

March 3, 2020

UPDATED Guidance for Clinicians to Report Possible Cases of 2019 Novel Coronavirus (COVID-19)- GUIDANCE SUBJECT TO CHANGE AS OUTBREAK UNFOLDS

Please read this guidance in its entirety.

Summary

- An expanding global outbreak of respiratory infections due to a novel coronavirus (COVID-19) is being closely monitored by the WHO, CDC, and state public health officials. For the most up-to-date information about the outbreak visit <https://www.cdc.gov/coronavirus/2019-ncov/index.html> and <https://dph.georgia.gov/novelcoronavirus>.
- COVID-19 clinical presentation varies in severity from asymptomatic infection or mild illness to severe or fatal illness. Symptoms include fever and signs of respiratory illness (e.g., cough, shortness of breath); case-patients can also develop pneumonia and some reports suggest the potential for clinical deterioration during the second week of illness, although the full spectrum of clinical illness remains unknown.
- Clinicians who suspect COVID-19 infection in a patient should report them **immediately** to the Georgia Department of Public Health (DPH) at 1-866-PUB-HLTH (1-866-782-4584) and ask for a Medical Epidemiologist. **At this time, all laboratory testing for COVID-19 is performed at either the CDC or the Georgia Public Health Laboratory and MUST be coordinated by DPH following triage.**

Recommendations for clinicians evaluating patients at your facility

1. Obtain a detailed travel history for **ALL** patients being evaluated with fever and acute respiratory illness. The Travel Clinical Assistant (TCA) can help identify current outbreaks and endemic diseases of concern around the globe. (<https://dph.georgia.gov/TravelClinicalAssistant>).
2. Patients who meet the following criteria should be considered a **patient under investigation (PUI)** for COVID-19. **Patients should be evaluated using these criteria and then DPH should be called at 1-866-PUB-HLTH to determine whether COVID-19 laboratory testing is warranted.** DPH will also coordinate specimen submission to the laboratory. Note that this information will be updated frequently- the most current PUI criteria can be found at <https://www.cdc.gov/coronavirus/2019-nCoV/clinical-criteria.html>.
 - a. Fever **OR** lower respiratory symptoms (e.g. cough or shortness of breath) **AND** any person, including healthcare workers, who has had close contact with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset.
 - b. Fever **AND** lower respiratory symptoms (e.g. cough or shortness of breath) requiring hospitalization **AND** a history of travel to areas with sustained community spread of COVID-19 within 14 days of symptom onset. Please follow link for the most current list of areas: <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html>
 - c. Fever with severe acute lower respiratory illness (e.g. pneumonia, ARDS) requiring hospitalization **AND** without alternative explanatory diagnosis** **AND** no source of exposure has been identified (i.e. no travel or close contact with confirmed case)

***A respiratory viral panel (including influenza) must be performed and found negative to be considered without alternative explanatory diagnosis. Legionella testing may also be considered, if appropriate.*

3. Please obtain all of the information listed above (travel or exposure history and dates, symptoms and symptom onset date) and evaluate the patient **BEFORE** calling DPH and asking to consult with a Medical Epidemiologist.
4. Patients with **mild illness** who do not meet the criteria for a PUI above and have returned from an area with sustained community spread of COVID-19 (<https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>) should self-isolate at home until symptoms resolve. If respiratory symptoms worsen, they may need to be re-evaluated. Guidance for safe home care can be found at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html>.
5. Appropriate PPE should immediately be utilized by the patient and healthcare professional if the patient meets the PUI criteria. Patients should be asked to wear a surgical mask upon arrival and be evaluated in a private room with the door closed, ideally an airborne infection isolation room, if available. Healthcare personnel entering the room should use standard precautions, contact precautions, airborne precautions, and use eye protection (e.g., goggles or a face shield). More infection control guidance can be found here <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control.html>.
6. Once PPE is in place, immediately notify both infection control personnel at your facility and DPH by calling 1-866-PUB-HLTH (1-866-782-4584) and asking for a Medical Epidemiologist. DPH will perform a risk assessment and, if warranted, will coordinate laboratory testing. **Case-patients must meet the PUI criteria to warrant laboratory testing for COVID-19.** For guidance about collection, handling, and testing of clinical specimens, see <https://www.cdc.gov/coronavirus/2019-nCoV/guidelines-clinical-specimens.html>. If approved for testing, specimens will be sent by healthcare facilities to the Georgia Public Health Laboratory.

For more information

- Georgia DPH COVID-19 guidance and up-to-date information: <https://dph.georgia.gov/novelcoronavirus>
- CDC's guidance for healthcare professionals: <https://www.cdc.gov/coronavirus/2019-nCoV/guidance-hcp.html>
- CDC's guidance for hospitals or healthcare professional preparing for patients with suspect or confirmed COVID-19: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/preparedness-checklists.html>
- For the latest CDC updates on the outbreak: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Clinicians who become aware of cases like those described above should report them immediately to 1-866-PUB-HLTH (1-866-782-4584) and ask for a Medical Epidemiologist.