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Coronavirus Disease 2019 (COVID-19) Outbreak, Update # 5 *First Presumptive Positive Case in New Hampshire NH Public Health Laboratory Begins COVID-19 Testing*

Key Points and Recommendations:

1. New Hampshire Division of Public Health Services (DPHS) has identified our first presumptive positive COVID-19 case in an adult healthcare employee from Grafton County who traveled to Italy and developed symptoms consistent with COVID-19 shortly after return to New Hampshire.
2. CDC's [travel notices](#) have been updated. Providers should continue to ask patients presenting with fever or respiratory illness about travel to any countries with a level 1, 2, or 3 travel notice in the 14 days before symptom onset AND about any contact to COVID-19 cases. Any identified patients should be reported immediately to the NH DPHS at 603-271-4496 (after-hours 603-271-5300).
3. The New Hampshire Public Health Laboratories (PHL) now has testing capacity for COVID-19. Results take up to 24 hours from receipt of clinical specimens. Specimens testing positive by the NH PHL will be reported as presumptive positive and will need to be confirmed at the U.S. Centers for Disease Control and Prevention (CDC). NH DPHS will initiate an investigation while awaiting confirmation.
4. To submit specimens to the NH PHL for COVID-19 testing, the person under investigation (PUI) needs to first be reported to NH DPHS, and the guidance below for "Laboratory Testing for COVID-19" should be followed.
5. See the figure below which outlines NH DPHS' COVID-19 testing strategy, which is complementary to CDC's updated [Person Under Investigation \(PUI\) guidance](#), but offers increased flexibility to enhance surveillance for COVID-19 in NH.
6. See below for recommendations regarding healthcare employees considering international travel, and monitoring for those who have recently returned from travel.
7. Both the CDC and NH DPHS COVID-19 websites have been updated with specific guidance for long-term care facilities, businesses, schools, and PPE supply resources. Please review relevant documents for your organization type:
 - U.S. CDC website: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
 - NH DPHS website: <https://www.dhhs.nh.gov/dphs/cdcs/2019-ncov.htm>
8. Join us tomorrow, Tuesday March 3, 2020 at 12:00 noon for a webinar to discuss the COVID-19 epidemic, including the evolving public health response. The webinar can be accessed at the following link and call-in information:

Webinar link: <https://zoom.us/j/852671104>

Call-in Number: 1-646-558-8656

Meeting ID: 852 671 104

Situational Update:

See our recent HAN for additional information and guidance:

<https://www.dhhs.nh.gov/dphs/cdcs/alerts/documents/covid-19-update-4.pdf>

There are currently more than 89,000 cases of COVID-19 from more than 50 different countries, including several countries outside of mainland China that have sustained or widespread community transmission. There now a total of at least 43 non-repatriated individuals in the U.S. diagnosed with COVID-19, including 17 travel-related, and 26 instances of local person-to-person spread. See the CDC website for the most [updated case counts](#). There have been two deaths identified in the U.S.

Today NH DPHS also announced identification of our first presumptive positive COVID-19 case in an adult from Grafton County who traveled recently to Italy and developed symptoms consistent with COVID-19 within several days of return to New Hampshire. This individual is a healthcare employee and we are working with the local healthcare system and community to conduct a contact investigation, and self-quarantine, and monitor potential close contacts. There is no evidence of widespread community transmission in New Hampshire at this time.

Travel and Monitoring in Healthcare Providers

Travel notices are based on assessment of the potential health risks involved with traveling to a certain area. A list of destinations with travel notices is available at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>. CDC recommends that travelers avoid all nonessential travel to countries with a level 3 travel notice because of the increased risk of exposure to COVID-19 from widespread community transmission. Countries with a level 2 travel notice also have sustained community transmission of COVID-19 occurring, and CDC recommends that older adults and those with chronic medical conditions consider postponing travel to these locations.

Given this rapidly evolving epidemic and frequently changing travel advisories, NH DPHS recommends that **healthcare employees** also consider postponing any travel to countries with a level 2 travel advisory in order to protect their patients and avoid disruption to the healthcare workforce in case illness develops or quarantine becomes necessary. Healthcare institutions may elect to enact policy that their employees forego elective travel to locations with level 2 travel alerts or potentially face exclusion from work for 14 days after travel.

All individuals who have returned from mainland China are being monitored by public health authorities and must stay home for 14 days after their arrival. Healthcare employees and volunteers who have returned from other locations with travel notices for COVID-19 may continue to attend work. However, at the beginning of each shift for the 14 days after their return, they should have their health status assessed by occupational health or their supervisor to ensure they do not have a fever and are not experiencing symptoms of a respiratory illness. They should be counseled that if symptoms develop (e.g., fever, cough, or shortness of breath), they should:

- Seek medical care. Before going to a doctor's office or emergency room, the individual should call ahead and tell the provider or office about recent travel and symptoms.
- Stay home and avoid close contact with others.
- Practice strict respiratory etiquette and hand hygiene including covering the nose and mouth with a tissue when coughing or sneezing and washing hands often with soap and water for at least 20 seconds, or using an alcohol-based hand sanitizer if soap and water are not available.

Given the widespread community transmission identified in some countries outside China (e.g. South Korea and Italy), some healthcare facilities are electing to exclude employees who have traveled to countries with level 3 travel notices for 14 days after their travel. This may be appropriate before COVID-19 becomes more widespread as long as it does not disrupt healthcare delivery.

Laboratory Testing for COVID-19

For guidance on collecting, handling, and testing clinical specimens from patients for COVID-19, please review the CDC guidance:

<https://www.cdc.gov/coronavirus/2019-nCoV/lab/guidelines-clinical-specimens.html>

For initial diagnostic testing for COVID-19, CDC recommends collecting and testing upper respiratory (nasopharyngeal AND oropharyngeal swabs), and lower respiratory (sputum, if possible) for those patients with productive coughs. Induction of sputum is not recommended. Specimens should be collected as soon as possible once a person under investigation is identified, regardless of the time of symptom onset. Maintain proper infection control when collecting specimens.

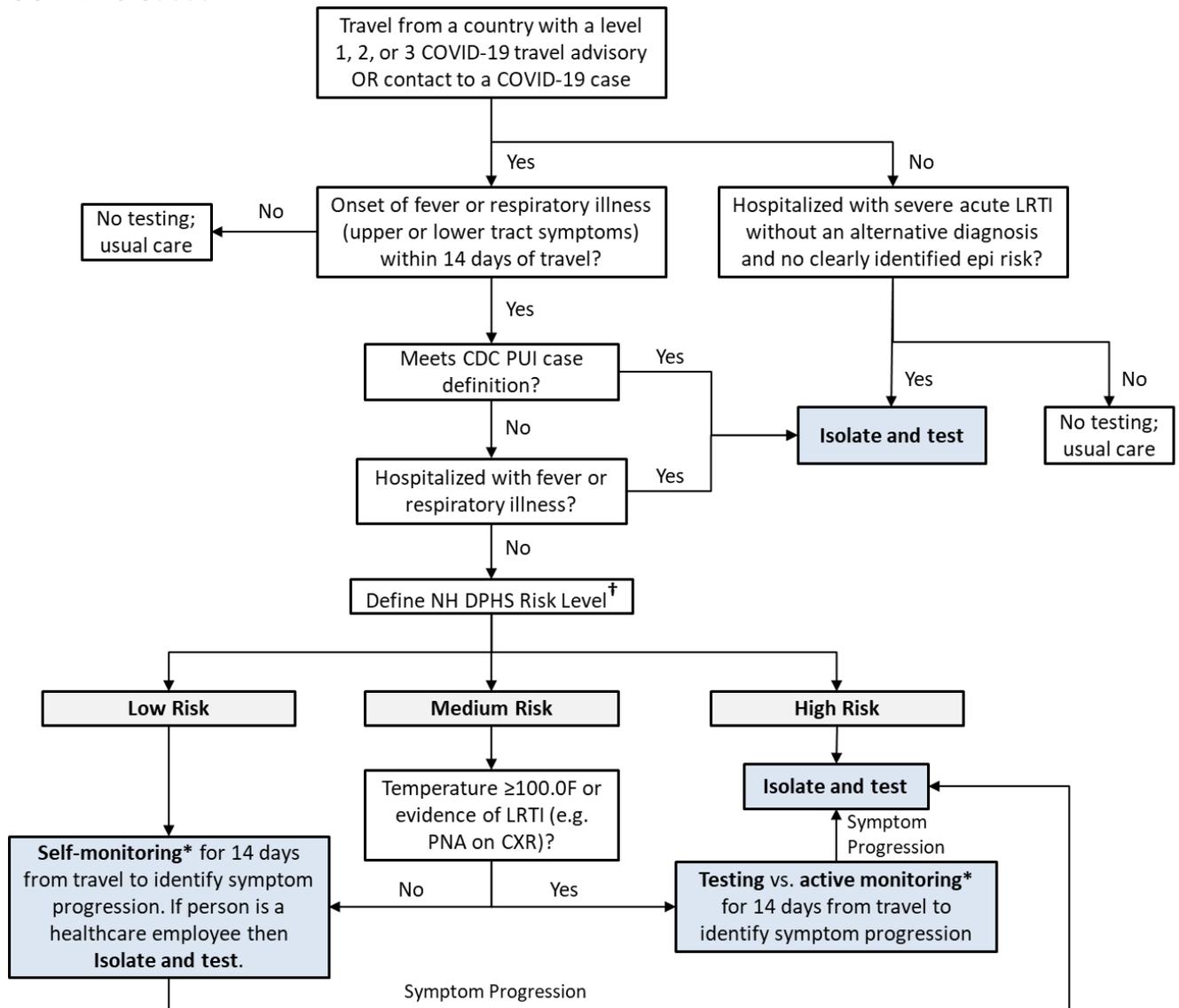
For collection of oropharyngeal (OP) and nasopharyngeal (NP) swabs, use only synthetic fiber swabs with plastic shafts. Do not use calcium alginate swabs or swabs with wooden shafts, as they may contain substances that inactivate some viruses and inhibit PCR testing. Place swabs immediately into sterile tubes containing 2-3 ml of viral transport media. NP and OP specimens should be kept in separate vials and clearly labeled. Refrigerate specimen at 2-8°C prior to transport to the NH PHL for testing.

To submit a specimen for testing, the individual needs to first be reported to NH DPHS Bureau of Infectious Disease Control at 603-271-4496 (after-hours 603-271-5300). The following NH PHL Test Requisition needs to be completed and submitted with specimens: <https://www.dhhs.nh.gov/dphs/lab/documents/labrequisition.pdf>.

Additional Information

- CDC 2019-nCoV website: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
 - CDC Information for Healthcare Professionals: <https://www.cdc.gov/coronavirus/2019-nCoV/guidance-hcp.html>
- World Health Organization 2019-nCoV website: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>
- NH DHHS 2019-nCoV website: <https://www.dhhs.nh.gov/dphs/cdcs/2019-ncov.htm>

FIGURE: NH DPHS COVID-19 Testing Algorithm of Symptomatic Travelers or Contacts to COVID-19 Cases



***Self-Monitoring:** Persons instructed to monitor for new or worsening respiratory symptoms or fever daily, including temperature checks twice a day, and to call NH DPHS with any new or worsening symptoms. Public health nurses will **contact patients by phone at least every 3 days** to assess degree of illness and for progression of symptoms.

***Active Monitoring:** Persons instructed to monitor for respiratory symptoms and fever daily, including temperature checks twice a day, and to call DPHS with any new fever or respiratory symptoms. Public health nurses will **contact patients by phone daily**.

Abbreviations:

CDC: U.S. Centers for Disease Control & Prevention; **COVID-19:** Coronavirus Disease 2019; **CXR:** chest X-ray; **DPHS:** Division of Public Health Services; **LRTI:** lower respiratory tract illness; **NH:** New Hampshire; **PNA:** pneumonia; **PUI:** person under investigation

† NH DPHS Risk Categories for Symptomatic Patients

High Risk	<ul style="list-style-type: none">• Travel from Hubei Province, China in last 14 days• Close contact (prolonged exposure within 6 feet, or physical contact) without appropriate PPE with an individual confirmed with COVID-19• Household members (prolonged close contact), even if using CDC recommended home care precautions
Medium Risk	<ul style="list-style-type: none">• Travel from mainland China (outside of Hubei Province) or any other country with a level 3 travel advisory in last 14 days• Exposure within 6 feet of an individual confirmed with COVID-19 without appropriate PPE for a limited or brief time period
Low Risk	<ul style="list-style-type: none">• Travel from a country with a level 1 or 2 travel advisory in the last 14 days• Being in the same indoor environment (e.g., a classroom, a hospital waiting room) as a person with symptomatic laboratory-confirmed COVID-19 for a prolonged period of time but not meeting the definitions of “close contact” or “medium risk” condition• Healthcare contact while wearing appropriate PPE with an individual confirmed with COVID-19
No Risk	<ul style="list-style-type: none">• Interactions with a person confirmed with COVID-19 that do not meet high-, medium- or low-risk conditions above, such as walking by the person or being briefly in the same room

- For any questions regarding this notification, please call the NH DHHS, DPHS, Bureau of Infectious Disease Control at (603) 271-4496 during business hours (8:00 a.m. – 4:30 p.m.).
- If you are calling after hours or on the weekend, please call the New Hampshire Hospital switchboard at (603) 271-5300 and request the Public Health Professional on-call.
- To change your contact information in the NH Health Alert Network, contact Adnela Alic at (603) 271-7499 or email Adnela.Alic@dhhs.nh.gov.

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From: Benjamin P. Chan, MD, MPH, State Epidemiologist
Originating Agency: NH Department of Health and Human Services, Division of Public Health Services

Attachments: None