2019 Novel Coronavirus Update

Kentucky Department for Public Health
Public Health Nursing Webinar
February 20, 2020
International Update

- Majority of cases have occurred in China
  - 75,204 cases reported worldwide
  - 74,280 cases in China (98.8% of all cases)
  - 2,009 deaths (2.7% mortality rate)
  - 2,006 deaths in China (99.9% of all deaths)
  - Only 924 cases identified in 25 countries outside of China
  - 3 deaths outside of China
National Update

• Presidential Proclamation – January 31
  • Restricted travel from China for non-U.S. Citizens
  • Funnels all travelers from China through 11 airports (none in Kentucky)
  • Quarantine and Isolation processes - All passengers who were in China in last 14 days are screened
    • Symptomatic – Isolated and assessed
    • Asymptomatic
      • Quarantined if from Hubei Province
      • Sent on to home state if not from Hubei
National Numbers

• Only 15 cases identified in the U.S.
  • All had travel to China except 3 close contacts of confirmed cases

• 14 additional U.S. citizens being repatriated from the Diamond Princess have been confirmed as cases and isolated until cleared of infection

• 1 U.S. citizen died of COVID-19 in Wuhan, China
Kentucky Updates

- We have had 115 people (so far) with possible exposures come to Kentucky (more are added every day)
  - Actively monitoring: 24
  - Finished monitoring: 63
  - Trying to contact: 4
  - Didn’t meet monitoring criteria: 15
  - Lost to follow-up: 7
- Transferred to another state: 2
PUI versus Monitoring

- PUI (Person under Investigation):
  - Specific criteria must be met, including symptoms and risk factors. *These are the only people that would be recommended for testing for COVID-19.*

- Monitoring:
  - People coming into Kentucky who are not sick but have traveled to China in the last 14 days, or who have been exposed to someone who is confirmed to have COVID-19 in the last 14 days will be “monitored” until they pass the 14-day period from their last possible exposure.
## Patient Under Investigation (PUI)

<table>
<thead>
<tr>
<th>Clinical Features</th>
<th>&amp;</th>
<th>Epidemiologic Risk</th>
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<tbody>
<tr>
<td>Fever(^1) or signs/symptoms of lower respiratory illness (e.g., cough or shortness of breath)</td>
<td>AND</td>
<td>Any person, including health care workers, who has had close contact(^2) with a laboratory-confirmed(^2,4) 2019-nCoV patient within 14 days of symptom onset</td>
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<tr>
<td>Fever(^1) and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)</td>
<td>AND</td>
<td>A history of travel from Hubei Province, China(^5) within 14 days of symptom onset</td>
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<tr>
<td>Fever(^4) and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization(^4)</td>
<td>AND</td>
<td>A history of travel from mainland China(^5) within 14 days of symptom onset</td>
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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).
Process to **Identify and Assess 2019 Novel Coronavirus**

- Patient MUST have both
  - Exposure history
  - Appropriate symptoms
    - Fever or lower respiratory illness
- If travel only, must have both fever and lower respiratory illness
  - Hubei → PUI
  - China Only → PUI if requiring hospitalization
- If contact with confirmed case, either symptom → PUI
Monitoring Process

• Monitoring process - All people we know about who might have been exposed to COVID-19 in the last 14 days
  • DGMQ Reports
  • Healthcare provider calls
  • Self-report
  • Other states and other sources
• DPH contacts each person and collects travel and health history information
  • Temperature checks and signs/symptoms for 14 days
• DPH determines risk level for COVID-2019 exposure, monitoring requirements, and movement restrictions
• Requests that exposed people limit contact with others by
  • Social distancing while around others
  • Staying at home
  • Avoiding public gatherings like school or church
  • Not taking public transportation
Local Health Department Role

• The DPH COVID-19 Response Team will notify the LHD of every returning traveler
• After the DPH COVID-19 Response Team interviews a returning traveler, we ask that the LHD provide the voluntary quarantine letter and form to the traveler and return a signed copy of the form to DPH
• In the event that the DPH COVID-19 Response Team cannot contact a traveler, we refer the traveler to the LHD
  • Home visit if necessary
When to Contact KDPH

• Contact the DPH COVID-19 Response Team at 502-564-3261 during business hours or at 888-9-REPORT (888-973-7678) evenings and weekends to discuss anyone who might fall into either of these categories. This includes anyone who:
  • Traveled to mainland China in the past 14 days
  • Was directly exposed to someone who is confirmed with COVID-19 in the past 14 days
  • Developed fever or respiratory symptoms within 14 days of traveling from China or being with someone with COVID-19

• Some local health departments are alerted to travelers from China directly by the traveler or by a local healthcare provider who is seeing the person as a patient. Please contact our team about these people also so that we can track them along with the other travelers being monitored.
  • This includes healthcare workers or others who have been exposed to a confirmed case of COVID-19.
Media Attention

• Media can be directed to Cabinet for Health and Family Services Communications Office
  • 502-564-6786 – Office of Public Affairs Voicemail
  • Barbara Fox
  • Beth Fisher
  • Anya Weber

• DPH Chief of Staff – Kelly Alexander – 502-564-3970

• Please coordinate coverage of any local case or investigation with DPH and the Cabinet
Thank you!

2019-nCoV Contact Information
Kentucky Department for Public Health

Division of Epidemiology and Health Planning: 502-564-3261 (After hours: 888-973-7678)
Primary 2019-nCoV Leads: Stacy Davidson or Dimple Patel
Secure Fax: 502-696-3803

Division of Laboratory Services: 502-564-4446
Primary 2019-nCoV Leads: Rachel Zinner or Teresa Fields

CHFS Communications Office: 502-564-6786
Primary 2019-nCoV Leads: Barbara Fox, Beth Fisher or Anya Weber