

2019 Novel Coronavirus (2019-nCoV)

Update for Clinicians and NSW Emergency Departments

Please distribute this information to all relevant clinical staff



Health

1. The objective of the 2019-nCoV response in NSW is to detect all infected people and prevent transmission of the virus to others
2. There are reports of 2019-nCoV infection in people with no history of fever and who were afebrile at presentation
3. Test for 2019-nCoV in patients with respiratory symptoms -- regardless of fever -- who have travelled to Hubei Province in the 14 days before illness onset
4. Consider testing patients with respiratory disease requiring admission OR evidence of pneumonia where symptom onset within 14 days of return from mainland China
5. Report any suspected cases immediately to your local Public Health Unit (1300 066 055)

Situation update:

- The majority of 2019-nCoV cases have been detected in mainland China, mainly in Hubei Province. Small numbers of cases have also been confirmed in several countries, and four in NSW.
- Infection can cause severe acute respiratory illness, but there is a spectrum of disease. Some confirmed cases have no history of fever and no fever at presentation, but there is no information about how commonly this occurs.
- The current strategy in NSW is to broaden the testing criteria to include people who have been in Hubei Province with mild symptoms.
- While the large majority of patients are likely to be infectious after onset of illness, there is preliminary evidence of a very small number of people being infectious before their symptoms developed. There is no information about how commonly this occurs. Therefore, contacts of confirmed cases and people who have travelled to Hubei Province must isolate themselves at home for 14 days following last possible exposure.

Identify possible cases of 2019-nCoV:

1. Test patients who present with:
 - a history of travel in Hubei Province in the 14 days before illness onset, **OR** close contact with a confirmed case of 2019-nCoV, **AND**
 - acute respiratory infection (with at least one of the following symptoms: shortness of breath, cough or sore throat) regardless of fever
2. Test patients who present with:
 - a history of travel in mainland China in the 14 days before illness onset, **AND**
 - respiratory disease requiring hospital admission or evidence of pneumonia.

Isolate and apply infection control precautions:

- Isolate suspect cases in a single room with negative pressure air-handling (if available).
- Use standard and transmission-based precautions (contact and airborne), including the use of a P2 mask, disposable gown, gloves and eye protection when entering a patient care area.
- Patients who clinically do not require admission who are tested can go home with advice to isolate wear a face mask and isolate themselves at home while awaiting test results. Where the home environment may not be suitable for this, discuss the situation with your local Public Health Unit.

Inform the Public Health Unit to arrange for a rapid risk assessment:

- 2019-nCoV is a notifiable disease under the NSW *Public Health Act 2010*; report all suspect cases immediately to your local Public Health Unit (**1300 066 055**).
- **Arrange testing:** Take combined nose and throat viral swabs or nasopharyngeal viral swabs; a lower respiratory tract sample (if obtainable) - sputum or an endotracheal tube aspirate; and EDTA blood and serum.
- Test for alternative causes, including respiratory viruses using multiplex PCR. Do not wait for local results before sending the 2019-nCoV sample for testing. Even if local testing returns a positive result 2019-nCoV testing should still be attended.
- The Public Health Unit will assist with arrangements for 2019-nCoV testing at a specialist facility; currently testing is available at ICPMR, Westmead and NSW Health Pathology Randwick.
- Seek specialist infectious disease advice on patient treatment.

Further information: <https://www.health.nsw.gov.au/Infectious/diseases/Pages/coronavirus.aspx>

A handwritten signature in black ink, appearing to read 'C. Selvey'.

Dr Christine Selvey

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