

2019 Novel Coronavirus (nCoV) Now a Reportable Disease of Public Health Significance; Screening, Testing & IPAC Recommendations

Attention: Physicians, Emergency Departments, Infection Control Practitioners, Occupational Health Practitioners, Walk-In Clinics/Urgent Care Clinics, Nurse Practitioners, EMS, Designated Officers, Midwives, Family Health Teams, Pharmacies, Central LHIN, NSM LHIN

Date: January 24, 2020

As of January 22, 2020, **novel coronaviruses are now diseases of public health significance (DPHS) and reportable** in the province of Ontario, making all suspect and confirmed local cases reportable to the Simcoe Muskoka District Health Unit (SMDHU).

Federal and provincial health authorities are closely monitoring an outbreak of respiratory illness caused by a novel coronavirus (termed "2019-nCoV") that was first detected in Wuhan City, Hubei Province, China and which continues to expand. 2019-nCoV is considered a novel human coronavirus that is genetically distinct from the common human coronaviruses (229E, NL63, OC43, HKU1), which causes seasonal acute respiratory illness. It is also genetically distinct from the two newer human coronaviruses, Middle East respiratory syndrome coronavirus (MERS-CoV) and severe acute respiratory syndrome coronavirus (SARS-CoV). There is evidence of human-to-human transmission of 2019-nCoV, and the World Health Organization has said that there may now be sustained human-to-human transmission. More information and analysis are needed on this new virus to understand the full extent of the human-to-human transmission and other important details.

Limited information is available to characterize the spectrum of clinical illness associated with 2019-nCoV. No vaccine or specific treatment for 2019-nCoV infection is available; care is supportive. This is an emerging, rapidly evolving situation and SMDHU will provide updated information as it becomes available.

Criteria to Guide Evaluation of Patients Under Investigation (PUI) for 2019-nCoV

Patients who meet the following criteria should be evaluated as a PUI in association with the outbreak of 2019-nCoV in Wuhan, China:

A person with fever and acute respiratory illness, or pneumonia, **AND** any of the following:

- travel to Wuhan, China in the 14 days before onset of illness;

OR

- close contact with a confirmed or probable case of 2019-nCoV;

OR

- close contact with a person with acute respiratory illness who has been to Wuhan, China within 14 days prior to their illness onset.

Healthcare providers should obtain a detailed travel history for patients being evaluated with fever and acute respiratory illness.



Infection Prevention and Control Recommendations

At this time, consistent with the guidance in place for [MERS-CoV](#), Ontario is recommending the following for acute care settings:

- Routine Practices and Additional Precautions (Contact, Droplet, and Airborne) by health care workers at risk of exposure to a PUI or confirmed case and/or the patient's environment. These precautions include:
 - hand hygiene
 - use of airborne infection isolation rooms when possible
 - masking the patient with a surgical mask when outside of an airborne infection isolation room
 - use of gloves; gowns; fit-tested, seal-checked N95 respirators and eye protection by health care workers when:
 - entering the same room as the patient;
 - collecting specimens from the patient; and
 - when transporting or caring for the patient.

PUIs who are not admitted to acute care should be advised to stay home while ill, practice hand hygiene and respiratory etiquette, wear a surgical mask if required for urgent appointments, clean and disinfect frequently touched objects and surfaces, and call ahead to healthcare providers if needing to seek further healthcare.

Note: The use of Airborne Precautions is a higher level of precaution than is being recommended by the Public Health Agency of Canada or the World Health Organization (WHO), or that is normally recommended for non-novel coronaviruses. Ontario is recommending at this time that health care workers apply Airborne Precautions based on the application of the precautionary principle to this novel virus for which little information about transmission and clinical severity is available. Ontario is reviewing guidance for other settings and will provide further updates in the coming days. For more information on Routine Practices and Additional Precautions, health care workers should refer to (PIDAC's) [Routine Practices and Additional Precautions In All Health Care Settings](#).

Recommendations for Reporting, Testing, and Specimen Collection

Healthcare providers should **immediately** notify SMDHU if they are investigating a patient for 2019-nCoV. Laboratory testing of persons under investigation (PUIs) for infection with 2019-nCoV may be considered; however, **testing for 2019-nCoV PUIs requires prior approval** by the Public Health Ontario (PHO) Laboratory before submission. For approval, contact PHO Laboratory's Customer Service Centre at 416-235-6556/1-877-604-4567 or the After-Hours Emergency Duty Officer at 416-605-3113. Specimen types include nasopharyngeal swabs, viral throat swabs and lower respiratory tract specimens (e.g. sputum, BAL, bronch wash). More information related to specimen collection and handling is available at: <https://www.publichealthontario.ca/en/laboratory-services/test-information-index/wuhan-novel-coronavirus>

At this time, samples testing positive for the 2019-nCoV at PHO will be sent on to the National Microbiology Laboratory for additional confirmatory testing.

The guidance provided may be adjusted as more is learned about the disease and its epidemiology.

If you have any questions or to report persons under investigation for 2019-nCoV, please contact the Infectious Diseases Team at 705-721-7520 ext. 8809.