



For any questions, call the Humboldt County  
Public Health Communicable Disease Program  
at 707-268-2182

HEALTH ADVISORY  
March 4<sup>th</sup>, 2020

### CDC Updates PUI Criteria

As the availability of diagnostic testing for COVID-19 increases, clinicians will be able to access laboratory tests for diagnosing COVID-19 through clinical laboratories performing tests authorized by FDA under an Emergency Use Authorization (EUA). Clinicians will also be able to access laboratory testing through public health laboratories in their jurisdictions.

This will expand testing to a wider group of symptomatic patients. Clinicians should use their judgement to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Decisions on which patients receive testing should be based on local epidemiology of COVID-19, as well as the clinical course of illness. Most patients with confirmed COVID-19 have developed fever<sup>1</sup> and/or symptoms of acute respiratory illness (e.g., cough, difficulty breathing). Clinicians are strongly encouraged to test for other causes of respiratory illness, including infections such as influenza.

#### Epidemiologic factors that may help guide decisions on whether to test include:

- Any persons, including healthcare workers<sup>2</sup>, who have had close contact<sup>3</sup> with a laboratory-confirmed<sup>4</sup> COVID-19 patient within 14 days of symptom onset

OR

- A history of travel from affected geographic areas<sup>5</sup> (see below) within 14 days of symptom onset

#### International Areas with Sustained (Ongoing) Transmission

##### **China**

*Level 3 Travel Health Notice – AVOID NONESSENTIAL TRAVEL*

##### **Iran**

*Level 3 Travel Health Notice – AVOID NONESSENTIAL TRAVEL*

##### **Italy**

*Level 3 Travel Health Notice – AVOID NONESSENTIAL TRAVEL*

##### **South Korea**

*Level 3 Travel Health Notice – AVOID NONESSENTIAL TRAVEL*

##### **Japan**

*Level 2 Travel Health Notice – PRACTICE ENHANCED PRECAUTIONS*

CDC recommends that travelers returning from **Iran, Italy, and South Korea** stay home and self-monitor for symptoms of illness for 14 days after returning to the United States. For travelers returning to the U.S. from **Japan**, the recommendation is to limit contact with others and self-monitor for 14 days.

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## Footnotes

<sup>1</sup>Fever may be subjective or confirmed

<sup>2</sup>For healthcare personnel, testing may be considered if there has been exposure to a person with suspected COVID-19 without laboratory confirmation. Because of their often extensive and close contact with vulnerable patients in healthcare settings, even mild signs and symptoms (e.g., sore throat) of COVID-19 should be evaluated among potentially exposed healthcare personnel. Additional information is available in CDC's [Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease 2019 \(COVID-19\)](#).

<sup>3</sup>Close contact is defined as—

a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case

— or —

b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

If such contact occurs while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection), criteria for PUI consideration are met.

Additional information is available in CDC's updated [Interim Infection Prevention and Control Recommendations for Patients with Confirmed COVID-19 or Persons Under Investigation for COVID-19 in Healthcare Settings](#).

Data to inform the definition of close contact are limited. Considerations when assessing close contact include the duration of exposure (e.g., longer exposure time likely increases exposure risk) and the clinical symptoms of the person with COVID-19 (e.g., coughing likely increases exposure risk as does exposure to a severely ill patient). Special consideration should be given to healthcare personnel exposed in healthcare settings as described in CDC's [Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with COVID-19](#).

<sup>4</sup>Documentation of laboratory-confirmation of COVID-19 may not be possible for travelers or persons caring for COVID-19 patients in other countries.

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<sup>5</sup>Affected areas are defined as geographic regions where sustained community transmission has been identified. Relevant affected areas will be defined as a country with at least a CDC Level 2 Travel Health Notice. See all [COVID-19 Travel Health Notices](#).

### Helpful Links:

**CDC Coronavirus Disease 2019 (COVID-19) Frequently Asked Questions and Answers**

*Link:* <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

**CDC Coronavirus Disease 2019 (COVID-19) Cases In The US – Updated March 4<sup>th</sup>**

*Link:* <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>

**California Department of Public Health (CDPH) Coronavirus Disease 2019 (COVID-19) webpage**

*Link:*

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Immunization/nCOV2019.aspx>

**Coronavirus COVID-19 Global Cases by Johns Hopkins CSSE**

*Link:*

<https://gisanddata.maps.arcgis.com/apps/opsdashboard/index.html#/bda7594740fd40299423467b48e9ecf6>

**Previous Public Health Broadcast Faxes including information on lab sample collection can be found at:**

*Link:* <https://humboldt.gov/2237/Provider-Communication-from-Public-Health>

Communicable Disease Surveillance continues to be at the ready for any inquiries or concerns regarding COVID-19. Please call the main line at (707) 268-2182 to report any suspected case of novel coronavirus.

