

# HEALTH UPDATE: COVID-19 February 28, 2020 INFORMATION AND GUIDELINES FOR CLINICIANS Lane County Public Health Department 24/7/365 REPORTING: 541-682-4041

On February 27<sup>th</sup>, the CDC announced changes to the assessment criteria for persons under investigation for COVID-19 (PUIs). There are two major changes:

- 1. Due to widespread and/or sustained community transmission, affected geographic areas now include Iran, South Korea, Italy and Japan, in addition to mainland China.
- The CDC has issued a critical change to their criteria for evaluating persons under investigation (PUI). This change is intended to capture community-based transmission. Please include COVID-19 in your differential diagnosis for patients meeting the description in Scenario 3 (table below).

Institutional screening protocols for patients potentially infected with COVID-19 need to change immediately to address these new guidelines.

Please see <a href="https://emergency.cdc.gov/han/2020/han00428.asp">https://emergency.cdc.gov/han/2020/han00428.asp</a> for more details.

Patients under investigation (PUIs) meeting criteria in the following three scenarios are eligible for testing:

Scenario	Clinical Features	&	Epidemiologic Risk
1)	Fever** <b>or</b> 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
OR			
2)	Fever <b>and</b> signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)	AND	A history of travel from affected geographic areas* within 14 days of onset
OR			
3)	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

<sup>\*</sup>Affected Geographic Areas with Widespread or Sustained Community Transmission include China, Iran, South Korea, Italy and Japan.

<sup>\*\* 38°</sup>C or 100.4°F

# Recommendations for Reporting, Testing, and Specimen Collection

For detailed information:

https://www.cdc.gov/coronavirus/2019-nCoV/lab/guidelines-clinical-specimens.html

### Identification of Possible PUIs

Healthcare providers must **immediately** notify both infection control personnel at their healthcare facility and their local health department in the event of a PUI for COVID-19. Lane County Public Health: 541-682-4041.

If a patient calls with fever and lower respiratory symptoms, identify if there was any travel history to regions with sustained community transmission or contact with a confirmed person with COVID-19 within the last 14 days. Regions with sustained community transmission include China, Italy, Iran, Japan and South Korea.

Patients identified as a PUI must be isolated immediately, preferably in a negative-pressure room, and placed under standard, contact, and airborne precautions, along with eye protection.

If patient does not need to be admitted, follow CDC home care guidance, as noted here: https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html

# **Specimen Collection**

CDC recommends collection of specimens from the lower and upper respiratory tracts as well as serum. All specimens should be stored at 2–8°F, properly labeled, and shipped overnight on an ice pack. Testing for the virus is currently available only at CDC, but plans are for all 50 "State Public Health Labs" to have testing capacity soon. To arrange for testing approval and specimen shipment call Lane County Public Health: 541-682-4041.

## **Healthcare Infection Control**

For detailed Infection Control guidelines visit <a href="https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html">https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html</a>

CDC recommends standard, contact, and airborne precautions with eye protection for healthcare workers evaluating a possible case of COVID-19. When possible, use phone triage and assessment to do a detailed travel history and determine if patients who might have COVID-19 need to be seen in person. Now is also a good time to review and update infection control policies, including mask use, negative pressure rooms, and patient transport. Preparedness checklists are available here:

https://www.cdc.gov/coronavirus/2019-ncov/hcp/preparedness-checklists.html

Follow guidance from your facility's infection control practitioners, which may include the following:

- Use a negative pressure room if available. Regardless of room type being used, keep exam room door closed.
- If a person with possible COVID-19 arrives unexpectedly, mask the patient and room them promptly.

- If the patient is already in the clinic or waiting room, mask and room them immediately.
- If possible, schedule possible COVID-19 patients as the last patient of the day.
- If feasible, consider patient evaluation outdoors at least 30 feet away from others. Once the patient is masked, escort the patient into the building for rooming.
- If possible, suspected COVID-19 patients should be escorted into the building via an entrance that allows them to access an exam room without exposing others.
- Minimize the number of healthcare workers interacting with the patient; caregivers should follow CDC guidance, which includes eye protection and an N-95 mask or higher level of respiratory protection.
- Collect all specimens and perform clinical interventions in the exam room if possible.
- The exam room should not be used until 2 hours after the patient has left and the room has been thoroughly cleaned and disinfected.