



# Indiana State Department of Health

## Indiana Health Alert Network Notification – February 26, 2020

### Updated Guidance on Outbreak of 2019 Novel Coronavirus (COVID-19)

The Indiana State Department of Health (ISDH) continues to monitor and respond to the novel coronavirus (COVID-19) outbreak. This health alert provides a situational update and current guidance related to COVID-19.

#### Situational Updates

According to the World Health Organization's COVID-19 [situation report](#) as of February 26, 2020, there have been more than 80,000 cases of COVID-19 worldwide with more than 2,600 deaths. Although the vast majority of cases have been reported in mainland China, cases have been reported in 30 other countries. As of February 26, 2020, the Centers for Disease Control and Prevention (CDC) reported 14 cases of COVID-19 in the United States, with an additional 39 cases among repatriated travelers from Wuhan and the *Diamond Princess* cruise ship. Indiana continues to monitor several medium-risk travelers who have returned to Indiana from China. No confirmed cases have been identified in Indiana to date.

**Although the immediate health risk to the general American public is low, the CDC is moving from containment strategies to mitigation and is operationalizing pandemic and response plans including specific measures to prepare communities to respond to local transmission of COVID-19. Influenza pandemic guidance is being adapted for the possibility of a COVID-19 pandemic. Healthcare providers, hospitals, local health departments, and EMS are urged to review pandemic influenza plans to assess local readiness, identify gaps, assess personal protective equipment inventories, staffing plans, and surge capacity. CDC has recently updated several guidance documents (see links below) for healthcare providers, public health departments, laboratories travelers, businesses and schools.**

#### Travel

Due to evidence of increased community spread in some countries outside of China, the CDC published the following [travel notices as of February 26](#):

- Warning Level 3 (avoid nonessential travel): mainland China (not including Hong Kong, Macau, and Taiwan) and South Korea
- Alert Level 2 (special precautions for high-risk travelers): Iran, Italy, and Japan
- Watch Level 1 (usual precautions): Hong Kong

The CDC has **not** issued changes to current protocols for screening and monitoring of travelers returning to the United States. Travelers returning from China are screened at one of 11 airports in the United States where the CDC has quarantine stations. Those with symptoms are referred for medical evaluation. Asymptomatic persons with travel to Hubei Province, China, within the past 14 days are subject to mandatory quarantine at sites near the airports where they are screened. Asymptomatic



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persons with travel to other parts of mainland China (not including Hong Kong, Macau and Taiwan) within the past 14 days are allowed to reach their final destinations where they are instructed to self-quarantine and are monitored by the local health departments. **No additional monitoring or quarantine is recommended for returning travelers who were not in mainland China within the past 14 days.**

## Evaluating Patients for COVID-19

Clinicians should collect detailed travel histories from all patients presenting with fever and acute respiratory symptoms. Although this is a rapidly changing situation, at this time the CDC has **not** changed the [criteria](#) for evaluating persons suspected of having COVID-19, although updated guidance is expected shortly.

Public health officials and healthcare providers should consider a novel coronavirus infection as a potential etiology among patients who meet the clinical features and epidemiological risk criteria outlined below:

Clinical Features	&	Epidemiologic Risk
Fever <b>or</b> signs/symptoms of lower respiratory illness (e.g., cough or shortness of breath)	<b>AND</b>	Any person, including health care workers, who has had close contact with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset
Fever <b>and</b> signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)	<b>AND</b>	A history of travel from <b>Hubei Province</b> , China within 14 days of symptom onset
Fever <b>and</b> signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization	<b>AND</b>	A history of travel from mainland <b>China</b> within 14 days of symptom onset

For severely ill individuals, testing can be considered when exposure history is equivocal (e.g., uncertain travel or exposure, or no known exposure) and another etiology has not been identified. Decisions regarding whether to test for COVID-19 should be made in consultation with public health officials.

**If COVID-19 is suspected in a patient (as noted above), healthcare providers should immediately notify their local public health department AND ISDH at (317) 233-7125 during normal business hours (M-F, 8:15 a.m. - 4:45 p.m.) for consultation and testing authorization. For assistance after hours or on the weekends, contact (317) 233-1325 to reach the epidemiologist on call.**

## Infection Control

Patients suspected of having COVID-19 should be immediately placed in an airborne infection isolation room (AIIR), if available. Healthcare providers should implement standard, contact, and airborne



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precautions (N95 respirator or PAPR), including eye protection (goggles or face shield) when caring for patients suspected of having COVID-19. CDC has produced more than 23 guidance documents on infection control, hospital preparedness assessments, personal protective equipment (PPE) supply planning, and clinical evaluation and management.

## Laboratory Testing

If testing for COVID-19 is authorized by the ISDH, at least one of **each** of the following types of specimens should be collected:

- I. Lower respiratory tract (bronchoalveolar lavage, tracheal aspirate, or sputum)
- II. Upper respiratory tract (nasopharyngeal (NP) swab AND oropharyngeal swab (OP), nasopharyngeal wash/aspirate, or nasal aspirate)

Specimen collection and submission instructions and forms can be found under the “Information for Laboratories” section on the ISDH 2019 novel coronavirus (COVID-19) [webpage](#).

## Additional Resources

The CDC has released additional detailed several guidance documents on COVID-19 including:

- General Information: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- Healthcare Professionals: <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html>
- Health Departments: <https://www.cdc.gov/coronavirus/2019-ncov/php/index.html>
- Laboratories: <https://www.cdc.gov/coronavirus/2019-nCoV/lab/index.html>
- Businesses: [https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/guidance-business-response.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fguidance-business-response.html](https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/guidance-business-response.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fguidance-business-response.html)
- Pregnant women and children: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/pregnant-women.html>
- Travelers: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>

Please visit the ISDH COVID-19 [webpage](#) for updated news and guidance on the COVID-19 outbreak. This webpage will be updated as new information becomes available. For additional information regarding COVID-19, please contact the ISDH Epidemiology Resource Center at 317-233-7125 or e-mail [epiresource@isdh.in.gov](mailto:epiresource@isdh.in.gov).