Update on 2019 Novel Coronavirus (2019-nCoV) in Wuhan, China. CDC Guidance for Evaluating and Reporting

On January 21, 2020, the Centers for Disease Control and Prevention (CDC) announced the first case of novel coronavirus (2019-nCoV) in the United States. The first case is from Snohomish County, Washington.\(^1\) The case recently returned from Wuhan, China.\(^1\)

A number of countries, including the United States, have been actively screening incoming travelers from Wuhan and exported human infections with the novel coronavirus have been confirmed in Thailand, Japan, and The Republic of Korea.\(^2\)

Early on, many of the patients in the outbreak in Wuhan, China reportedly had some link to a large seafood and animal market, suggesting animal-to-person spread. However, a growing number of patients reportedly have not had exposure to animal markets, suggesting limited person-to-person spread is occurring, though it’s unclear how easily or sustainably this virus is spreading between people.\(^2\)

At this time, CDC guidance for evaluating and reporting a person under investigation (PUI) for MERs-CoV remains unchanged. Please see guidance below on screening and reporting suspect cases to Jackson County Public Health. Reporting should occur immediately.

There is much more to learn about how the 2019-nCoV virus spreads, severity of associated illness, and other features of the virus. Investigations are ongoing. While CDC considers this a serious public health concern, based on current information, the immediate health risk from 2019-nCoV to the general American public is considered low at this time.\(^2\) Nevertheless, CDC is taking proactive preparedness precautions.\(^2\)


**Recommendations for Healthcare Providers**\(^3\)

Limited information is available to characterize 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

---

### In This Issue


### Contact Us

**Communicable Disease Reporting at JCPH:**

541-774-8045

After Hours:

541-618-4651

**Jackson County Public Health Website**


---

**Jackson County Health & Human Services**

Jim Shames
Medical Director
541-774-7885
shamesjg@jacksoncounty.org
Healthcare providers should obtain a detailed travel history for patients being evaluated with fever and acute respiratory illness. CDC guidance for evaluating and reporting a PUI for MERS-CoV remains unchanged.³

**Criteria to Guide Evaluation of PUI for 2019-nCoV**

Patients in the United States who meet the following criteria should be evaluated as a PUI in association with the outbreak of 2019-nCoV in Wuhan City, China.

1) Fever AND symptoms of lower respiratory illness (e.g., cough, shortness of breath) and in the last 14 days before symptom onset,
   - History of travel from Wuhan City, China
   - or-
   - Close contact with a person who is under investigation for 2019-nCOV while that person was ill.

2) Fever OR symptoms of lower respiratory illness (e.g., cough, shortness of breath) and in the last 14 days before symptom onset,
   - Close contact² with an ill laboratory-confirmed 2019-nCoV patient.

**Notes**

¹Fever may not be present in some patients, such as those who are very young, elderly, immunosuppressed, or taking certain fever-lowering medications. Clinical judgment should be used to guide testing of patients in such situations.

²Close contact with a person who is under investigation for 2019-nCOV.

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 healthcare 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.


The criteria are intended to serve as guidance for evaluation. Patients should be evaluated and discussed with Jackson County Public Health on a case-by-case basis if their clinical presentation or exposure history is equivocal (e.g., uncertain travel or exposure).

**Recommendations for Reporting, Testing, and Specimen Collection³**

Healthcare providers should immediately notify both infection control personnel at their healthcare facility and their local public health department.

- **Call Jackson County Public Health Communicable Disease** – Clinicians can call and make a report 24 hours a day. During business hours call 541-774-8045, and after-hours call 541-618-4651.
Testing
At this time, diagnostic testing for 2019-nCoV can be conducted only at CDC. Testing for other respiratory pathogens should not delay specimen shipping to CDC. If a PUI tests positive for another respiratory pathogen, after clinical evaluation and consultation with Jackson County Public Health, they may no longer be considered a PUI. This may evolve as more information becomes available on possible 2019 nCoV co-infections.

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. To increase the likelihood of detecting 2019-nCoV infection, CDC recommends collecting and testing multiple clinical specimens from different sites, including all three specimen types—lower respiratory, upper respiratory, and serum specimens. Additional specimen types (e.g., stool, urine) may be collected and stored. Specimens should be collected as soon as possible once a PUI is identified regardless of time of symptom onset. Additional guidance for collection, handling, and testing of clinical specimens is available at https://www.cdc.gov/coronavirus/2019-nCoV/.

Interim Healthcare Infection Prevention and Control Recommendations for Patients Under Investigation for 2019-nCoV
Although the transmission dynamics have yet to be determined, CDC currently recommends a cautious approach to patients under investigation for 2019-nCoV (https://www.cdc.gov/coronavirus/2019-nCoV/clinical-criteria.html). Such should be asked to wear a surgical mask as soon as they are identified 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). Immediately notify your healthcare facility’s infection control personnel and local health department.

Additional Infection Control Practices Resources
- Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings


Data to inform the definition of close contact are limited. Considerations when assessing close contact include the duration of exposure (e.g., longer exposure time likely increases exposure risk) and the clinical symptoms of the person with novel coronavirus (e.g., coughing likely increases exposure risk as does exposure to a severely ill patient). Special consideration should be given to those exposed in healthcare settings.

The mission of Jackson County Health and Human Services is to plan, coordinate and provide public services that protect and promote the health and well-being of county residents.
References.

