	14 (0)	4 (2)	0 (0)
France	18 (6)	6 (1)	2 (2)	7 (0)	3 (3)	2 (1)
The United Kingdom	13 (0)	2 (0)	10 (0)	1 (0)	0 (0)	0 (0)
Spain	12 (10)	0 (0)	10 (8)	1 (1)	1 (1)	0 (0)
Croatia	3 (1)	0 (0)	2 (1)	1 (0)	0 (0)	0 (0)
Austria	2 (0)	0 (0)	2 (0)	0 (0)	0 (0)	0 (0)
Finland	2 (1)	1 (0)	1 (1)	0 (0)	0 (0)	0 (0)
Israel	2 (0)	0 (0)	2 (0)	0 (0)	0 (0)	0 (0)
Russian Federation	2 (0)	2 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Sweden	2 (1)	1 (0)	1 (1)	0 (0)	0 (0)	0 (0)
Belgium	1 (0)	1 (0)	0 (0)	0 (0)	0 (0)	0 (0)
Denmark	1 (1)	0 (0)	1 (1)	0 (0)	0 (0)	0 (0)
Estonia	1 (1)	0 (0)	0 (0)	0 (0)	1 (1)	0 (0)
Georgia	1 (1)	0 (0)	1 (1)	0 (0)	0 (0)	0 (0)
Greece	1 (1)	0 (0)	1 (1)	0 (0)	0 (0)	0 (0)
North Macedonia	1 (1)	0 (0)	1 (1)	0 (0)	0 (0)	0 (0)
Norway	1 (1)	1 (1)	0 (0)	0 (0)	0 (0)	0 (0)
Romania	1 (1)	0 (0)	1 (1)	0 (0)	0 (0)	0 (0)
Switzerland	1 (0)	0 (0)	1 (0)	0 (0)	0 (0)	0 (0)
Eastern Mediterranean Region						
Iran (Islamic Republic of)	141 (46)	0 (0)	0 (0)	28 (0)	113 (46)	22 (7)
Kuwait	43 (31)	0 (0)	43 (31)	0 (0)	0 (0)	0 (0)
Bahrain	33 (7)	0 (0)	33 (7)	0 (0)	0 (0)	0 (0)
United Arab Emirates	13 (0)	6 (0)	2 (0)	5 (0)	0 (0)	0 (0)
Iraq	6 (1)	0 (0)	6 (1)	0 (0)	0 (0)	0 (0)
Oman	4 (0)	0 (0)	4 (0)	0 (0)	0 (0)	0 (0)

Lebanon	2 (1)	0 (0)	1 (0)	0 (0)	1 (1)	0 (0)
Pakistan	2 (2)	0 (0)	2 (2)	0 (0)	0 (0)	0 (0)
Afghanistan	1 (0)	0 (0)	1 (0)	0 (0)	0 (0)	0 (0)
Egypt	1 (0)	0 (0)	0 (0)	1 (0)	0 (0)	0 (0)
African Region						
Algeria	1 (0)	0 (0)	1 (0)	0 (0)	0 (0)	0 (0)
Subtotal for all regions	**2959 (732)**	**181 (2)**	**200 (71)**	**1005 (16)**	**1573 (643)**	**53 (12)**
International conveyance[‡] (Diamond Princess)	705 (14)	0 (0)	0 (0)	0 (0)	0 (0)	4 (1)
Grand total[§]	**3664 (746)**	**181 (2)**	**200 (71)**	**1005 (16)**	**1573 (643)**	**57 (13)**

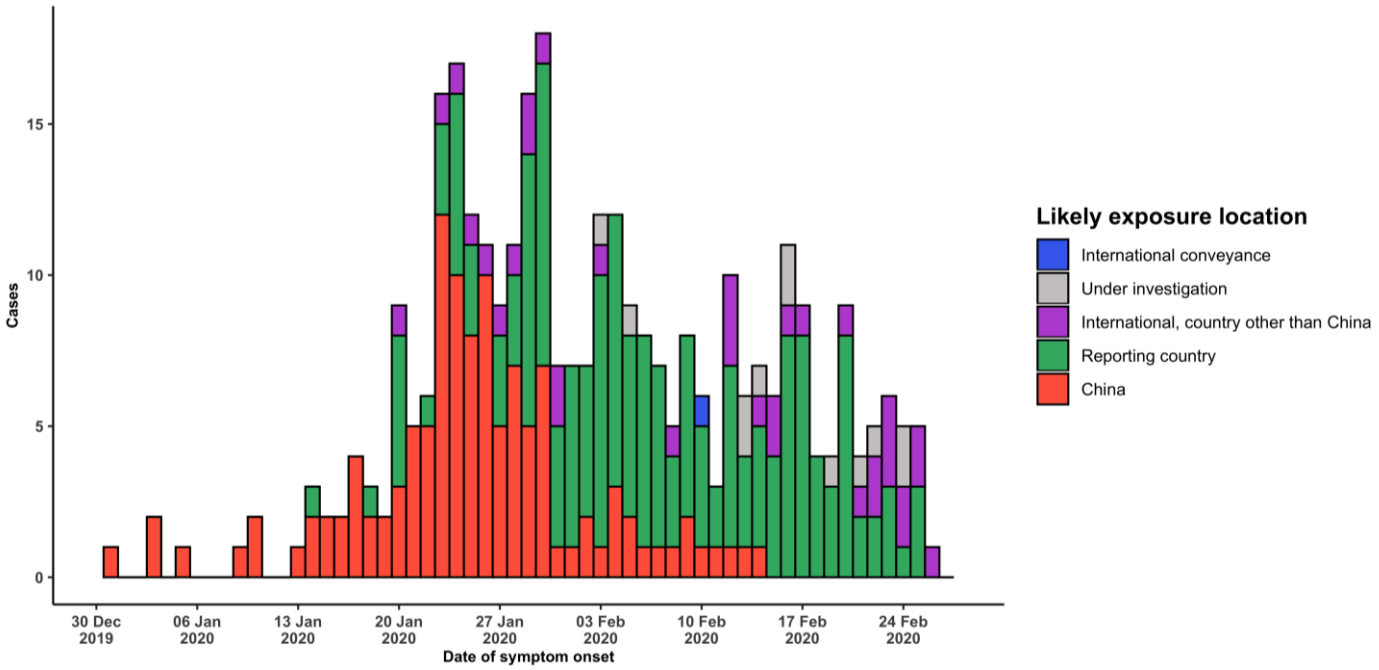
*Case classifications are based on WHO case definitions for COVID-19.

[†]Location of transmission is classified based on WHO analysis of available official data and may be subject to reclassification as additional data become available.

[‡]Cases identified on a cruise ship currently in Japanese territorial waters.

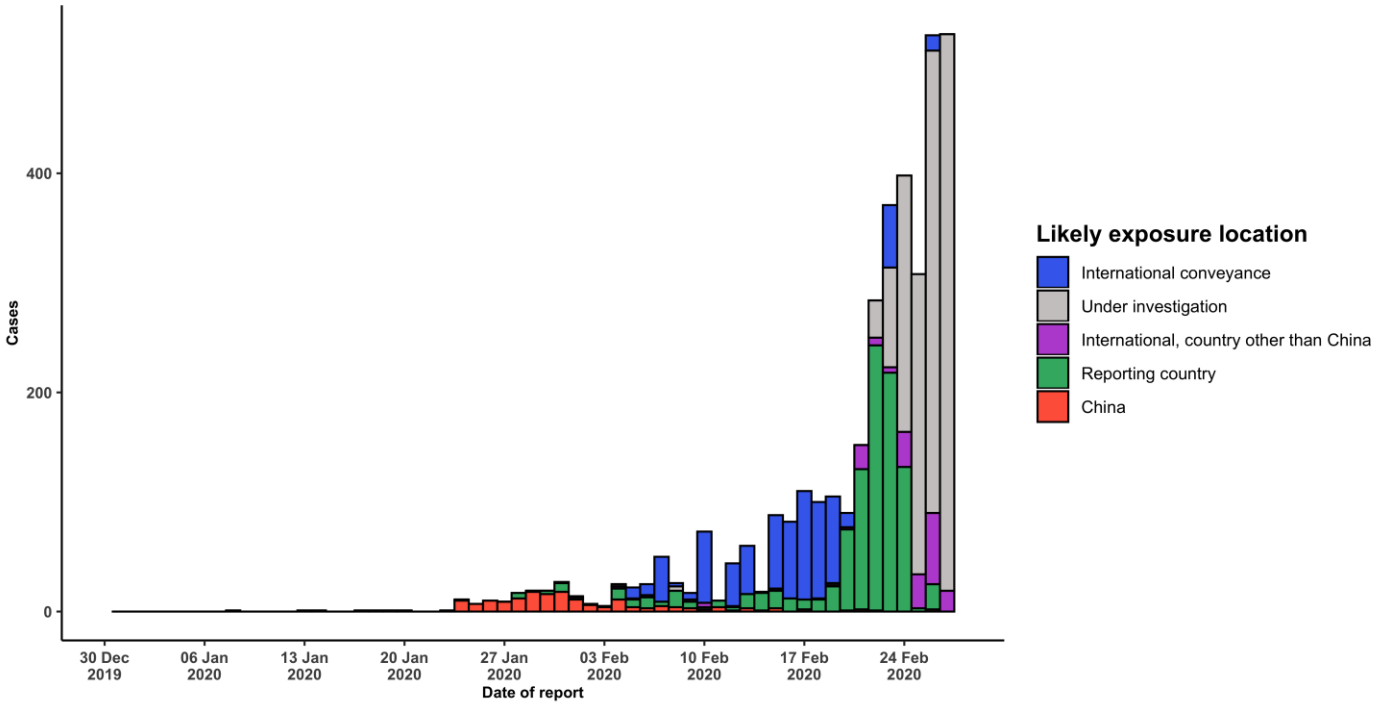
[§]234 female/331 male/3099 unknown. 26 healthcare workers (5 female/11 male/ 10 unknown).

Figure 3. Epidemic curve of COVID-19 cases (n=338) identified outside of China, by date of onset of symptoms and likely exposure location, 27 February 2020



Note for figure 2: Of the 3664 cases reported outside China, 92 were detected while apparently asymptomatic. For the remaining 3572 cases, information on date of onset is available only for the 338 cases presented in the epidemiologic curve.

Figure 4. Epidemic curve of COVID-19 cases (n=3664) identified outside of China, by date of report and likely exposure location, 27 February 2020



STRATEGIC OBJECTIVES

WHO's strategic objectives for this response are to:

- Interrupt human-to-human transmission including reducing secondary infections among close contacts and health care workers, preventing transmission amplification events, and preventing further international spread*;
- Identify, isolate and care for patients early, including providing optimized care for infected patients;
- Identify and reduce transmission from the animal source;
- Address crucial unknowns regarding clinical severity, extent of transmission and infection, treatment options, and accelerate the development of diagnostics, therapeutics and vaccines;
- Communicate critical risk and event information to all communities and counter misinformation;
- Minimize social and economic impact through multisectoral partnerships.

*This can be achieved through a combination of public health measures, such as rapid identification, diagnosis and management of the cases, identification and follow up of the contacts, infection prevention and control in health care settings, implementation of health measures for travelers, awareness-raising in the population and risk communication.

PREPAREDNESS AND RESPONSE

- To view all technical guidance documents regarding COVID-19, please go to this webpage.
- WHO is working closely with International Air Transport Association (IATA) and have jointly developed a guidance document to provide advice to cabin crew and airport workers, based on country queries. The guidance can be found on the IATA webpage.
- WHO has developed a protocol for the investigation of early cases (the "First Few X (FFX) Cases and contact investigation protocol for 2019-novel coronavirus (2019-nCoV) infection"). The protocol is designed to gain an early understanding of the key clinical, epidemiological and virological characteristics of the first cases of COVID-19 infection detected in any individual country, to inform the development and updating of public health guidance to manage cases and reduce potential spread and impact of infection.
- WHO has been in regular and direct contact with Member States where cases have been reported. WHO is also informing other countries about the situation and providing support as requested.
- WHO has developed interim guidance for laboratory diagnosis, advice on the use of masks during home care and in health care settings in the context of the novel coronavirus (2019-nCoV) outbreak, clinical management, infection prevention and control in health care settings, home care for patients with suspected novel coronavirus, risk communication and community engagement and Global Surveillance for human infection with novel coronavirus (2019-nCoV).
- WHO has prepared disease commodity package that includes an essential list of biomedical equipment, medicines and supplies necessary to care for patients with 2019-nCoV.
- WHO has provided recommendations to reduce risk of transmission from animals to humans.
- WHO has published an updated advice for international traffic in relation to the outbreak of the novel coronavirus 2019-nCoV.
- WHO has activated of R&D blueprint to accelerate diagnostics, vaccines, and therapeutics.
- WHO has developed online courses on the following topics: A general introduction to emerging respiratory viruses, including novel coronaviruses (available in French, Chinese, Spanish, and Portuguese); Critical Care of Severe Acute Respiratory Infections; and Health and safety briefing for respiratory diseases - ePROTECT (available in French); Infection Prevention and Control for Novel Coronavirus (COVID-19); Critical Care Severe Acute Respiratory Infection

- WHO is providing guidance on early investigations, which are critical to carry out early in an outbreak of a new virus. The data collected from the protocols can be used to refine recommendations for surveillance and case definitions, to characterize the key epidemiological transmission features of COVID-19, help understand spread, severity, spectrum of disease, impact on the community and to inform operational models for implementation of countermeasures such as case isolation, contact tracing and isolation. Several protocols are available here: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/early-investigations
- WHO is working with its networks of researchers and other experts to coordinate global work on surveillance, epidemiology, modelling, diagnostics, clinical care and treatment, and other ways to identify, manage the disease and interrupt onward transmission. WHO has issued interim guidance for countries, which are updated regularly.
- WHO is working with global expert networks and partnerships for laboratory, infection prevention and control, clinical management and mathematical modelling.

RECOMMENDATIONS AND ADVICE FOR THE PUBLIC

If you are not in an area where COVID-19 is spreading, or if you have not travelled from one of those areas or have not been in close contact with someone who has and is feeling unwell, your chances of getting it are currently low. However, it's understandable that you may feel stressed and anxious about the situation. It's a good idea to get the facts to help you accurately determine your risks so that you can take reasonable precautions. (See Frequently Asked Questions) Your healthcare provider, your national public health authority and your employer are all potential sources of accurate information on COVID-19 and whether it is in your area. It is important to be informed of the situation where you live and take appropriate measures to protect yourself. (See Protection measures for everyone).

If you are in an area where there is an outbreak of COVID-19 you need to take the risk of infection seriously. Follow the advice issued by national and local health authorities. Although for most people COVID-19 causes only mild illness, it can make some people very ill. More rarely, the disease can be fatal. Older people, and those with pre-existing medical conditions (such as high blood pressure, heart problems or diabetes) appear to be more vulnerable. (See Protection measures for persons who are in or have recently visited (past 14 days) areas where COVID-19 is spreading).

Last updated: February 27, 2020

CDC Coronavirus Disease 2019 (COVID-19) Guidance for State, Local, and Territorial Partners and Local Health Departments

Interim guidance documents relevant to State, Local, and Territorial partners regarding COVID-19

Aircraft

Interim Guidance for Airlines and Airline Crew: Coronavirus Disease 2019 (COVID-19)

- Interim guidance for the commercial airline industry about COVID-19

Safety Alert for Operators 20001: 2019 Novel Coronavirus: Interim Health Guidance for Air Carrier and Crews

- Interim guidance from the CDC and Federal Aviation Administration for Air Carriers and Crewmembers

Preventing Spread of Disease on Commercial Aircraft: Guidance for Cabin Crew

- This guidance provides cabin crew with practical methods to protect themselves, passengers, and other crew members when someone onboard is sick with a possible contagious disease.

Businesses, Employers, and Schools

Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19), February 2020

- Interim guidance that may help prevent workplace exposures to acute respiratory illness, including COVID-19, in non-healthcare settings.

Community Infection Control

Interim Guidance for Preventing the Spread of Coronavirus Disease 2019 (COVID-19) in Homes and Residential Communities

- Interim guidance to help prevent COVID-19 from spreading among people in their homes and in other residential communities.

Interim Guidance for Discontinuation of In-Home Isolation for Patients with COVID-19

- Interim guidance to help healthcare providers and public health officials managing patients with coronavirus disease (COVID-19) under in-home isolation to help prevent the spread of COVID-19 in the community.

Community Mitigation

CDC in Action: Preparing Communities for Potential Spread of COVID-19

- Information on how CDC is aggressively responding to the global outbreak of COVID-19 and preparing for the potential of community spread in the United States.

Last updated: February 27, 2020

Healthcare Professionals and Infection Control

Evaluating and Reporting Persons Under Investigation (PUI)

- The Centers for Disease Control and Prevention (CDC) clinical criteria for a COVID-19 person under investigation (PUI). Subject to change as additional information becomes available.

Flowchart to Identify and Assess 2019 Novel Coronavirus

- Flowchart for the evaluation of patients who may be ill with or who may have been exposed to COVID-19.

Interim Infection Prevention and Control Recommendations for Patients with Confirmed Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) or Persons Under Investigation for SARS-CoV-2 in Healthcare Settings

- Interim infection control procedures including administrative rules and engineering controls, environmental hygiene, correct work practices, and appropriate use of personal protective equipment (PPE) are all necessary to prevent infections from spreading during healthcare delivery. **This guidance is not intended for non-healthcare settings (e.g., schools) OR to persons outside of healthcare settings.**

Interim Guidance of Emergency Medical Services (EMS) Systems and 911 Public Safety Answering Points (PASPs) for COVID-19 in the United States

- Interim guidance for all first responders, including law enforcement, fire services, emergency medical services, and emergency management officials, who anticipate close contact with persons with confirmed or possible COVID-19 in the course of their work

Interim Guidance for Collection and Submission of Postmortem Specimens from Deceased Persons Under Investigation (PUI) for COVID-19, February 2020

- Interim guidance for the collection and submission of postmortem specimens from deceased persons under investigation (PUI) for COVID-19. This document also provides recommendations for biosafety and infection control practices during specimen collection and handling, including during autopsy procedures. The guidance can be utilized by medical examiners, coroners, pathologists, other workers involved in the postmortem care of deceased PUI, and local and state health departments.

Interim Guidance for Discontinuation of Transmission-Based Precautions and Disposition of Hospitalized Patients with COVID-19

- Interim guidance for healthcare providers and public health officials managing patients with coronavirus disease (COVID-19) to help prevent the spread of COVID-19 in healthcare facilities.

Interim Clinical Guidance for Management of Patients with Confirmed COVID-19

- Interim guidance for clinicians caring for patients with confirmed COVID-19

Last updated: February 27, 2020

Interim Guidance for Implementing Home Care of People Not Requiring Hospitalization for 2019 Novel Coronavirus (2019-nCoV)

- Interim guidance for staff at local and state health departments, infection prevention and control professionals, and healthcare personnel who are coordinating the home care and isolation[1] of people with confirmed or suspected 2019-nCoV infection, including persons under investigation (see Criteria to Guide Evaluation of Persons Under Investigation (PUI) for 2019- nCoV).

Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with 2019 Novel Coronavirus (2019-nCoV)

- Interim guidance intended to assist with assessment of risk, monitoring, and work restriction decisions for HCP with potential exposure to 2019-nCoV. For guidance on assessment and management of exposure risk in non-healthcare settings, refer to the Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential 2019 Novel Coronavirus (2019-nCoV) Exposure in Travel-associated or Community Settings.

Maritime

Interim Guidance for Ships on Managing Suspected Coronavirus Disease 2019

- Interim guidance for ships originating from, or stopping in, the United States to help prevent, detect, and medically manage suspected 2019-nCoV infections.

Personal Protective Equipment (PPE)

Healthcare Supply of Personal Protective Equipment

- CDC specific PPE recommendations based on the current COVID-19 situation and availability of PPE.

Public Health Officials

Case Report Form for 2019 Novel Coronavirus

- The Case Report Form is intended for local and state health departments who have a laboratory confirmed case of 2019-nCoV to report to CDC.

Information for Health Departments on Reporting a Person Under Investigation (PUI) for 2019-nCoV

- Information for health departments on reporting and specimen referral for Persons Under Investigation (PUIs).

Interim Guidance for Public Health Personnel Evaluating Persons Under Investigation (PUIs) and Asymptomatic Close Contacts of Confirmed Cases at Their Home or Non-Home Residential Settings

- Guidance is intended to address recommended infection prevention and control practices when public health interviews or assessments are performed at a home or non-home residential settings.

Last updated: February 27, 2020

Pandemic Preparedness Resources

- While the content at the links provided below was developed to prepare for, or respond to, an influenza ("flu") pandemic, the newly emerged coronavirus disease 2019 (COVID-19) is a respiratory disease that seems to be spreading much like flu. Guidance developed for influenza pandemic preparedness would be appropriate in the event the current COVID-19 outbreak triggers a pandemic.

Pregnant Women and Children

Interim Guidance on Breastfeeding for a Mother Confirmed or Under Investigation for COVID-19

- Interim guidance for women who are confirmed to have COVID-19 or are persons-under- investigation (PUI) for COVID-19 and are currently breastfeeding.

Interim Considerations for Infection Prevention and Control of Coronavirus Disease 2019 (COVID-19) in Inpatient Obstetric Healthcare Settings

- Interim for healthcare facilities providing obstetric care for pregnant patients with confirmed coronavirus disease (COVID-19) or pregnant persons under investigation (PUI) in inpatient obstetric healthcare settings including obstetrical triage, labor and delivery, recovery and inpatient postpartum settings.

Travelers

Information for Travelers

- This page includes information about 2019 novel coronavirus (COVID-19) for travelers going to and returning from China, and information for aircrew and resources ship industry.

Travelers to China

- Travel recommendations for travel to China

Travelers from China arriving in the U.S.

- Information for travelers from China arriving to the U.S.

Risk Assessment

Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential 2019 Novel Coronavirus (COVID-19) Exposure in Travel-associated or Community Settings

- Interim guidance to provide U.S. public health authorities and other partners with a framework for assessing and managing risk of potential exposures to COVID-19 and implementing public health actions based on a person's risk level and clinical presentation.

Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with 2019 Novel Coronavirus (2019-nCoV)

- Interim guidance is intended to assist with assessment of risk, monitoring, and work restriction decisions for healthcare providers with potential exposure to COVID-19.

Last updated: February 27, 2020

Stigma

Stigma Related to COVID-19

- Information to combat stigma and discrimination associated with COVID-19.

Frequently Asked Questions (FAQs)

Frequently Asked Questions and Answers about COVID-19

- General FAQs

Healthcare Infection Prevention and Control FAQs for COVID-19

- **Who is this for:** Healthcare personnel who may care for patients who are confirmed with or under investigation for COVID-19.
- **What is it for:** This creates FAQs to support the existing Healthcare Infection Prevention and Control Guidance for COVID-19.
- **How is it used:** To assist healthcare facilities in preventing transmission of COVID-19 in healthcare settings.

Frequently Asked Questions and Answers: Coronavirus Disease-2019 (COVID-19) and Children

- This is a list of frequently asked questions and answers for questions about COVID-19 relating to children.

Frequently Asked Questions and Answers: Coronavirus Disease 2019 (COVID-19) and Pregnancy

- This is a list of frequently asked questions and answers for pregnant women, infants, and women who are breastfeeding.

Frequently Asked Questions about Respirators and their Use

Healthcare Professionals: Frequently Asked Questions and Answers

- FAQs for healthcare professionals

Information for Laboratories COVID-19 Requests for Diagnostic Panels and Virus

- FAQs for lab professionals

Travel: Frequently Asked Questions and Answers

- General travel-related FAQs

Last updated: February 27, 2020

Additional Resources

2020 Health Alert (HAN) Messages: CDC's Health Alert Network (HAN) is CDC's primary method of sharing cleared information about urgent public health incidents with public information officers; federal, state, territorial, tribal, and local public health practitioner; clinicians; and public health laboratories.

CDC Newsroom: CDC Media Telebriefing: Update on COVID-19: CDC provides an update periodically to media on the COVID-19 response. Sign up for media announcements.

Clinician Outreach and Communication Activity (COCA) Calls/Webinars: During COCA Calls/Webinars, subject matter experts present key emergency preparedness and response topics, followed by meaningful Q&A with participants. The call or webinar will offer the most up to date information on guidance for clinicians.

Travel Health Notices: Travel Health Notices inform travelers and clinicians about current health issues that impact travelers' health, like disease outbreaks, special events or gatherings, and natural disasters, in specific international destinations.

Coronavirus Disease 2019 (COVID-19) Risk Assessment and Public Health Management Decision Making

CDC Daily Key Points

Coronavirus Disease 2019 ("COVID-19") Outbreak

February 26, 2020

All content updated since February 25 is shown in colored text.

MAIN KEY POINTS

- There is an expanding global outbreak of respiratory illness caused by a novel (new) coronavirus.
- This virus has been named "SARS-CoV-2;" the disease it causes has been named COVID-19.
    - Due to potential for confusion with SARS-CoV, where possible, public communications will use "the virus that causes COVID-19."
- While most COVID-19 cases outside of China have been associated with travel to or from China, community spread is being detected in a growing number of countries.
- Destinations with widespread or sustained community spread of COVID-19 include China, Iran, Italy, Japan, and South Korea.
- Other destinations with instances of apparent community spread include Hong Kong, Singapore, Taiwan, Thailand, and Vietnam.
- The fact that COVID-19 has caused illness, including illness resulting in death, and sustained person-to-person spread is concerning. These factors meet two of the criteria of a pandemic.
- As community spread is detected in more and more countries, the world moves closer toward meeting the third criteria, worldwide spread of the new virus.
- The potential public health threat posed by COVID-19 is high, both globally and to the United States.
- But individual risk is dependent on exposure.
- For the general American public, who are unlikely to be exposed to this virus at this time, the immediate health risk from COVID-19 is low.
- Under current circumstances, certain people will have an increased risk of infection.
    - For example, healthcare workers caring for patients with COVID-19 and other close contacts of persons with COVID-19.
- CDC has developed guidance to help in the risk assessment and management of people with potential exposures to COVID-19.
- CDC expects that more cases will be reported in the United States, including person-to-person spread.
- Global efforts at this time are focused concurrently on containing spread of and mitigating the impact of this virus.
- The federal government is working closely with state, local, tribal, and territorial partners, as well as public health partners, to respond to this public health threat.
- The public health response is aggressive and multi-layered, with the goal of detecting introductions of this virus in the United States and reducing the spread and the impact of this virus.
- CDC is operationalizing all of its pandemic preparedness and response plans, working on multiple fronts to meet these goals, including specific measures to prepare communities to respond local transmission of the virus that causes COVID-19.

- Pandemic guidance developed in anticipation of an influenza pandemic is being repurposed and adapted for a COVID-19 pandemic.
- Public health partners are encouraged to review their pandemic preparedness plans at this time.
- At this time, there is no vaccine to protect against COVID-19 and no medications approved to treat it.
- Nonpharmaceutical interventions (NPIs) would be the most important response strategy. NPIs simultaneously help contain the spread of disease and reduce the impact of disease.

SITUATION UPDATE

- To date, 42 international locations (including the U.S.) have reported confirmed cases of COVID-19, most recently Algeria, Austria, Brazil, Croatia, Switzerland.
- CDC is reviewing and updating their travel guidance daily.
- To date, CDC has issued:
    - Level 3 Travel Health Notices (Avoid Nonessential Travel) for China and South Korea.
    - Level 2 Travel Health Notices (Practice Enhanced Precautions) for Iran, Italy, and Japan.
    - Level 1 Travel Health Notices (Practice Usual Precautions) for Hong Kong.
- CDC also recommends that all travelers reconsider cruise ship voyages into or within Asia at this time.
    - This is consistent with guidance by the U.S. State Department.
- This is a rapidly evolving situation. CDC is constantly reviewing and updating its guidance as needed.
- CDC is reporting confirmed cases of COVID-19 in the United States in two categories:
    1. Cases detected through our domestic public health systems, and
    2. Cases among people who were repatriated via U.S. State Department flights from Wuhan, China and from the *Diamond Princess* cruise ship (Japan).
- 15 cases of COVID-19 have been detected through U.S. public health surveillance.
    - Two of these cases occurred through person-to-person spread.
    - On February 26, CDC confirmed an infection with the virus that causes COVID-19 in a person who reportedly did not have relevant travel history or exposure to another COVID-19 patient.
    - It's possible this could be an instance of community spread of COVID-19, which would be the first time that has happened in the United States.
    - Community spread means spread of an illness for which the source of infection is unknown.
    - It's also possible, however, that the patient may have been exposed to a returned traveler who was infected.
    - All the remaining cases detected through the U.S. public health system were in persons who had travel to China.
- 45 cases of COVID-19 have been detected among the 1,100+ people repatriated from Hubei Province, China and the *Diamond Princess*.
    - 3 people were repatriated from Wuhan.
    - 42 people were repatriated from the Diamond Princess, an increase of 2 since yesterday.

- Almost all of the people from the Wuhan flights who were quarantined have finished their 14-day quarantine period.
- Because the passengers on the Diamond Princess were in a close setting where there was significant spread of COVID-19, they are considered at high-risk for infection. CDC expects to see additional confirmed cases of among those passengers.

WHAT YOU CAN DO

- While the immediate risk of this new virus to the American public is believed to be low at this time, everyone can do their part to help us respond to this emerging public health threat:
    - It's currently flu and respiratory disease season and CDC recommends getting a flu vaccine, taking everyday preventive actions to help stop the spread of germs, and taking flu antivirals if prescribed.
    - If you are a healthcare provider, be on the look-out for people with who recently traveled from China and fever and respiratory symptoms.
    - If you are a healthcare provider caring for a COVID-19 patient or a public health responder, please take care of yourself and follow recommended infection control procedures.
    - If you have been in China or have been exposed to someone sick with COVID-19 in the last 14 days, you will face some limitations on your movement and activity. Please follow instructions during this time. Your cooperation is integral to the ongoing public health response to try to slow spread of this virus. If you develop COVID-19 symptoms, contact your healthcare provider, and tell them about your symptoms and your travel or exposure to a COVID-19 patient.
    - For people who have had close contact with someone with COVID-19 who develop symptoms, contact your healthcare provider, and tell them about your symptoms and your exposure to a COVID-19 patient.
    - For people who are ill with COVID-19, please follow CDC guidance on how to reduce the risk of spreading your illness to others. This guidance in on the CDC website.

TESTING

- CDC and FDA have developed a protocol that uses two of the three components of the original CDC test kit to detect the virus that causes COVID-19.
- By the end of this week, at least 40 public health laboratories should be able to begin testing using existing kits in their laboratories.
- Further, FDA and CDC have identified additional kits that will be evaluated and could be shipped to public health laboratories.
- In addition, CDC has two laboratories conducting testing for the virus that causes COVID-19. CDC can test approximately 400 specimens per day.
- Commercial labs are working to develop their own tests and hopefully will be available soon. This will allow a greater number of tests to happen close to where potential cases are.

CDC ACTIONS

- CDC is aggressively responding to the global outbreak of COVID-19 and preparing for the potential of community spread in the United States.

- **Preparing first responders, healthcare providers, and health systems:**
    - Establishing **visibility across healthcare systems** to understand healthcare use, particularly surges in demand for medical care and associated resources.
    - Conducting **extensive outreach to clinical and hospital professional organizations** to ensure health system **preparedness**.
    - Producing more than **23 guidance documents** on infection control, hospital preparedness assessments, personal protective equipment (PPE) supply planning, and clinical evaluation and management (as of February 22, 2020).
        - Working closely with healthcare facilities and providers to **reinforce infection control principles** that recognize PPE is one component of a larger set of practices that help to limit the spread of disease.
        - **Developing a range of respirator conservation strategies**, including strategies to make supplies last longer (such as using alternative products like reusable respirators) and extending the use of disposable respirators.
    - Leveraging existing **telehealth tools** to direct people to the right level of healthcare for their medical needs.
    - **Working with supply chain partners** to understand supply usage, what products are available, and when more aggressive measures may need to be taken to ensure that healthcare workers at highest risk have access to PPE.
    - **Sharing information with stakeholders** to help them recognize when to shift the strategies they are using.
- **Reinforcing state, territorial, and local public health readiness:**
    - **Assessing state and local readiness** to implement community mitigation measures like home containment, including housing and transportation needs.
    - Coordinating with states to **identify and mitigate gaps in readiness** that will help reduce the spread of disease in the community while protecting workers, infrastructure, and institutions.
    - Linking public health agencies and healthcare systems to **identify and mitigate stressors to the health system**
    - **Tracking stockpiles of PPE** across jurisdictions.
    - Working with state and local public health to **use existing Public Health Emergency Preparedness (PHEP) funding** to support COVID-19 preparedness and response activities.
    - Leveraging funding mechanisms to help states **accelerate preparedness activities.**
    - Providing **technical assistance and guidance** to states to improve their ability to respond to the outbreak.
- **Supporting communities, businesses, and schools:**
    - **Creating business guidance** to help the public and private sectors ensure they are able to operate with adaptations like telework and flexible sick leave policies, as well as how to respond if an employee gets sick.
    - **Developing guidance for childcare programs, K-12 schools, and colleges/universities** to help them plan and prepare for COVID-19 and respond if there is a local outbreak in their community.

- Providing **planning guides for COVID-19** that households, community- and faith-based organizations, event planners of mass gatherings, and public health communicators can use.
- Educating communities about **nonpharmaceutical interventions (NPIs)** that help slow the spread of illness, like COVID-19.

NONPHARMACEUTICAL INTERVENTIONS

- Nonpharmaceutical Interventions (NPIs) are actions, apart from getting vaccinated and taking medicine, that people and communities can take to help slow the spread of illnesses like pandemic flu or COVID-19.
- NPIs are also known as community mitigation strategies.
- When a new virus spreads among people, causing illness worldwide, it is called a pandemic.
- Because the virus is new, the human population has little or no immunity against it. This allows the virus to spread quickly from person to person worldwide.
- NPIs are among the best ways of controlling a pandemic caused by a respiratory virus when vaccines are not yet available.
- NPIs are grouped in three categories:
    1. personal NPIs (personal protective measures for everyday use and personal protective measures reserved for influenza pandemics);
    2. community NPIs (social distancing measures and school closures and dismissals); and
    3. environmental NPIs (surface cleaning measures)
- View information about NPIs and factors to consider before implementing nonpharmaceutical interventions.

For more information please visit the Coronavirus Disease 2019 Outbreak Page at: www.cdc.gov/COVID19.