



# Health Alert



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## ***Novel Coronavirus Updates: Presumptive Positive Cook County Case, Launch of Sentinel Surveillance, Continued Hospital Preparations***

***March 2, 2020***

### **Summary and Action Items:**

- A [third presumptive positive case of novel coronavirus \(COVID-19\)](#) has been detected in a Cook County resident on 2/29/2020.
- The Chicago Department of Public Health (CDPH) and Illinois Department of Public Health (IDPH) will begin sentinel surveillance at several Chicago hospitals on 3/2/2020.
- A new person under investigation (PUI) definition was published 2/27/2020:
  - Healthcare providers should continue to ask patients with respiratory symptoms (with or without fever) about travel to any [country with community transmission of COVID-19](#) or any known contact with a confirmed case of COVID-19.
  - Severe, unexplained pneumonia (with or without travel) should also be discussed with CDPH.
- Facilities should review [interim guidance for healthcare facilities to prepare for community transmission of COVID-19 in the United States](#) and develop internal policies and plans accordingly. **Plan now to be prepared.**
- Suspect PUIs should be immediately placed in airborne isolation and reported to CDPH by calling **312-746-SICK (7425) Monday–Friday during business hours and 311 after hours, weekends, or holidays (312-744-5000 if outside the city)**. See [www.chicagohan.org/COVID-19](http://www.chicagohan.org/COVID-19) for additional details.

### **General Updates:**

- A presumptive positive patient was identified on 2/29/2020 in Cook County. See news release [here](#).
- Based on Centers for Disease Control and Prevention (CDC) [guidance](#), CDPH and IDPH have provided information on identifying and evaluating PUIs.
- [New travel notices](#) are in effect to guide triage questions related to suspect PUIs.
  - As of 3/1/2020, ask about travel to China, Iran, Italy, Japan, & South Korea within the past 14 days.
- [CDC interim guidance for healthcare facilities](#) related to COVID-19 includes: appropriate triage of suspected patients, identification of staff to care for patients, [optimizing of respirator supplies](#) and other [PPE](#), and enhancing infection prevention and control efforts.

### **Key Questions:**

Does the third presumptive case of COVID-19 in Illinois mean community transmission is happening?

- We do not yet know whether this is evidence of community transmission but will continue to provide updates as soon as available. Hospitals and healthcare providers need to be prepared for a new response phase if this occurs. Upcoming CDC guidance is intended to define phases of geographic spread (similar to influenza), which will be incorporated into response phase guidance.

What is CDPH doing to gather more data on community transmission?

- CDPH, in collaboration with IDPH, will begin sentinel surveillance at several Chicago hospitals on 3/2/2020.
  - Currently, sentinel surveillance will involve performing COVID-19 testing on a number of respiratory

specimens from participating hospitals if influenza testing on these specimens is negative.

- CDPH asks providers to consider those with severe, unexplained pneumonia as a PUI and obtain specimens for testing.
  - For any patient with a possible diagnosis of COVID-19, [appropriate PPE](#) should be used at all times, particularly for aerosol-generating procedures such as intubation or bronchoscopy.
- Consider sending specimens to IDPH laboratory for influenza-like illness outbreaks in long-term care facilities (LTCF).

How should healthcare systems prepare?

- If community transmission is occurring, the goals of the next phase of response will prioritize 1) decreasing morbidity and mortality, 2) decreasing disease transmission, 3) protecting healthcare personnel, 4) maintaining overall system function
- Healthcare facilities should follow these [next steps](#) to prepare. Find specific LTCF guidance [here](#).
- Review actions to take now from [CDC interim guidance to prepare for community transmission in the United States](#) including educating staff about transmission, exploring alternatives to face-to-face triage, optimizing use of PPE, and preparing to triage and manage patients with respiratory illness.

How can healthcare systems manage returning international traveler healthcare employees and staff?

- Healthcare systems should consider implementing the following actions:
  - No further business-related travel for employees to China (including Hong Kong and Macau), Iran, Italy, Japan and South Korea, with additions if CDC extends travel warnings (level 2 or level 3) to other areas. Informing employees of the need to use PTO, sick time, or vacation days for the period of work restriction might be beneficial for planning purposes
  - No further business-related visitors from CDC-defined areas with travel warnings.
  - Avoid nonessential personal travel for employees to areas with travel warning.
  - Implement occupational health symptom monitoring for healthcare personnel returning from countries with travel level 2 or 3 warnings.
  - Work restrictions, including limitation of direct patient care, can be considered on a continuum for those employees returning from areas with travel level 2 and 3 warnings or those areas with at least “sustained community transmission”.
    - Considerations leading to full work restriction could include:
      - Patient care duties involving immunocompromised or otherwise high-risk individuals
      - High-risk exposures to sick individuals or healthcare settings while abroad

### Summary:

CDPH is working with local, state, and federal partners to update guidance as soon as available. Guidance for returning travelers and updated outpatient PPE guidance remains the same at this time but is expected to change soon. Check for clinical updates at: <https://www.chicagohan.org/covid-19> and community guidance documents at [www.chicago.gov/2019-nCoV](http://www.chicago.gov/2019-nCoV).

### Reporting:

To report suspected PUI for COVID-19 please call 312-746-SICK (7425) Monday–Friday during business hours and 311 after hours, weekends, or holidays (312-744-5000 if outside the city) and ask to speak with the medical director on call. If the patient meets case definition, a [2019 novel coronavirus PUI form](#) should be completed. Epidemiologic risk factors and initial laboratory and imaging results should be collected early in high-risk cases.

**Contact:** For additional information or questions, please refer to <https://www.chicagohan.org/COVID-19>.