2019 Novel Coronavirus (nCoV)

Facts about Coronavirus:

• Coronaviruses (CoV) are a large family of viruses that cause illness ranging from the common cold to more severe diseases. A novel coronavirus (nCoV) is a new strain that has not been previously identified in humans.

• The new coronavirus (2019-nCoV) has emerged in the Wuhan City, China. This virus is not to be confused with the common coronaviruses that are included in the respiratory panel test.

TRIAGE: Upon suspicion, patient 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 isolation room if available.

• Healthcare personnel entering the room should use standard precautions, contact precautions (i.e., gown), airborne precautions, and use eye protection (e.g., goggles or a face shield).

• Clean hands with soap and water or alcohol-based hand rubs after contact with patient.

• Immediately contact assigned Infection Control Practitioner for patients under investigation and they will contact the local health department for approval of testing if patient meets criteria.

   Lis Estevez (305)215-3296 (South Region)   Liz Balda (305) 588-5145 (North Region)

• It is Important to document in Cerner the following information:

<table>
<thead>
<tr>
<th>o Isolation precautions implemented</th>
<th>o Date of onset</th>
</tr>
</thead>
<tbody>
<tr>
<td>o Exact travel dates and time spent in Wuhan City, China. Date of arrival in US.</td>
<td>o Signs and symptoms</td>
</tr>
<tr>
<td>o Any close contact with person under investigation/laboratory confirmed case</td>
<td>o Healthcare worker or being in healthcare facility in Wuhan City, China</td>
</tr>
</tbody>
</table>

Criteria to Guide Evaluation of Patients Under Investigation (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. (As of January 31, 2020).

<table>
<thead>
<tr>
<th>Clinical Features</th>
<th>&amp; Epidemiologic Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fever * or signs/symptoms of lower respiratory illness (e.g., cough or shortness of breath)</td>
<td>AND Any person, including healthcare workers, who has had close contact* with a laboratory-confirmed 2019-nCoV patient within 14 days of symptom onset</td>
</tr>
<tr>
<td>Fever * and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)</td>
<td>AND A history of travel from Hubei Province, China within 14 days of symptom onset</td>
</tr>
<tr>
<td>Fever * and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization#</td>
<td>AND A history of travel from mainland China within 14 days of symptom onset</td>
</tr>
</tbody>
</table>

The criteria are intended to serve as guidance for evaluation. Patients should be evaluated and discussed with public health departments on a case-by-case basis if their clinical presentation or exposure history is equivocal (e.g., uncertain travel or exposure).
**Specimen Collection:**

Presently, only CDC is able to test for the 2019-nCoV; they have a PCR test. To send out for this test, it has to be approved by our Infection Control and Prevention Dept.

**Please maintain proper infection control practices when collecting specimens.**

1) **Nasopharyngeal swab AND oropharyngeal swab (NP/OP swab)**
   - Use only synthetic fiber swabs with plastic shafts. Do not use calcium alginate swabs or swabs with wooden shafts, as they may contain substances that inactivate some viruses and inhibit PCR testing.
   - Place **swabs immediately** into sterile tubes containing 2-3 ml of viral transport media (VTM or M4). NP and OP specimens should be kept in separate vials. Refrigerate specimen at 2-8°C and ship overnight to CDC on ice pack.

   **Collection tips:** Nasopharyngeal swab: Insert a swab into the nostril parallel to the palate. Leave the swab in place for a few seconds to absorb secretions. Swab both nasopharyngeal areas with the same swab.
   Oropharyngeal swab (e.g., **throat swab**): Swab the posterior pharynx, avoiding the tongue.

2) **Serum:**
   - **Children and adults:** Collect 1 tube (5-10 mL) of whole blood in a serum separator tube (gold top). Serum separator tubes should be stored upright for at least 30 minutes, and then centrifuged at 1000–1300 relative centrifugal force (RCF) for 10 minutes. Refrigerate the serum specimen at 2-8°C.

3) **Urine :**
   - If possible, additional specimen should be collected and should be stored initially until CDC makes decision whether additional specimen sources should be tested.

**Shipping:**

Specimens must be packaged, shipped, and transported according to shipping of Category B Infectious Substances -UN3373.

**Additional Consideration:**

Fever 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.
- Close contact with a person who is under investigation for 2019-nCoV is defined as:
  - 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 –
  - Having direct contact with infectious secretions of a novel coronavirus case (e.g., being coughed on) while not wearing recommended personal protective equipment.

**Disinfection:** Chlorox/bleach should be use to disinfect the equipment and environment.

**References:**

- [https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html](https://www.cdc.gov/infectioncontrol/guidelines/isolation/index.html)