

Guidance for Suspected COVID-19 Cases

Purpose:	To offer guidance to WORKNET clients with employee with suspected COVID-19 cases.													
Definitions:	<p>COVID-19: Respiratory illness caused by a novel (new) coronavirus that was first detected in Wuhan City, Hubei Province, China and which continues to expand.</p> <p>Patient Under Investigation (PUI) - Patients who have been identified as high risk for exposure to COVID-19 based upon The Center for Disease Control (CDC) screening criteria.</p>													
Steps:	<p>*If there is concern that an employee is at high risk, a risk assessment should be done by inquiring about risk factors.</p> <p><u>Individuals should be considered high risk for COVID-19 when the following criteria are met:</u></p> <table border="1"> <thead> <tr> <th>Clinical Features</th><th></th><th>Epidemiologic Risk</th></tr> </thead> <tbody> <tr> <td>Fever¹ or signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath)</td><td>AND</td><td>Any person, including healthcare workers², who has had close contact³ with a laboratory-confirmed⁴ COVID-19 patient within 14 days of symptom onset</td></tr> <tr> <td>Fever¹ 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 areas⁵ (see below) within 14 days of symptom onset</td></tr> <tr> <td>Fever¹ with severe acute lower respiratory illness (e.g., pneumonia, ARDS) requiring hospitalization and without alternative explanatory diagnosis (e.g., influenza)⁶</td><td>AND</td><td>No source of exposure has been identified</td></tr> </tbody> </table>		Clinical Features		Epidemiologic Risk	Fever ¹ or signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath)	AND	Any person, including healthcare workers ² , who has had close contact ³ with a laboratory-confirmed ⁴ COVID-19 patient within 14 days of symptom onset	Fever ¹ and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization	AND	A history of travel from affected geographic areas ⁵ (see below) within 14 days of symptom onset	Fever ¹ with severe acute lower respiratory illness (e.g., pneumonia, ARDS) requiring hospitalization and without alternative explanatory diagnosis (e.g., influenza) ⁶	AND	No source of exposure has been identified
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	<p>If these conditions exist,</p> <ol style="list-style-type: none"> 1. The patient should be instructed to call their primary care physician or Emergency Department to discuss risk and symptoms prior to visiting in person so infection control preparations can be made to avoid spread of the virus. 2. The healthcare facility will also contact their state or local health department if a patient is classified as a PUI for COVID-19. 3. State health departments that have identified a PUI or a laboratory-confirmed case should complete a PUI and Case Report form through the processes identified on CDC's Coronavirus Disease 2019 website. 4. <u>State and local health departments can contact CDC's Emergency Operations Center (EOC) at 770-488-7100 for assistance with obtaining, storing, and shipping appropriate specimens to CDC for testing, including after hours or on weekends or holidays.</u> Currently, diagnostic testing for COVID-19 is being performed at state public health laboratories and CDC. <p><u>CONTACT YOUR LOCAL, COUNTY HEALTH DEPARTMENT GUIDANCE</u></p> <p>State health departments that have identified a PUI should immediately contact <u>CDC's Emergency Operations Center (EOC)</u> at (770)-488-7100.</p>
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Footnotes

¹Fever may be subjective or confirmed

²For healthcare personnel, testing may be considered if there has been exposure to a person with suspected COVID-19 without laboratory confirmation. Because of their often extensive and close contact with vulnerable patients in healthcare settings, even mild signs and symptoms (e.g., sore throat) of COVID-19 should be evaluated among potentially exposed healthcare personnel. Additional information is available in CDC's [Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease 2019 \(COVID-19\)](#).

³Close contact is defined as—

a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case

– or –

b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

If such contact occurs while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection), criteria for PUI consideration are met.

Additional information is available in CDC's updated [Interim Infection Prevention and Control Recommendations for Patients with Confirmed COVID-19 or Persons Under Investigation for COVID-19 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 COVID-19 (e.g., coughing likely increases exposure risk as does exposure to a severely ill patient). Special consideration should be given to healthcare personnel exposed in healthcare settings as described in CDC's [Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with COVID-19](#).

⁴Documentation of laboratory-confirmation of COVID-19 may not be possible for travelers or persons caring for COVID-19 patients in other countries.

⁵Affected areas are defined as geographic regions where sustained community transmission has been identified. Relevant affected areas will be defined as a country with at least a CDC Level 2 Travel Health Notice. See all [COVID-19 Travel Health Notices](#).

⁶Category 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