COVID-19 Case Definition Updated to Include 7 Countries

New case definition issued by Ministry of Health effective February 26, 2020

COVID-19 case definition, as of February 26, 2020

(http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/2019_guidance.aspx):

The case definition now includes a person with: fever AND/OR onset of cough OR difficulty breathing **AND** any one of the following within 14 days prior to onset of illness:

- Travel to an impacted area. As of February 26, 2020 this includes: (added areas in bold):
 - China
 - Hong Kong
 - Iran
 - Italy
 - Japan
 - Singapore
 - South Korea

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

A copy of the case definition follows this message.

By law, suspected cases of COVID-19 must be reported to York Region Public Health. If you suspect a case of COVID-19 in your practice, call public health immediately at:

- 1-877-464-9675 ext. 73588 Monday to Friday: 8:30 a.m. to 4:30 p.m. or
- **905-953-6478** after hours (before 8:30 a.m. and after 4:30 p.m. Monday to Friday and 24 hours per day on weekends/holidays).

For those working outside of a hospital setting: Call public health <u>before</u> any testing for COVID-19 is done. Public Health has received several COVID-19 test results from the laboratory without reporting from clinicians. It is crucial for Public Health to be notified of any patients suspected to be infected with COVID-19 for preventing spread of this infection within our community.

Please note that clinicians should also **reinforce advice to clients on self-isolation**. This includes:

- Helping to advise clients that they should remain isolated at home until negative test results are received by the client from public health. (Note: Public Health will advise the client when their self-isolation period needs to end)
- 2) Helping to advise asymptomatic travelers returning from Hubei province to remain at home (not attend work or school and defer *elective* medical procedures) for 14 days from leaving Hubei. For urgent procedures, care can still be provided using contact/droplet precautions (as these individuals are well).

Isolation and monitoring advice for other international returning travelers can be found by typing in "Government of Canada Coronavirus disease (COVID-19): Travel advice" into a search browser. Most people are to simply self-monitor for signs and symptoms.

Clinicians are <u>discouraged</u> from turning away well clients reporting recent travel to affected areas.



Visit **york.ca/healthprofessionals** for the latest information, including a link to the updated COVID-19 case definition (persons under investigation and probable).

Health professionals are encouraged to refer to <u>york.ca/healthprofessionals</u> and the Ministry's health care provider page (<u>health.gov.on.ca/en/pro/programs/publichealth/coronavirus/2019_guidance.aspx</u>) often to ensure they are using the latest details and guidance in their practice. Visit the Government of Canada's travel health notices at <u>travel.gc.ca/travelling/health-safety/travel-health-notices</u> to stay up to date on which areas are considered impacted by COVID-19.



Case Definition - Novel Coronavirus (COVID-19)

These case definitions* are for surveillance purposes and they are current as of February 26 2020. They are not intended to replace clinical or public health practitioner judgment in individual patient assessment and management.

A. Person under Investigation

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*

B. Probable Case

A person with fever (over 38 degrees Celsius) and/or onset of (or exacerbation of chronic) cough **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*
 AND
- In whom laboratory diagnosis of COVID-19 is not available, inconclusive, or negative (if specimen quality or timing is suspect)

C. Presumptive Confirmed Case

A person in whom the laboratory testing for COVID-19 was positive from the Public Health Ontario Laboratory but not yet confirmed (see Footnote 9).

D. Confirmed Case

A person with laboratory confirmation of COVID-19 infection performed at a reference laboratory (e.g. The National Microbiology Laboratory or Public Health Ontario Laboratory) and consists of positive real-time PCR on at least two specific genomic targets, or a single positive target AND additional detection with nucleic acid sequencing. Positive laboratory tests at a non-reference laboratory require additional testing at a reference laboratory for confirmation.



Case Definition Footnotes*

- 1. The incubation period of COVID-19 is unknown. SARS-CoV demonstrated a prolonged incubation period (median 4-5 days; range 2-10 days) compared to other human coronavirus infections (average 2 days; typical range 12 hours to 5 days). The incubation period for MERS-CoV is approximately 5 days (range 2-14 days). Allowing for variability and recall error and to establish consistency with the World Health Organization's COVID-19 case definition, exposure history based on the prior 14 days is recommended at this time.
- 2. A close contact is defined as a person who provided care for the patient, including healthcare workers, family members or other caregivers, or who had other similar close physical contact OR who lived with or otherwise had close prolonged contact with a probable or confirmed case while the case was ill.
- 3. Other exposure scenarios not specifically mentioned here may arise and may be considered at jurisdictional discretion (*e.g.* history of being a patient in the same ward or facility during a nosocomial outbreak of COVID-19).
- 4. There is limited evidence on the likelihood of COVID-19 presenting as a co-infection with other pathogens. At this time, the identification of one causative agent should not exclude COVID-19 where the index of suspicion may be high.
- Laboratory confirmation may not be available due to no possibility of acquiring samples for laboratory testing of COVID-19.
- Inconclusive is defined as a positive test on a single real-time PCR target without sequencing confirmation, or a positive test with an assay that has limited performance data available.
- 7. Laboratory tests are evolving for this emerging pathogen, and laboratory testing recommendations will change accordingly as new assays are developed and validated.
- 8. **Impacted Area** includes all countries/areas with a Government of Canada <u>Travel Health Advisory for COVID-19</u>. As of February 25, 2020, this includes: China, Hong Kong, Iran, Italy, Japan, Singapore, and South Korea. As the list of countries with a Travel Health Advisory for COVID-19 is updated regularly, please refer to the website for the most updated information on impacted areas.
- 9. A presumptive positive is a person in whom the laboratory testing for COVID-19 was positive from the Public Health Ontario (PHO) Laboratory by real-time PCR detection of at least two specific targets, but not yet confirmed by nucleic acid sequencing by PHO Laboratory, or not confirmed by nucleic acid detection (e.g. real-time PCR or sequencing) by the National Microbiology Laboratory (NML).