

## Summary and Action Items

- New [Patients Under Investigation Guidance](#) was issued by CDC late yesterday.
- The number of new infections of SARS-CoV-2, as well as the number of countries with confirmed cases of the disease it causes, COVID-19, continues to rise.
- Widespread or sustained transmission has been identified in China, Japan, South Korea, Iran, and Italy with some evidence of community transmission in several other countries.
- Clinicians should ask all individuals with Influenza like Illness (ILI) about any travel in the 14 days prior to symptom onset, and potential contacts to a confirmed case.
- Any individual with suspected infection with SARS-CoV-2 should be immediately isolated, and clinicians should call both their infection control team and local health department.

## Background

A rapidly escalating and evolving global outbreak of COVID-19, caused by the virus SARS-CoV-2, is occurring. As of 2/28/2020, there are now over 82,294 confirmed global cases across 47 countries, including 15 lab confirmed cases in the US. In Illinois, there has been one travel-associated case, and one case among a close contact. The CDC frequently updates their [travel notices](#) related to COVID-19. An updated CDC guide for evaluating PUIs was posted late yesterday and is summarized below.

## Person's Under Investigation (PUIs)

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) requiring hospitalization <sup>1</sup>	<b>AND</b>	A history of travel from affected geographic areas within 14 days of symptom onset (Currently China, South Korea, Iran, Italy, and Japan)
Fever with severe acute lower respiratory illness (e.g., pneumonia, ARDS) requiring hospitalization and without alternative explanatory diagnosis (e.g., influenza) <sup>2</sup>	<b>AND</b>	No source of exposure has been identified

<sup>1</sup>For patients with lower respiratory symptoms, with or without fever (regardless of hospitalization status), **AND** confirmed travel to an affected geographic area (Level 2 or 3) within 14 days of symptom onset, testing for COVID-19 can be considered with authorization by the local health department.

<sup>2</sup>Perform routine evaluation, including testing for common causes of community acquired pneumonia (by performing influenza testing, rapid viral respiratory panel and lower respiratory culture)

## Evaluation of suspect PUI's

Healthcare providers should **immediately** isolate the suspect PUI per previous guidance and notify both infection control personnel at their healthcare facility and their local health department (or state health department if the local health department cannot be reached) in the event of a suspect PUI. Further guidance about testing can be found on the IDPH [website](#).

## Public Health Management of Travelers

IDPH is anticipating CDC will provide updated guidance on risk assessment and movement restrictions for returning travelers from countries experiencing sustained community transmission of COVID-19. Until that is available, IDPH is recommending "Medium" risk classification for returning travelers from Travel Alert Level 3 countries (currently China, Iran, South Korea, and Italy) with movement restrictions in accordance with [CDC's Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential Coronavirus Disease 2019 \(COVID-19\) Exposure in Travel-associated or Community Settings](#).

At this time, screening at US airports continues to be limited to travelers from mainland China. Pending further guidance from CDC, Local Health Departments should assess risk, limit movement and monitor symptoms for those that are brought to your attention. Please also enter these individuals in REDCap.

## Contact

For other testing questions, additional information or other questions, please contact your local health department. If they are not available, please contact the IDPH Communicable Disease Section at 217-782-2016. For information after hours, please contact your local health department. If they cannot be reached, use the IDPH after hours number 800-782-7860. Local health departments should contact IDPH for consultations on PUIs.

## Additional Resources

IDPH website: <http://www.dph.illinois.gov/topics-services/diseases-and-conditions/diseases-a-z-list/coronavirus>

CDC Resources:

- [Interim Infection Prevention and Control Recommendations for Patients with Confirmed COVID-19 or Persons Under Investigation for COVID-19 in Healthcare Settings](#)
- [Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings](#)
- [CDC Health Alert Network Update and Interim Guidance on Outbreak of 2019 Novel Coronavirus \(2019-nCoV\)](#)

Local health departments should consult the [IDPH WebPortal COVID-19](#) portal page for up-to-date instructions and resources for this response.

## Target Audience

Local Health Departments, Infectious Disease Physicians, Hospital Emergency Departments, Infection Preventionists, Health Care Providers, Long Term Care Facilities and Laboratories

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