

# An Update for Healthcare Providers on the Novel Coronavirus February 3, 2020

Co-hosted by the New York State Department of Health and the New York City Department of Health and Mental Hygiene

#### An Update for Healthcare Providers on the Novel Coronavirus (2019-nCoV)

The New York State Department of Health and New York City
Department of Health & Mental Hygiene will present updates on the
outbreak, review new guidance from the Centers for Disease Control
& Prevention, and discuss infection control considerations.

Date: Monday, 2/3/20 Time: 4 PM- 5 PM

Register for WebEx

For audio, please call 844-512-2950



Speakers:

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Deputy Commissioner, Division of Disease Control New York City Department of Health & Mental Hygiene

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# AN UPDATE ON THE NOVEL CORONAVIRUS (2019-NCOV)

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New York City Department of Health & Mental Hygiene
(DOHMH)



#### Disclaimer

 The situation is rapidly evolving, as is our understanding of this new virus (called 2019novel Coronavirus or 2019-nCoV)

All of the information presented is based on our best knowledge as of this week



#### If a Person Under Investigation (PUI) is Identified

#### In New York City:

#### Notify the NYC DOHMH provider access line



1-866-NYC-DOH1 or 1-866-692-3641

works 24 hours/day x 7 days/week

# In New York State: Notify your County Health Department

Use link to find your County's phone number:

https://www.health.ny.gov/contact/contact\_information/



#### Person Under Investigation (PUI)

Clinical Features	&	Epidemiologic Risk
Fever <sup>1</sup> <b>or</b> signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath)	AND	Any person, including health care workers, who has had close contact <sup>2</sup> with a laboratory-confirmed <sup>3,4</sup> 2019-nCoV patient within 14 days of symptom onset
Fever <sup>1</sup> <b>and</b> signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)	AND	A history of travel from <b>Hubei Province</b> , China within 14 days of symptom onset
Fever <sup>1</sup> <b>and</b> signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization <sup>4</sup>	AND	A history of travel from mainland <b>China</b> within 14 days of symptom onset



#### Anticipated 2019-nCoV Quarantine Guidance

- Individuals who have been in <u>Hubei Province</u>, <u>China</u> are to have a <u>mandatory</u>
   <u>quarantine</u> for 14 days after leaving China
- Individuals who have been elsewhere in <u>Mainland China</u> are to <u>self-monitor</u> for fever and illness with <u>voluntary home quarantine</u> for 14 days after leaving China.
- Risk-based guidance on recommendations for movement and public activity are forthcoming from CDC



#### Resources for additional information

#### NYC DOHMH:

https://www1.nyc.gov/site/doh/providers/health-topics/novel-respiratory-viruses.page

#### Subscribe to the NYC DOHMH Health Alert Network:

https://www1.nyc.gov/site/doh/providers/resources/health-alert-network.page

#### **NY State DOH:**

https://www.health.ny.gov/diseases/communicable/coronavirus/

#### CDC:

https://www.cdc.gov/coronavirus/2019-ncov/index.html





## **2019 Novel Coronavirus**

Dan Kuhles, MD, MPH
Director, Bureau of Communicable Disease Control
New York State Department of Health

# Providers And Facilities Caring For Individuals Who Reside Outside Of NYC

- Patients who meet criteria as a <u>Patient Under</u> <u>Investigation</u> should:
  - Follow CDC's recommended <u>infection prevention and control guidelines</u>.
  - Immediately notify your infection preventionist.
  - Immediately report to the LHD where the patient resides.
    - Providers who are unable to reach the LHD can contact the NYSDOH Bureau of Communicable Disease Control at 518-473-4439 during business hours or the NYSDOH Public Health Duty Officer at 1-866-881-2809 evenings, weekends, and holidays.

#### **PUI Reporting And Testing: New York State**

- Patients will be evaluated and discussed with LHD and/or NYSDOH staff on a case-by-case basis.
- Testing decisions may be further informed by the clinical presentation or exposure history (e.g., uncertain travel or exposure), and the presence of an alternative diagnosis that explains their clinical presentation.
- Criteria are subject to change as additional information becomes available.



#### **PUI Reporting And Testing: New York State**

- Notification is required under the New York State Sanitary Code (10NYCRR 2.10).
  - 2019-nCoV added via Commissioner's Emergency Designation.
- LHD/NYSDOH will assist providers in determining and accessing laboratory testing for respiratory pathogens and if indicated, 2019nCoV.
- Specimen collection and shipping instructions will also be provided.
  - 2019 nCoV RT-PCR anticipated to be available at the Wadsworth Center soon.
  - CDC will not accept specimens directly shipped from a healthcare facility or provider. All specimens approved for testing at CDC must be shipped through the Wadsworth Center.



#### 2019 nCoV: Evolving Knowledge Base

- Case Fatality Rate (CFR) Estimate: 11%
  - Jan 24 Lancet
- R-nought (R0) estimate: 2.2
  - Jan 29 <u>NEJM</u>
- Asymptomatic Transmission
  - Jan 30 NEJM letter
- Plans for remdesivir trial in China
  - Jan 31 <u>Gilead Press Release</u>
- CDC nCoV <u>Publications Page</u>



#### **Movement and Monitoring Restrictions**

- On 1/31, HHS Secretary Azar declared a public health emergency in the U.S.
- Additionally, the President has signed a Presidential Proclamation, using authority pursuant to Section 212(f) and 215(a) of the Immigration and Nationality Act (INA), 8 U.S.C. 1182(f) and 1185(a), and section 301 of title 3, United States Code, temporarily suspending the entry into the U.S. of foreign nationals who pose a risk of transmitting 2019-nCoV.



#### **Movement and Monitoring Restrictions**

- On 2/2, the federal government began implementation of temporary movement and monitoring restrictions on certain individuals.
  - Any U.S. citizen returning to the U.S. who has been in Hubei Province in the previous 14 days will be subject to up to 14 days of mandatory quarantine, to ensure they're provided proper medical care and health screening.
  - Any U.S. citizen returning to the U.S. who has been in the rest of mainland China within the previous 14 days will undergo proactive entry health screening at a select number of ports of entry and up to 14 days of monitored self-quarantine to ensure they have not contracted the virus and do not pose a public health risk.
  - Foreign nationals, other than immediate family of U.S. citizens and permanent residents, who have traveled to China within the last 14 days will be denied entry into the U.S. for this time.

#### **Movement and Monitoring Restrictions**

- CDC and Customs and Border Patrol (CBP) are continuing to identify and screen travelers who have recently been in China at JFK, EWR and other airports in the U.S.
- NYSDOH is working closely with the New York City
  Department of Health and Mental Hygiene, Port Authority of
  New York and New Jersey and other public health partners to
  address CDC's and CBP's efforts at JFK and to implement the
  movement and monitoring restrictions.
  - Specific guidance for healthcare workers is expected soon.





#### **Infection Control**

Emily Lutterloh, MD, MPH
Director, Bureau of Healthcare Associated Infections
New York State Department of Health

## Infection Control

- Current CDC recommendations
- Still "interim",

  recently expanded

  from one paragraph to several pages



https://www.cdc.gov/coronavirus/2019nCoV/hcp/infection-control.html

# Screening

- Notify before arrival
- Wide spectrum of illness
  - Clinics, urgent care,
     emergency departments
- Screening protocols
  - Ask about travel
  - Post signage



## Patient Placement

- Patients of concern should be asked to wear a surgical mask as soon as they are identified
- Evaluate in:
  - Ideally, an airborne infection isolation room (AIIR, aka negative pressure room)
     or, if no AIIR available
  - A private room with the door closed and a facemask on the patient
    - Ideally, room where exhaust is not recirculated without HEPA filtration

#### Patient Placement

- Unknown how long 2019-nCoV remains infectious in the air
- AllR
  - For airborne pathogens, restrict use until enough air changes to remove pathogens
- Often estimate 2 hours



## Precautions

- PPE
  - Standard precautions
  - Contact precautions (gown, gloves)
  - Airborne precautions (fit-tested N95 or PAPR or better)
  - Eye protection (goggles or face shield)
- Minimize number of providers and keep a log of those entering room

# **Notify**

 Immediately notify your infection control personnel <u>and</u> local health department



# Patient-Care Equipment

Dedicated

or

Disposable

or

 Cleaned and disinfected per manufacturer's instructions



# Aerosol-Generating Procedures

- Examples: sputum induction, open suctioning of airways
- Perform in AllR
- Limit number of personnel



# Specimen Collection

- For NP and OP swabs and sputum collection:
  - Limit personnel in the room
  - Collect in AIIR or exam room with door closed
  - Wear PPE (gown, gloves, N95, eye protection)



## **Visitors**

- Screen visitors for risk and symptoms
- CDC now recommending visitor restrictions
  - Video call, etc.
- Instruct on hand hygiene, limit touching surfaces, PPE use per facility policy
- Limit movement within facility
- Log visitors



## Environment

- Routine environmental cleaning and disinfection with an EPA-registered, hospital-grade disinfectant
  - Emerging viral pathogen claim for 2019-nCoV via technical communication
  - or, if none of the above available,
  - Label claim against human coronaviruses



## Environment

- Per CDC, routine treatment of waste, linens, food service items
  - Currently, no change in what constitutes regulated medical waste
    - Err on the side of caution
    - Watch for changes
  - Your medical waste disposal company might provide additional guidance for regulated medical waste

# Infection Control: Disposition

- If to be discharged or transferred for additional evaluation or care:
  - Coordinate with local health department
  - Ensure EMS and receiving facility are aware of precautions and public health involvement
  - Do not release without approval from public health



## Health Care Personnel Exposure

- Await guidance on details of HCP monitoring (who, how, etc.)
- You might need to monitor staff if you have a confirmed case(s)
- Now is the time to:
  - Verify contact information for your HCP
  - Review your monitoring plans



## Infection Control at Home

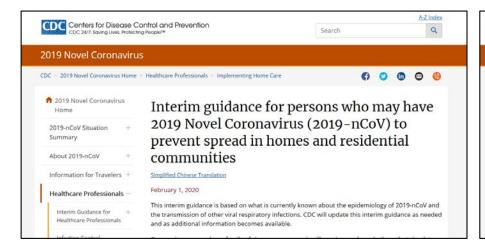
- CDC interim recommendations
  - https://www.cdc.gov/coronavirus/2019ncov/guidance-home-care.html





## Infection Control at Home

- CDC interim recommendations
  - https://www.cdc.gov/coronavirus/2019ncov/guidance-prevent-spread.html





## Infection Control: To do

- Review CDC interim recommendations
  - Check back for changes
- Plan for monitoring in case of HCP exposures



- Outpatient settings check your PPE availability
- Make sure you have handy the number and after-hours number for your local health department

# **Questions?**

