



ALEXANDRIA HEALTH DEPARTMENT

Communicable Disease Division

4480 King Street

Alexandria, VA 22302

Phone: 703.746.4951

FAX: 703.746.4953

www.alexandriava.gov/health

Stephen A. Haering, MD, MPH, FACPM
Health Director

HEALTH ADVISORY 2: Updated Guidance for Clinicians for identification of cases (2019-nCoV) from China

January 31, 2020

Dear Colleague:

On January 31, 2020, CDC issued updated guidance to assist healthcare providers in the identification, evaluation, and reporting of a Patient Under Investigation (PUI) for a novel coronavirus (2019-nCoV) in the United States. **This new CDC guidance includes additional travel questions and symptom evaluation.** (Outlined below and on attached guidance document)

To help address any questions related to the novel coronavirus or procedures for patients under investigation we are hosting a call with providers. We are offering three sessions. Each call will be 10 minutes of the latest updates, and 20 minutes to answer your questions.

Monday, February 3 at 4:00 p.m.

Wednesday February 5 at 8:00 a.m.

Wednesday February 5 at 12:30 p.m.

Participants please dial 703.746.3009

Password: 479000#

To help us identify suspected cases of (2019-nCoV) we are asking you to do the following:

1. Obtain a detailed **travel history** for patients with fever and acute respiratory illness.
 - Ask patients if they have a history of travel from Hubei Province, China within 14 days of symptom onset
 - Ask patients if they have a history of any travel to China within 14 days of symptom onset
 - Ask patients if they have had close contact with a confirmed case of 2019-nCoV or a person under investigation for 2019-nCoV within 14 days of symptom onset
2. If a patient meets the criteria of a PUI (see included guidance),
 - Ask the patient to wear a surgical mask as soon as the PUI is identified.
 - Evaluate the patient in a private room with the door closed, ideally in an airborne infection isolation room if available.
 - Use standard, contact, and airborne precautions, and eye protection (e.g., goggles or face shield).
 - **Immediately** notify infection control personnel and Alexandria Health Department (AHD). The AHD epidemiologist on call can be reached **24/7 by calling 571.259.8549.**

Next steps for suspected cases:

AHD and Virginia Department of Health will consult with CDC and Virginia's Division of Consolidated Laboratory Services (DCLS) about testing.

- Currently, 2019-nCoV testing is only available at CDC. Three specimen types (lower respiratory, upper respiratory and serum specimens) are recommended.

Special considerations:

- If you are referring a patient to the hospital, **please call ahead** to the emergency room to let the hospital know that a possible novel coronavirus PUI is coming.
- Educate the patient: Instruct the PUI not to remove the surgical mask during travel or upon arrival to the hospital.

For more information on this rapidly evolving situation, please visit the [CDC Novel Coronavirus 2019 website](#) or call Alexandria Health Department Epidemiologist, Christina Chommanard at 703.746.4904. Thank you for all your efforts to keep our community safe and healthy.

Sincerely,

A handwritten signature in black ink that reads "Gaddy". The signature is written in a cursive style with a large initial "G".

Anne Gaddy, MD, MPH
Deputy Health Director
Alexandria Health Department

Criteria to Guide Evaluation of Patients Under Investigation (PUI) for 2019-nCoV

#1. If a person exhibits any of the three combinations of clinical features and epidemiologic risks, go to **#2**

Clinical Features		Epidemiologic Risk
Fever ¹ 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 ² with a laboratory-confirmed ^{3,4} 2019-nCoV patient within 14 days of symptom onset
Fever ¹ and signs/symptoms of 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 ¹ and signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath) requiring hospitalization ⁴	AND	A history of travel from mainland China within 14 days of symptom onset

¹Fever may be subjective or confirmed

²Close contact is defined as— a) being within approximately 6 feet, or within the room or care area, of a 2019-nCoV 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 2019-nCoV case – or – b) having direct contact with infectious secretions of a 2019-nCoV case (e.g., being coughed on) while not wearing recommended personal protective equipment.

³Documentation of laboratory-confirmation of 2019-nCoV may not be possible for travelers or persons caring for patients in other countries.

⁴Category also includes any member of a cluster of patients with severe acute lower respiratory illness (e.g., pneumonia, ARDS) of unknown etiology in which 2019-nCoV is being considered that requires hospitalization. Such persons should be evaluated in consultation with state and local health departments regardless of travel history.

#2. Immediately notify Alexandria Health Department (AHD) for further guidance. The AHD epidemiologist on call can be reached 24/7 at **571.259.8549**.

If the above criteria are not met, please proceed to evaluate and treat for other causes of illness (e.g., influenza, pneumonia or other infectious cause) as clinically indicated.

Investigating Patients Under Investigation (PUI) for Novel Coronavirus (2019-nCoV)

If you identify a PUI, immediately notify infection control for your facility and call Alexandria Health Department (AHD)

The AHD epidemiologist on call can be reached 24/7 at **571.259.8549**.

Infection Control Measures

If you identify a possible PUI in your office:

- Notify your internal facility infection control personnel
- Ask the patient to wear a surgical mask and to keep it on until otherwise directed
- Move the patient to a private room with the door closed, ideally in an airborne infection isolation (negative pressure) room if available
- Use standard, contact and airborne precautions, and eye protection (e.g., goggles or face shield)

Protect patients/office staff moving forward:

- Proactively ask your patients NOT to walk in unannounced if they either had travel from Hubei Province or mainland China or had close contact with a novel coronavirus case (lab-confirmed or PUI) within 14 days preceding onset of symptoms (fever, cough and/or difficulty breathing)
- Advise patients to report recent travel and any exposure to a confirmed case along with symptoms when they call to request an appointment
- Schedule appointments for patients with suspected novel coronavirus infection at the end of the day or when other patients are not present

CDC Lab Testing (in Consult with AHD)

Currently, the U.S. Centers for Disease Control and Prevention (CDC) has the only laboratory that can conduct rapid testing for 2019-nCoV virus through consult with AHD.

- Lower respiratory tract specimen (bronchoalveolar lavage fluid, tracheal aspirate, sputum);
- Upper respiratory tract (nasopharyngeal and oropharyngeal swab, nasopharyngeal wash/aspirate or nasal aspirate)
- Serum
- Other specimens may be requested after consultation with AHD

For More Information

CDC website on 2019-nCoV Outbreak: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>