



Novel Coronavirus (2019-nCoV) HEALTH ALERT

Recommendations for Screening, Reporting, Laboratory Testing, & Infection Control of 2019 Novel Coronavirus (2019-nCoV)

To: Health Care Providers
From: Celeste Philip, Sonoma County Health Officer
Questions: Disease Control Unit – Public Health (565-4566)
Date: January 31, 2020 (update from January 17, 2020)

SITUATION:

An outbreak of pneumonia of unknown etiology in Wuhan, China was reported to the World Health Organization (WHO) on December 31, 2019, and a novel coronavirus was soon identified as the cause. On January 21, 2020, the Centers for Disease Control and Prevention (CDC) announced the first U.S. case in a traveler who had returned from Wuhan. As of 11 AM on 1/31/2020 there are 9,776 confirmed cases worldwide, the majority in mainland China. Of these 213 were fatal. There have been six cases confirmed in the US, five among travelers and the sixth in the spouse of a traveler. This sixth case represents the first documented case of person-to-person transmission in the US. At least 241 persons have been under investigation for illness in the US. Of these, seven have been confirmed positive, 114 are negative and the remainder are pending. The US cases have been identified in Washington (1), Illinois (2), Arizona (1), and California (3 – Los Angeles, Orange and Santa Clara counties). **There are no confirmed cases in Sonoma County. There is no evidence of 2019-nCoV circulating in the US and risk of infection is currently low.**

On January 30, 2020, the World Health Organization (WHO) declared the outbreak of 2019-nCoV a Public Health Emergency of International Concern (PHEIC). Transmission from human to human in the absence of symptoms has been documented, prompting increased activities to prevent transmission, especially among travelers recently visiting China. The CDC has issued a Level 3 travel warning, recommending that individuals avoid all nonessential travel to China. Although there is no formal travel ban, Delta Airlines, American Airlines and United Airlines are suspending all flights between the U.S. and China. The Health and Human Services Secretary Alex Azar announced on January 31, 2020 that the coronavirus has been declared a public health emergency in the U.S. Beginning at 5 p.m. on February 2, U.S. citizens returning from Hubei province will be subject to a mandatory 14-day quarantine, while other Americans who traveled elsewhere in China will face enhanced screening and a self-quarantine of up to 14 days. All flights coming to the U.S. from China will be funneled through seven airports that are equipped to screen passengers for symptoms of the virus.

Azar also said that President Trump is temporarily suspending entry into the U.S. for foreign nationals who pose a risk of transmitting the virus.

Early recognition and appropriate infection control precautions are critical for local disease control.

CDC continues to work with international partners to control the outbreak at the source. Efforts to prevent infected persons from entering into the US and transmitting the virus to others have been enhanced and now include screening at 20 U.S. airports. Limited information is available to characterize many features of 2019-nCoV including the incubation period, whether infected persons are infectious before they show clinical signs and symptoms, and the spectrum of clinical illness associated with 2019-nCoV. No vaccine or specific treatment for 2019-nCoV infection is available; care is supportive.

The CDC clinical criteria for a 2019-nCoV patient under investigation (PUI) have been developed based on what is known about MERS-CoV and SARS-CoV and are subject to change as additional information becomes available.

ACTIONS REQUESTED OF CLINICIANS :

1. **TRIAGE** rapidly any patients with fever and respiratory chief complaints, including asking about recent travel to China or exposure to anyone diagnosed with 2019-nCoV. Patients with these symptoms should be provided a surgical mask to wear and placed in a negative pressure room, a private room, or asked to wait in their vehicle if these rooms are not available and they have a mobile phone to be notified when they can re-enter the facility for assessment.

2. **ASSESS** patients with the following criteria who meet the definition of Patients Under Investigation (PUI) for Novel Coronavirus (2019-nCoV) :

Clinical Features	&	Epidemiologic 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 ⁱ with a laboratory-confirmed 2019-nCoV patient within 14 days of symptom onset
Fever and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)	AND	A history of travel from Hubei Province, China 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 mainland China within 14 days of symptom onset

Please contact Public Health if you are unsure about a patient’s travel history. This situation is evolving rapidly, and criteria for PUIs may change as more is known about the virus. Check CDC’s guidance for healthcare providers regularly for the most up-to-date information.

3. **ISOLATE and IMPLEMENT INFECTION CONTROL MEASURES** to include standard, contact, and airborne precautions immediately for suspected cases. Patients in whom a diagnosis of 2019-nCoV is being considered should be isolated in a single room (with a private bathroom), and healthcare personnel should follow standard, contact, and droplet precautions, including the use of appropriate

personal protective equipment (PPE). This should include eye protection. Infection control personnel and the local health department should be immediately contacted for consultation. Guidelines for infection prevention and control for hospitalized patients with known or suspected 2019-nCoV in U.S. hospitals are available at <http://www.cdc.gov/vhf/Coronavirus/hcp/infection-prevention-and-control-recommendations.html>.

4. **REPORT IMMEDIATELY BY PHONE** to Sonoma County Public Health Disease Control at **(707) 565-4566**. After hours and weekends, call **REDCOM at (707) 568-5992** to reach the on-call Health Officer.
5. **TEST ONLY** after approval from Sonoma County Public Health. Clinicians should follow the CDC Guidelines: [Interim Guidelines for Collecting, Handling and Testing Clinical Specimens from Patients Under Investigation for 2019-nCoV](#). **NOTE:** For biosafety reasons, it is not recommended to perform virus isolation in cell culture or initial characterization of viral agents recovered in cultures of specimens from a PUI for 2019-nCoV.
6. **DISINFECT** the environment. Because coronaviruses are enveloped and readily inactivated, clean surfaces and equipment immediately. Products with EPA-approved emerging viral pathogens claims are recommended for use against 2019-nCoV. If there are no available EPA-registered products that have an approved emerging viral pathogen claim for 2019-nCoV, products with label claims against human coronaviruses should be used according to label instructions. See CDC's infection control webpage, section 7, below.
7. **REVIEW**
 - CDC Health Advisory, Evaluating Patients for Possible Coronavirus Virus Disease, <https://emergency.cdc.gov/han/han00426.asp>
 - CDC Interim Guidance For Healthcare Professionals: [CDC Interim 2019-NCoV Guidance for Healthcare Professionals](#)
 - CDC Interim Infection Prevention and Control for 2019-nCoV in a Healthcare Setting: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control.html>

BACKGROUND:

CDC is closely monitoring an outbreak of respiratory illness caused by a novel (new) coronavirus (named "2019-nCoV") that was first detected in Wuhan City, Hubei Province, China and which continues to expand. Chinese health officials have reported thousands of infections with 2019-nCoV in China, with the virus reportedly spreading from person-to-person in many parts of that country. Infections with 2019-nCoV, most of them associated with travel from Wuhan, also are being reported in a growing number of [international locations](#), including the [United States](#). The United States reported the first confirmed instance of person-to-person spread with this virus on January 30, 2020.

Coronaviruses are a large family of viruses that are common in many different species of animals, including camels, cattle, cats, and bats. Rarely, animal coronaviruses can infect people and then spread between people such as with [MERS](#) and [SARS](#).

CDC has launched a 2019 Novel Coronavirus website, updated daily: <https://www.cdc.gov/coronavirus/2019-nCoV/summary.html>

INFECTION CONTROL :

Patients in whom a diagnosis of 2019 Novel Coronavirus is being considered should be isolated in a single room (with a private bathroom), and healthcare personnel should follow standard, contact, and droplet precautions, including the use of appropriate personal protective equipment (PPE). This includes eye protection. Infection control personnel and the local health department should be immediately contacted for consultation.

Guidelines for infection prevention and control for hospitalized patients with known or suspected 2019-nCoV in U.S. hospitals are available at <http://www.cdc.gov/vhf/Coronavirus/hcp/infection-prevention-and-control-recommendations.html>.

ADDITIONAL RESOURCES and REFERENCES:

The following resources are available with information on 2019-nCoV:

- [CDC Travelers' Health: Novel Coronavirus in China](#)
- [CDC Health Alert Network Advisory Update and Interim Guidance on Outbreak of 2019-nCoV in Wuhan, China](#)
- [CDC Information on Coronaviruses](#)
- [World Health Organization Novel Coronavirus-China](#)

ⁱ Close contact is defined as—
a) being within approximately 6 feet (2 meters), or within the room or care area, of a novel coronavirus case for a prolonged period of time while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection); close contact can include caring for, living with, visiting, or sharing a health care waiting area or room with a novel coronavirus case.— or —
b) having direct contact with infectious secretions of a novel coronavirus case (e.g., being coughed on) while not wearing recommended personal protective equipment.