

Public Health Bulletin – Novel coronavirus COVID-19 special edition

Case numbers of COVID-19 continue to escalate worldwide, now with over 100 countries with confirmed cases. **As at 17 March 2020, the Waikato PHU had received approximately 450 COVID-19 related phone calls, have tested and cleared 20 individuals and a further 51 are suspected cases currently under investigation.**

A number of changes were recently announced by the Ministry of Health, including changes to the case definition, advice on mass gathering, and new border measures. Please keep yourselves up to date at: <https://www.health.govt.nz/our-work/diseases-and-conditions/novel-coronavirus-covid-19>

As at 14 March 2020, a suspected case satisfies both the epidemiological and the clinical criteria for each of the following three scenarios:

	Clinical criteria		Epidemiological criteria
1	Fever ($\geq 38^{\circ}\text{C}$) OR any acute respiratory infection with at least one of the following symptoms: shortness of breath, cough or sore throat with or without fever.	AND	Travel to or from (excluding airport transit) <u>countries or areas of concern</u> within 14 days before onset of illness
	OR		
2	Fever ($\geq 38^{\circ}\text{C}$) OR any acute respiratory illness with at least one of the following symptoms: shortness of breath, cough or sore throat with or without fever	AND	Close contact ¹ or casual contact ⁴ with a suspect, probable or confirmed case of SARS-CoV-2 infection in the 14 days before onset of illness
	OR		
	Healthcare workers ³ with moderate or severe community-acquired pneumonia	AND	Regardless of any international travel

In addition to the suspect case definition above, consider, for surveillance purposes, testing the following patients²

3	Critically ill patients in ICU/HDU with bilateral severe community-acquired pneumonia AND no other cause is identified	AND	No source of exposure has been identified (ie, regardless of travel history)
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Note that due to the ongoing changing global and domestic situation, clinical judgement should apply as to whether someone who doesn't quite meet the current case definition should be tested or not.

1. A 'Close contact' is defined as any person with the following exposure to a confirmed or probable case during the case's infectious period, without appropriate personal protective equipment (PPE):

- direct contact with the body fluids or the laboratory specimens of a case
- presence in the same room in a health care setting when an aerosol-generating procedure is undertaken on a case
- living in the same household or household-like setting (eg, shared section of in a hostel) with a case
- face-to-face contact in any setting within two metres of a case for 15 minutes or more
- having been in a closed environment (e.g. a classroom, hospital waiting room, or conveyance other than aircraft) within 2 metres of a case for 15 minutes or more
- having been seated on an aircraft within two metres of a case (for economy class this would mean 2 seats in any direction including seats across the aisle, other classes would require further assessment)
- aircraft crew exposed to a case (a risk assessment conducted by the airline is required to identify which crew should be managed as close contacts)

2. While at this point this criterion is predominantly for surveillance purposes. Case management, including isolation and PPE, should be based on clinical judgement.

3. For the purpose of testing, healthcare workers are defined as those who may have been exposed to respiratory droplets from patients or residents.

4. Casual contact: Any person with exposure to the case who does not meet the criteria for a close contact.

Please keep updated with the case definition at: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>

For Primary Care:

If you have patients that were previously turned down for a test by Public Health, but who are still unwell and meet the new case definition, then COVID-19 testing should be arranged for them.

Medical Officer of Health approval is **no longer required for COVID-19 testing**. However, it remains **notifiable on suspicion**. If you are testing any patients for suspected COVID-19, please notify the PHU on the same day using the notification form (below). Fax or email the completed form to the PHU. You no longer need to call with notifications. Please note that BPAC is also currently developing a COVID eReferral form, so this process may change.

The expectation is that primary care will inform patients if COVID-19 swabs are negative, and provide advice. The advice to patients who have negative results is:

- They still need to complete the full 14-day isolation period if they have returned from an area of concern, or have had close contact with someone with the virus.
- If they are still sick with the same illness at the end of the 14-day isolation period, they will need to stay in isolation until they have been symptom-free for 24 hours. If they are well, and have been for 24 hours, they can return to normal daily activity.

If their current symptoms get worse and they feel more unwell, they should phone Healthline for advice: 0800 358 5453. They need to let them know they have recently returned from an area of concern or had close contact with a person confirmed as having COVID-19.

The PHU will undertake follow-up and contact tracing of all positive cases.

Other important information for primary care:

COVID-19 tested for using two swabs: 1x nasopharyngeal viral swab (red or green flexible fine shaft). Further information below.

Factsheet from the Ministry of Health about isolation at home of suspected or confirmed COVID-19 cases: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/caring-yourself-and-others-who-have-or-may-have-covid-19-home> (downloadable as PDF)

Current COVID-19 resources: <http://www.waikatodhb.health.nz/for-health-professionals/covid-19-information-for-health-professionals/>

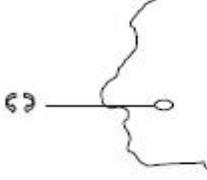
March 2020

COVID-19 TESTING

Specimen requirement:
One Nasopharyngeal swab (Red or Green flexi shaft)

NASOPHARYNGEAL SWABS

- Wear PPE: mask, gloves, eye protection, gown
- Rest back of patient's head against wall or bed.
- Insert swab 4-5 cm into nose in horizontal direction.
- Rotate swab 3 x each way.



Nasopharyngeal Viral Swabs
flexible fine shaft

Red Top



Green Top



OR

- Swabs will routinely be tested for: SARS CoV 2 E-gene PCR
- Double bag COVID-19 specimens
- Label bag "COVID-19"
- Bag separately from other laboratory specimens such as bloods and routine swabs
- Hamilton City practices immediately order Pathlab courier
- Out of Hamilton practices normal courier services apply

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COVID-19 NOTIFICATION FORM

COVID-19 is notifiable on suspicion.

Please complete all information on this page and return it to the Public Health Unit on the same day to:

Fax: 07 838 2382 or Email: NotifiableDiseases@waikatodhb.health.nz

Date:

Name of notifying Dr/nurse Practice: Phone

Usual GP/practice (if different) Phone

Name of Case

DOB Sex M / F / Other NHI Ethnicity

Address

.....

Phone Mobile.....

Occupation

Attends School/Preschool/Tertiary Yes No (if yes, please provide details)

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Epidemiological criteria

Was the case overseas in the past 14 days before symptom onset? Yes No

If yes, where Return date to NZ

Clinical criteria

Symptom onset date

Fever/history of fever? Yes No If yes, temperature°C

Respiratory symptoms: Cough: Yes No Sore throat: Yes No Breathlessness: Yes No

Other symptoms

Hospitalised? Yes No If yes, where

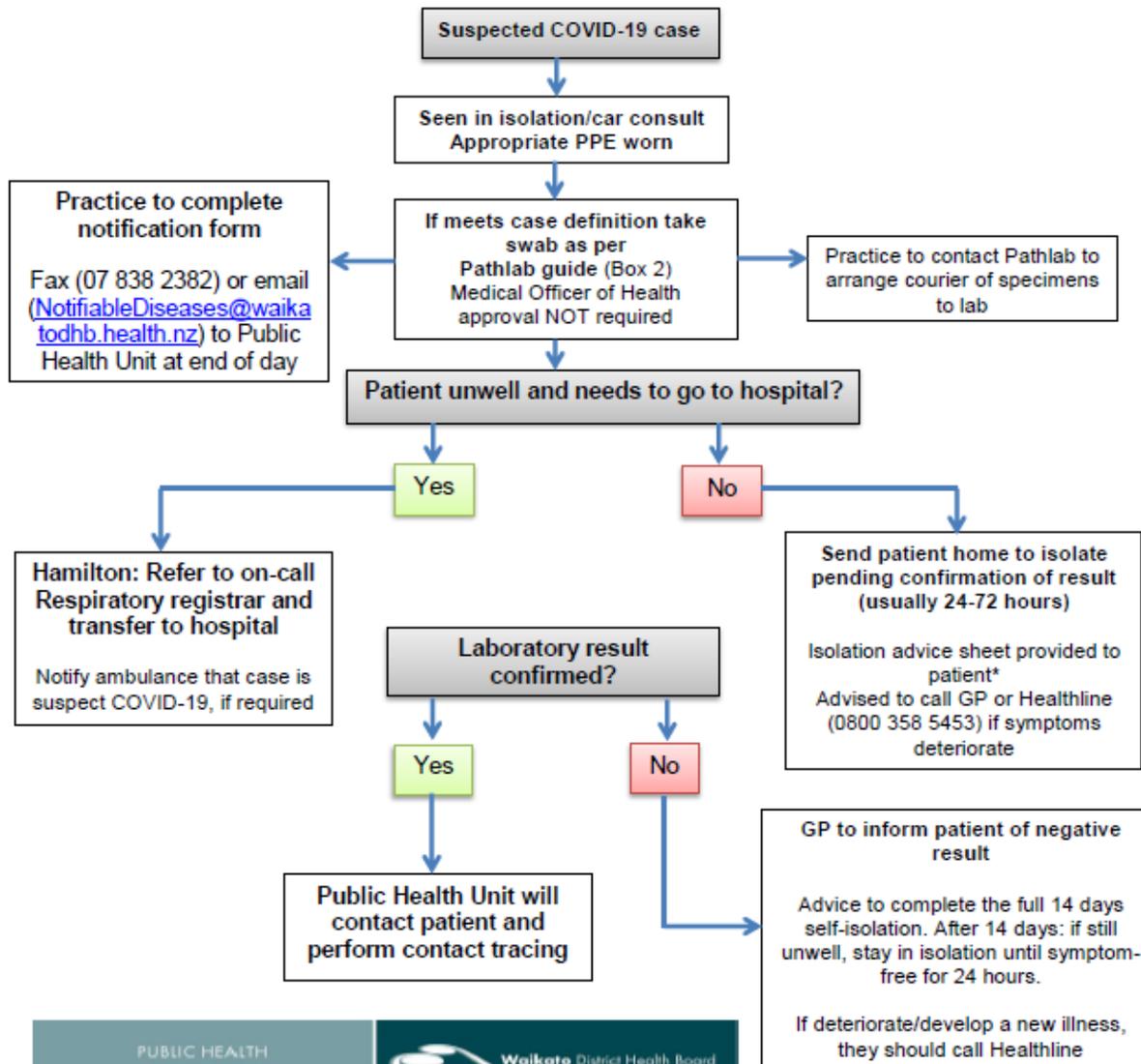
Case Management

Date swabbed for COVID-19

Patient will enter isolation pending result? Yes No

Patient provided with Ministry of Health isolation guide? Yes No

Flowchart for the Management of Suspected COVID-19



Box 1: Case definition <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus>

	Clinical criteria		Epidemiological criteria
1	Fever (≥38°C) AND/OR at least one of: breathlessness, cough or sore throat	AND	Overseas travel within 14 days before onset of illness
	OR		
2	Fever (≥38°C) AND/OR at least one of: breathlessness, cough or sore throat	AND	Close or casual contact with a suspect, probable or confirmed case in the 14 days before onset of illness
	OR		
3	Healthcare workers with moderate or severe community- acquired pneumonia	AND	Regardless of any international travel

Note that due to the ongoing changing global and domestic situation, clinical judgement should apply as to whether someone who doesn't quite meet the current case definition should be tested or not.

Box 2: COVID-19 testing

- 1x nasopharyngeal swab (red or green flexible fine shaft) for COVID-19 testing.
- Double bag specimens and clearly label as "COVID-19 testing" on the outside
- Bag separately from other laboratory specimens

*Isolation of suspected cases differs from the recommended self-isolation of recent travellers (which is technically quarantine)

Advice sheet downloadable from the Ministry of Health: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/caring-yourself-and-others-who-have-or-may-have-covid-19-home>