



**This is an official
MS Health Alert Network (HAN) Alert**

MESSAGE ID: MSHAN-2020229-00428-**ALT (Health Alert)**

RECIPIENTS: All Physicians, Hospitals, ERs, ICPs, NPs, and
Healthcare Providers - Statewide

DATE: Saturday, February 29, 2020

SUBJECT: COVID-19 Health Alert— Probable Community
Spread Identified in US—Updated Guidance,
Mississippi February 29, 2020

This document updates the previous Health Alert on February 6, 2020. The guidance contained in this document is interim; the situation is rapidly evolving, and guidance is updated frequently. Physicians, healthcare providers and healthcare facilities are requested to stay up-to-date by accessing the Centers for Disease Control and Prevention (CDC) at <https://www.cdc.gov/coronavirus/2019-ncov/> and MSDH at <https://msdh.ms.gov/coronavirus>

The Outbreak of COVID-19 Continues to Rapidly Evolve:

- Cases of COVID-19 have been identified in the US in individuals in Washington, Oregon and California that indicate community transmission is likely. This includes a potential cluster of illnesses in a skilled nursing facility in Washington state.
- The first US death due to COVID-19 has been identified in Washington.
- The risk to the general US and Mississippi public remains low, but individuals with the possibility of complications from infection, including the elderly and those with underlying chronic medical problems, may be at higher risk if community transmission occurs in their areas.
- Widespread community transmission of COVID-19 is occurring in countries outside of China resulting in several additional Level 3 Travel Warnings to avoid nonessential travel. South Korea, Italy, and Iran are among the countries included in the travel warnings. See <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html> for updated travel information.
- The CDC also recommends that all travelers reconsider cruise ship voyages into or within Asia. Cruise ship passengers are at increased risk of person-to-person spread of infectious diseases such as COVID-19.
- All physicians, providers and healthcare facilities in Mississippi should be prepared to *Identify* individuals at risk based on travel/exposure and symptoms, *Isolate* these individuals using appropriate infection control and *Call* MSDH. Physicians and providers should immediately notify MSDH if COVID-19 is suspected at 601-576-7725 (601-576-7400 after hours, holidays and weekends).



- **The Mississippi Public Health Laboratory now has the capacity to test for the virus that causes COVID-19.**
- **Updated guidance for identifying a Person Under Investigation (PUI) for COVID-19, with consideration for additional travel history and collection of clinical samples is provided below.**

Identify--Evaluating for Risk of COVID-19

- The following criteria for identifying a Person Under Investigation (PUI) for COVID-19 are intended to serve as guidance for evaluation. Patients should be evaluated and discussed with MSDH on a case-by-case basis-please immediately call MSDH with any patient you have questions regarding.
- The greatest risk of infection is in those individuals with known exposure to a case of confirmed COVID-19.
- Mississippi physicians and healthcare providers should obtain a detailed travel history and exposure history for any for patient with fever and acute respiratory symptoms.

Patients in Mississippi who meet the following most current criteria should be evaluated as a PUI (Person under investigation) in association with the outbreak of COVID-19.

1. Fever OR symptoms of lower respiratory illness (e.g., cough or shortness of breath)
-AND
 - Any person, including health care workers, who has had close contact, with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset
2. Fever **and** signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization
-AND
 - A history of travel from affected geographic areas within 14 days of symptom onset
3. Fever with severe acute lower respiratory illness (e.g., pneumonia, ARDS) requiring hospitalization and without alternative explanatory diagnosis (e.g., influenza) after medical evaluation
-AND
 - No source of exposure has been identified



- **If a patient does not strictly meet the definition for a person under investigation (PUI) for COVID-19:**
 - The criteria for PUI serves as guidance only, and failure to meet the definition does not exclude the possibility of infection. **Patients should be evaluated and discussed with MSDH on a case by case basis to determine need for testing.**
 - If COVID-19 is suspected, the patient should be managed using Standard, Contact, and Airborne Precautions with eye protection until the diagnosis is excluded.

Isolate—Clinical Guidance

- Patients with suspected or confirmed COVID-19 should be asked to wear a surgical mask as soon as they are identified and should be isolated immediately.
- Medical evaluation of PUIs and those with confirmed COVID-19 should occur in either an airborne infection isolation room (AIIR) or an examination room with the door closed. If an AIIR is not immediately available, consideration should be given to transferring the patient to a facility that has an available AIIR.
- Regardless of the presence of an AIIR, healthcare personnel should wear all recommended personal protective equipment (i.e., gown, gloves, N-95 or higher-level respirator and eye protection) when caring for these patients.
- Patients should receive any interventions they would normally receive as standard of care. Empiric testing and treatment for other viral or bacterial etiologies may be warranted.
- **Respiratory virus panels, such as those manufactured by Biofire or Genmark** can detect several human respiratory viruses, including other coronaviruses that can cause acute respiratory illness, **but they do not detect COVID-19.**
- If a PUI tests positive for another respiratory pathogen, after clinical evaluation and consultation with MSDH, they may no longer be considered a PUI.
- Not all patients under investigation or with confirmed COVID-19 require hospital admission. If clinical presentation warrants in-patient clinical management and supportive care, they should be admitted with appropriate isolation precautions. Some patients may worsen in the second week of illness. The decision to monitor in an outpatient setting should be made on a case-by-case basis.

Call-Immediately notify MSDH

- Immediately notify MSDH at 601-576-7725 (601-576-7400 after hours) in the event of identification of a PUI.
- MSDH is in the process of expanding surveillance and testing to identify potential cases. **Physicians and healthcare providers should call MSDH with any question related to a patient and their potential risk of COVID-19.**



Specimen Collection Guidelines

- **The Mississippi Public Health Laboratory now has the Capacity to test for COVID-19.**
- Call MSDH to discuss testing of PUIs at 601-576-7725 (601-576-7400 after hours).
- CDC recommends collecting and testing upper respiratory (nasopharyngeal (NP) AND oropharyngeal (OP) swabs), and lower respiratory (sputum, if possible) for those patients with productive coughs. **Induction of sputum is not recommended.**
- NP and OP specimens should be collected with a synthetic fiber swab and each placed in 2-3 ml of viral transport media.
- Specimens should be collected as soon as possible once a PUI is identified after discussion with MSDH, regardless of the time of symptom onset. Maintain proper infection control when collecting specimens.
- See https://msdh.ms.gov/msdhsite/_static/resources/8430.pdf for full Specimen Collection Guidance

Resources

- See the MSDH website at <https://msdh.ms.gov/coronavirus>
- **CDC Clinician Outreach Communication Activity March 5, 1pm CT** “Coronavirus Disease 2019 (COVID-19) Update—What Clinicians Need to Know to Prepare for COVID-19 in the United States”
https://emergency.cdc.gov/coca/calls/index.asp?deliveryName=USCDC_1052-DM21038&deliveryName=FCP_5_DM8025
- [Evaluating and Reporting Persons Under Investigation \(PUI\)](#)
- [Healthcare Infection Control Guidance](#)
- [Clinical Care Guidance](#)
- [Guidance for EMS](#)
- [Healthcare Personnel with Potential Exposure Guidance](#)
- [Inpatient Obstetric Healthcare Guidance](#)

Regards,

Paul Byers, MD
State Epidemiologist



Alerting Message Specification Settings

Originating Agency: Mississippi State Department of Health
Alerting Program: MS Health Alert Network (MS HAN)
Message Identifier: MSHAN-2020229-00428-ALT
Program (HAN) Type: Health Alert
Status (Type): Actual ()
Message Type: Alert
Reference: MSHAN-00428
Severity: Unknown
Acknowledgement: No
Sensitive: Not Sensitive
Message Expiration: Undetermined
Urgency: Undetermined
Delivery Time: 600 minutes

Definition of Alerting Vocabulary and Message Specification Settings

Originating Agency: A unique identifier for the agency originating the alert.

Alerting Program: The program sending the alert or engaging in alerts and communications using PHIN Communication and Alerting (PCA) as a vehicle for their delivery.

Message Identifier: A unique alert identifier that is generated upon alert activation (MSHAN-yyymmdd-hhmm-TTT (**ALT=Health Alert**, **ADV=Health Advisory**, **UPD=Health Update**, **MSG/INFO=Message/Info Service**)).

Program (HAN) Type: Categories of Health Alert Messages.

Health Alert: Conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: Provides important information for a specific incident or situation; may not require immediate action.

Health Update: Provides updated information regarding an incident or situation; unlikely to require immediate action.

Health Info Service: Provides Message / Notification of general public health information; unlikely to require immediate action.

Status (Type):

- Actual: Communication or alert refers to a live event
- Exercise: Designated recipients must respond to the communication or alert
- Test: Communication or alert is related to a technical, system test and should be disregarded



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Message Type:

- Alert: Indicates an original Alert
- Update: Indicates prior alert has been Updated and/or superseded
- Cancel: Indicates prior alert has been cancelled
- Error: Indicates prior alert has been retracted

Reference: For a communication or alert with a Message Type of “Update” or “Cancel”, this attribute contains the unique Message Identifier of the original communication or alert being updated or cancelled. “n/a” = Not Applicable.

Severity:

- Extreme: Extraordinary threat to life or property
- Severe: Significant threat to life or property
- Moderate: Possible threat to life or property
- Minor: Minimal threat to life or property
- Unknown: Unknown threat to life or property

Acknowledgement: Indicates whether an acknowledgement on the part of the recipient is required to confirm that the alert was received, and the timeframe in which a response is required (Yes or No).

Sensitive:

- Sensitive: Indicates the alert contains sensitive content
- Not Sensitive: Indicates non-sensitive content

Message Expiration: Undetermined.

Urgency: Undetermined. Responsive action should be taken immediately.

Delivery Time: Indicates the timeframe for delivery of the alert (15, 60, 1440, 4320 minutes (.25, 1, 24, 72 hours)).