Memo

To: Health Care Providers  
From: Dr. Kieran Moore, MOH  
Date: 27 February 2020  
Re: Update: 2019 Novel Coronavirus (COVID-19)

Updated Considerations for Risk Assessment

KFL&A Public Health recommends the following considerations when conducting a risk assessment for COVID-19:

- Maintain a high index of suspicion in returning travellers with fever and/or respiratory symptoms. The settings for international COVID-19 transmission are rapidly changing.
- At this time, beyond mainland China, some countries have established local transmission. The new Ontario case definition is as follows:
  - A person with fever and/or onset of cough or difficulty breathing AND any of the following within 14 days prior to onset of illness:
    - Travel to an impacted area OR
    - Close contact with a confirmed or probable case of COVID-19, OR
    - Close contact with a person with acute respiratory illness who has been to an impacted area.

As of Feb. 25, 2020, impacted areas include: China, Hong Kong, Iran, Northern Italy, Japan, Singapore and South Korea

- Given outbreaks are being reported in multiple jurisdictions, perform a careful travel history that includes healthcare settings and contact with ill persons in international settings.
- Consider COVID-19 in symptomatic returning travellers from any area under a Government of Canada Travel Health Advisory for COVID-19.
- Johns Hopkins University has created a map tracking reported cases and deaths worldwide. KFL&A Public Health recommends checking this map daily.

If you suspect an individual may be infected with COVID-19,

- Contact KFL&A Public Health (613.549.1232 ext 2300, afterhours 613.506.3100) to report the suspect case and discuss the most appropriate setting for testing.
- Primary care may perform testing provided the practitioner is able to safely use an N95 respirator. See the PHO website for testing information.
IPAC practices

- All primary care settings should follow routine infection prevention and control practices plus droplet and contact precautions.
- All settings should use both active screening (asking questions) and passive screening (signage) of patients for 2019-nCoV.

Resources

- Ministry of health and Long-Term Care: Novel Coronavirus – www.ontario.ca/coronavirus
- Public Health Agency of Canada: 2019 novel coronavirus: Outbreak update
- Ontario College of Family Physicians Novel Coronavirus: Tips for Family Doctors

Please see the following page for a suggested screening algorithm.

For more frequent updates and situation reports please contact communications@kflaph.ca to join our distribution list.

Kind regards,
Screening Algorithm for COVID-19

Do you have a fever and/or cough or difficulty breathing?
- NO
- YES

Did you travel outside Canada in the 14 days before onset of illness?
- NO
- YES

Did you travel to an affected area in the 14 days before onset of illness?
- NO
- YES

Were you in contact with ill persons who traveled to affected areas in the 14 days before onset of their illness?
- NO
- YES

Do you have an occupational risk for COVID-19 (e.g., laboratory worker, providing care to COVID-19 patient)?
- NO
- YES

No further action necessary

Move to a designated room with door closed
Use contact and droplet precautions
Report to Public Health
Test for COVID-19

Date: Feb 26, 2020
Affected Areas:
China
Hong Kong
Singapore
Japan
South Korea
Iran
Italy
See Johns Hopkins University Map

KFL&A Public Health