

PUBLIC HEALTH ALERT

January 31, 2020

SHAN 20-004 Contact: 707-784-8001 or 707-784-8005 (after-hours), Solano Epi@Solano County.com

To: Solano County Healthcare Providers From: Solano County Public Health

Notice of Updated CDC 2019-nCoV PUI Definition and Solano County Partners Call

Solano County Public Health is working closely with the California Department of Public Health (CDPH), the Centers for Disease Control and Prevention (CDC) and other Bay Area health departments to monitor 2019-nCoV.

To date, there are no confirmed cases of 2019-nCoV reported in Solano County. As of January 31, seven cases of 2019-nCoV have been confirmed in the United States. Today, January 31, 2020, Santa Clara County just confirmed the first case of 2019-nCoV in the Bay Area. The person had travel history to Wuhan, China. On January 30, 2020, the CDC confirmed that 2019-nCoV spread between two people in Illinois, representing the first instance of person-to-person spread in the U.S.

As of today, Friday, January 31, 2020, the CDC has updated the case definition for a Person Under Investigation (PUI) for 2019-nCoV (see below). Starting today, and until further notice, **Solano Public Health will be using the new CDC PUI definition as our new definition for a suspect coronavirus case**.

We will be holding **weekly calls** with our healthcare partners, until further notice. If you have time and are able, you can join us here at Solano Public Health for the call; we would love to see you in person! Just let us know. We are located at 275 Beck Ave, Fairfield.

When: Wednesdays Time: 12:30-1:30pm Call-in number: 415-655-0001 Access code: 198 665 656

The infection control guidance remains the same and the full CDC infection prevention and control recommendation, visit the CDC website at https://www.cdc.gov/coronavirus/2019-nCoV/hcp/infection-control.html. Please note that the CDC guidance differs from the CDPH guidance on PPE for aerosol-generating procedures. The Cal/OSHA guidance should be followed and information on appropriate PPE is included in the CDPH All Facilities Letter and can be accessed at https://www.cdph.ca.gov/Programs/CHCQ/LCP/CDPH%20Document%20Library/AFL-20-09.pdf.

Guidelines for specimen collection also remains the same and the full CDC guideline can be accessed at https://www.cdc.gov/coronavirus/2019-nCoV/lab/guidelines-clinical-specimens.html.

Centers for Disease Control and Prevention Criteria of a

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Person Under Investigation for 2019-nCoV (as of January 31, 2020)

Clinical Features	&	Epidemiologic Risk
Fever ¹ or signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath)	AND	Any person, including health care workers, who has had close contact2 with a laboratory-confirmed ^{3,4} 2019-nCoV patient within 14 days of symptom onset
Fever ¹ and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)	AND	A history of travel from Hubei Province, China 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 ⁴	AND	A history of travel from mainland China within 14 days of symptom onset

1Fever may be subjective or confirmed

2Close contact is defined as—

- a) being within approximately 6 feet (2 meters), or within the room or care area, of a 2019-nCoV 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 health care waiting area or room with a 2019-nCoV case - or -
- b) having direct contact with infectious secretions of a 2019-nCoV case (e.g., being coughed on) while not wearing recommended personal protective equipment.

See CDC's updated Interim Healthcare Infection Prevention and Control Recommendations for Patients Under Investigation for 2019 Novel Coronavirus.

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 2019-nCoV (e.g., coughing likely increases exposure risk as does exposure to a severely ill patient). Special consideration should be given to those exposed in health care settings.

3Documentation of laboratory-confirmation of 2019-nCoV may not be possible for travelers or persons caring for patients in other countries.

4Category also includes any member of a cluster of patients with severe acute lower respiratory illness (e.g., pneumonia, ARDS) of unknown etiology in which 2019-nCoV is being considered that requires hospitalization. Such persons should be evaluated in consultation with state and local health departments regardless of travel history.

For additional information on the 2019-nCoV, visit the CDC website at https://www.cdc.gov/coronavirus/2019-ncov/index.html or the CDPH website at https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/nCOV2019.aspx. To view the latest CDC Health Alerts and to sign up to receive them, visit http://emergency.cdc.gov/han.



PUBLIC HEALTH DIVISION