COVID-19 Update and Healthcare Provider Guidance (last updated 3/5/20)

What We Know:
- The virus causing coronavirus disease 2019 (COVID-19) is a new coronavirus that has not been previously identified and causes a respiratory illness ranging from asymptomatic or mild upper respiratory illness to severe pneumonia, which can be fatal.
- Data published from China indicates that >80% of people with laboratory-confirmed COVID-19 had mild illness.
- Modeling studies from WHO and partners estimate the mortality to be 0.3-1%, which is slightly higher than influenza (0.1-0.2%).
- As of March 3, 2020, Maricopa County has had two confirmed COVID-19 cases. The first in late January, who is now fully recovered and the second in early March for whom the investigation is ongoing. Close contacts of the initial case were monitored and tested multiple times; none of them developed COVID-19.

Healthcare providers caring for a patient with fever and/or acute respiratory symptoms should:
- Obtain detailed travel history, including all national and international travel, for the 14 days prior to symptom onset;
- Consider adding travel screening, including all countries under CDC Travel Warning Levels 2 & 3, to your patient triage protocol;
- Determine if the patient meets criteria outlined below:

<table>
<thead>
<tr>
<th>Clinical Features</th>
<th>Plus</th>
<th>Epidemiologic Risk</th>
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<tbody>
<tr>
<td>Fever(^1) OR signs/symptoms of lower respiratory illness (e.g., cough or shortness of breath) NOT requiring hospitalization</td>
<td>AND</td>
<td>Any person, including health care workers(^2), who has had close contact(^3) with a laboratory-confirmed(^4) COVID-19 patient within 14 days of symptom onset</td>
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<tr>
<td>Fever(^1) OR signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) NOT requiring hospitalization in a person with a high-risk occupation(^5) OR who lives in a congregate setting(^6)</td>
<td>AND</td>
<td>A history of travel from affected geographic areas(^5) within 14 days of symptom onset</td>
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<tr>
<td>Fever(^1) AND signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization</td>
<td>AND</td>
<td>A history of travel from affected geographic areas(^5) within 14 days of symptom onset</td>
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<tr>
<td>Fever(^1) AND severe acute lower respiratory illness (e.g., pneumonia, ARDS) requiring hospitalization, radiographic confirmation of bilateral pulmonary infiltrates, &amp; without alternative explanatory diagnosis (negative influenza testing &amp; respiratory viral panel)(^6,7)</td>
<td>AND</td>
<td>No source of exposure has been identified</td>
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\(^1\)Fever may be subjective or confirmed.
\(^2\)For healthcare personnel, testing may be considered if there has been exposure to a person with suspected COVID-19 without laboratory confirmation
\(^3\)Close contact is defined at the CDC website: [https://www.cdc.gov/coronavirus/2019-ncov/hcpclinical-criteria.html](https://www.cdc.gov/coronavirus/2019-ncov/hcpclinical-criteria.html)
\(^4\)Documentation of laboratory-confirmation of 2019-nCoV may not be possible for travelers or persons caring for patients in other countries.
\(^5\)Countries or counties/states where sustained community transmission has been identified (e.g., countries with CDC Level 2 or 3 Travel Health Notice, and counties/states such as Snohomish County, WA, Solano County, CA, etc.) which can change rapidly
\(^6\)Category includes single or clusters of patients with severe acute lower respiratory illness (e.g., pneumonia, ARDS) of unknown etiology in which COVID-19 is being considered
\(^7\)Also consider testing for Coccidioidomycosis and Legionella

For all patients who meet COVID-19 PUI criteria:
1) Healthcare personnel entering the room should use droplet, contact, and standard precautions, plus eye protection (e.g., goggles or a face shield) and patients can be evaluated in a private room with the door closed (unless performing aerosol-generating procedures, which should be performed in an AIIR);
2) Immediately notify your healthcare facility’s infection control personnel;
3) Immediately notify Maricopa County Department of Public Health:
   a. Monday–Friday 8AM–5PM — call (602) 506-6767 and ask for a Surveillance Nurse or;
   b. After 5PM and on weekends — call (602) 747-7111 and ask for the Provider On-Call.
4) Collect specimens for testing for COVID-19, which include:
   a. Upper respiratory specimen (e.g., nasopharyngeal and oropharyngeal [NP/OP] swab);
   b. Lower respiratory specimen (e.g., BAL, tracheal aspirate) in intubated patients ONLY

For more information, please visit the CDC website: [https://www.cdc.gov/coronavirus/2019-ncov/](https://www.cdc.gov/coronavirus/2019-ncov/)