MANAGEMENT OF A SUSPECT COVID-19 CASE: BRIEF GUIDELINES FOR UN MEDICAL STAFF

13 February 2020

Please note that this is interim guidance for the rapidly evolving COVID-19 outbreak. Please check for most updated version at COVID-19 website for UN medical staff at https://hr.un.org/page/novel-coronavirus-2019-ncov-information-un-healthcare-workers This document should be used in conjunction with the flowchart on the last page.

1. IMPLEMENT / ENHANCE APPROPRIATE INFECTION PREVENTION AND CONTROL (IPC) MEASURES

- Infection prevention and control (IPC) measures are a critical and integral part of management of all patients including COVID-19 suspect cases and should be initiated at the point of entry of the patient to the health facilities. For more information on WHO IPC recommendations, see https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/infection-prevention-and-control

- **Standard precautions should always be routinely applied in all areas of UN healthcare facilities.**

- Ensure availability of IPC commodities and supplies. For a recommended list of supplies, see https://www.who.int/publications-detail/disease-commodity-package---novel-coronavirus-(ncov)

2. IDENTIFY PATIENTS WHO MAY HAVE RESPIRATORY ILLNESS CAUSED BY COVID-19

- Place visible signage in your duty station or healthcare facility. The signage should request that staff with recent international travel AND either a fever, cough or trouble breathing notify their supervisor or clinic staffs immediately. (e.g. use this DHMOSH PH Infection Control Poster available at: https://hr.un.org/sites/hr.un.org/files/InfectionPoster_0.pdf)

- Place face mask on any patients who present to your clinic with fever or cough.

3. ISOLATE AND EVALUATE ANY PATIENTS THAT REPORT THE FOLLOWING:

**Fever[1] or cough or shortness of breath
AND
Within the last 14 days of illness onset
was in China OR had contact with a person confirmed or suspected to have infection with COVID-19**

- If the patient fits the above description, place a surgical mask on the patient, and place them in an isolation room, or a private room with door closed that has been dedicated for COVID-19.

- Restrict the number of personnel entering the room. All personnel who do enter the isolation room should use the following PPE:

  - Standard precautions (gloves)
  - Contact precautions (gown)
  - Eye protection (goggles or face shield)
  - Droplet or Airborne precautions (e.g. N95 mask or surgical mask)

- Evaluate patient.

- Consider alternative diagnosis as clinically indicated

- Interview the patient to find out about his or her clinical illness and exposures in the 14 days prior to illness onset. The answers should help you determine if the patient meets the below WHO Case Definition or your own local health authorities' case definitions for COVID-19.

- Please note that the latest WHO Case Definitions for COVID-19 are available at https://www.who.int/publications-detail/global-surveillance-for-human-infection-with-novel-coronavirus-(2019-ncov)

WHO CASE DEFINITION - SUSPECT COVID-19 CASE

A. Patient with <u>severe</u> acute respiratory infection (fever, cough, and <u>requiring admission to hospital</u>),
AND with no other etiology that fully explains the clinical presentation
AND a history of travel to or residence in China during the 14 days prior to symptom onset,

OR

B.   Patient with any acute respiratory illness
AND AT LEAST ONE of the following during the 14 days prior to symptom onset:
a) contact with a <u>confirmed or probable</u> case of COVID-19 infection, OR
b) worked in or attended a health care facility where patients with confirmed or probable COVID-19 acute respiratory disease patients were being treated.

WHO CASE DEFINITION - PROBABLE COVID-19 CASE

A suspect case for whom testing for COVID-19 is inconclusive or is tested positive using a pancoronavirus assay and without laboratory evidence of other respiratory pathogens.

WHO DEFINITION - CONFIRMED COVID-19 CASE

A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

4. NOTIFY WHO COUNTRY OFFICE, LOCAL HEALTH AUTHORITIES, YOUR SENIOR MANAGEMENT & DHMOSH PUBLIC HEALTH UNIT

- If the patient fits any of the above case definitions, or fits your local health authorities' case definitions, INFORM your local WHO country office, local health authorities, your senior management at your duty station and DHMOSH Public Health unit (dos-dhmosh-public-health@un.org) that you have a patient with suspect COVID-19 infection and follow next steps.

- Your WHO country office, local health authority and DHMOSH should be able to advise you on next steps, and determine if additional support for management for the suspect COVID-19 case is indicated.

- Create and maintain a list, and follow-up of all healthcare workers who had close contact with the patient.

5. FOLLOW LOCAL HEALTH AUTHORITIES AND WHO GUIDANCE ON SPECIMEN COLLECTION FOR DIAGNOSTIC TESTING

- Follow all technical guidance provided by WHO and local health authority on sample collection, type of collection material, safety protocol and transportation of collected samples. Do not refer patients on to another facility for diagnostic testing without first discussing with your local WHO office or local health authorities.

- Keep DHMOSH Public Health Unit and senior management of your duty station informed at all times.

6. TRANSPORT OF SPECIMENS TO THE LOCAL HEALTH AUTHORITIES' /WHO'S DESIGNATED LABORATORY

- Under advice of WHO or local health authorities, support the transportation of specimens collected to the designated laboratory approved by your local health authority, WHO country office, and/or DHMOSH.

7. CONTINUE MEDICAL EVALUATION AND EMPIRIC TREATMENT FOR OTHER CAUSES OF RESPIRATORY INFECTION AS CLINICALLY INDICATED

- All patients with suspect COVID-19 infection should be tested for common causes of respiratory infection, if available.

- Testing for other respiratory pathogens should not delay specimen collection for COVID-19 testing.

8. BE FAMILIAR WITH WHO GUIDELINES ON CONFIRMED COVID-19 PATIENT MANAGEMENT GUIDANCE

- All healthcare worker should be familiar with current WHO and DHMOSH technical guidance for management of confirmed cases
- Review and be familiar with WHO technical guidance for case management of COVID-19 at https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/patient-management

9. DO NOT DISCHARGE PATIENT BEFORE DISCUSSING MANAGEMENT WITH WHO COUNTRY OFFICE, LOCAL HEALTH AUTHORITY, AND DHMOSH

- Continue patient isolation and infection control procedures as above until the patient has been determined to not have COVID-19 infection or is cleared by WHO and/or local health authorities.

10. FURTHER READING ON COVID-19

- DHMOSH general guidance: https://hr.un.org/page/novel-coronavirus-2019-ncov
- WHO Technical guidance: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance
- WHO Case Definitions for COVID-19 : https://www.who.int/publications-detail/global-surveillance-for-human-infection-with-novel-coronavirus-(2019-ncov)
- WHO Clinical Management of COVID: https://www.who.int/publications-detail/clinical-management-of-severe-acute-respiratory-infection-when-novel-coronavirus-(ncov)-infection-is-suspected
- WHO Laboratory Guidance for COVID-19 : https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/laboratory-guidance
- WHO Infection Prevention and Control for COVID-19: https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/infection-prevention-and-control

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This document was adapted by the Public Health unit of the Division of Healthcare Management and Occupational Safety and Health (DHMOSH), Office of Support Operations, Department of Operational Support (DOS), United Nations from the New York City Department of Health's Management Checklist for Patients Suspected to Have Coronavirus Disease 2019.

For any questions please email **DOS-DHMOSH-PUBLIC-HEALTH@UN.ORG**

United Nations Division of Healthcare Management and Occupational Safety and Health

Initial Clinical Management and Infection Prevention and Control Measures of Patients Suspected to Have COVID-19 Infection

1. IDENTIFY

Does the patient have fever (38°C), cough or shortness of breath?

NO → **YES**

PLACE FACE MASK ON PATIENT

Within 14 days of symptom onset, did patient travel from China or have close contact with a COVID-19 patient?

NO → **YES**

2. ISOLATE

1. Use standard precautions for all patients at all times.
2. Place masked patient in adequately ventilated single room (where possible). All personnel entering room must also follow contact and droplet precautions and use the following personal protective equipment (PPE): gloves, gown, medical/surgical mask and eye protection (goggles or face shields). N95 masks can be used here in place of surgical masks.
3. Airborne precautions should be added for aerosol generating procedures and includes N95 mask and eye protection.

ROUTINE TRIAGE AND MANAGEMENT (INCLUDING STANDARD PRECAUTIONS FOR ALL PATIENTS AT ALL TIMES)

Evaluate for COVID-19 and determine if patient meets WHO Case Definitions for:

Suspect Case

A. Patient with severe acute respiratory infection (fever, cough, and requiring admission to hospital), AND with no other etiology that fully explains the clinical presentation AND a history of travel to or residence in China during the 14 days prior to symptom onset,

OR

B. Patient with any acute respiratory illness AND at least one of the following during the 14 days prior to symptom onset:
   i. Contact with a confirmed or probable case of COVID-19 infection, or
   ii. Worked in or attended a health care facility where patients with confirmed or probable COVID-19 acute respiratory disease patients were being treated.

Probable Case: A suspect case for whom testing for COVID-19 is inconclusive or is tested positive using a pancoronavirus assay and without laboratory evidence of other respiratory pathogens.

Confirmed Case: A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

PATIENT MEETS ONE OF WHO CASE DEFINITIONS

NO ←

YES

3. INFORM

1. Inform WHO Office and local health authorities
2. Inform Division of Healthcare Management and Occupational safety and Health about any suspect/probable/confirmed case of COVID-19 by emailing dos-dhmosh-public-health@un.org.
3. Follow local health authority and WHO guidelines on specimen collection

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