

Novel Coronavirus: Advice for the NHS in England

This letter updates the advice sent on 5th March 2020. Major changes are highlighted in blue font. The key changes are to expand the case definition to include those presenting in hospital with certain symptoms, regardless of travel history. Advice for NHS organisations is as follows:

Individuals presenting at hospital

To improve case detection in those with no geographic link, patients who require admission to hospital should be tested **regardless of travel history** if they present with

- Clinical or radiological evidence of pneumonia or acute respiratory distress syndrome
 OR
- Influenza-like illness

Infection prevention and control measures whilst awaiting test results, including isolation and cohorting of patients, should be implemented in line with your Trust seasonal influenza operational plan.

Individuals with relevant travel history

If someone has returned from these specific areas in the last 14 days, they should self-isolate **even if they do not have symptoms**. If they do develop symptoms, they should use NHS111 online at 111.nhs.uk (if they have no internet access, they should call NHS111). The areas are:

- Iran
- Italy*
- Special care zones in South Korea as designated by the Government of the Republic of South Korea
- Hubei province

If the individual returned **before 9th March and** has symptoms, they should use NHS111 online at 111.nhs.uk (if they have no internet access, they should call NHS111).

If the individual returned **before 9th March and does <u>not</u> have symptoms**, they should only self-isolate if they have been in the original locked-down region of Lombardy and provinces of Modena, Parma, Piacenza, Reggio Emilia, Rimini, Pesaro and Urbino, Alessandria, Asti, Novara, Verbano Cusio Ossola, Vercelli, Padua, Treviso and Venice in the preceding 2 weeks.

If someone has returned from the following areas in the last 14 days and develops symptoms, however mild, of acute respiratory infection including at least one of:

- shortness of breath or cough (with or without fever);
- OR fever with no other symptoms;

they should self-isolate at home immediately and use NHS111 online at <a href="https://linear.ncbi.nlm

- China (except Hubei province which is listed above)
- Hong Kong
- Macau
- Taiwan

^{*} This applies to the whole of Italy if the individual has returned **after 9**th **March**, when the Italian government extended the lockdown to the entire country.



- Japan
- Malaysia
- Republic of Korea (except areas which are listed above)
- Singapore
- Thailand
- Vietnam
- Cambodia
- Laos
- Myanmar

Individuals with contact with confirmed case

If someone develops the same set of symptoms and has had contact with a confirmed case of COVID-19 in the 14 days before onset of symptoms, they should also self-isolate at home immediately and use NHS111 online at 111.nhs.uk (if they have no internet access, they should call NHS111).

Clinicians should be alert to the possibility of atypical presentations in patients who are immunocompromised.

The flowchart found at https://www.gov.uk/government/publications/wuhan-novel-coronavirusinitial-investigation-of-possible-cases outlines the initial assessment questions to identify a patient who may require testing and isolation/appropriate infection prevention and control measures. All healthcare providers should make arrangements for such patients to be identified immediately and managed according to the PHE guidance.

PHE in collaboration with the NHS has published guidance covering the following:

- Initial assessment and investigation of cases
- Infection prevention and control and guidance
- Guidance on diagnostics, which includes updated guidance for diagnostic laboratories testing for COVID-19
- Guidance for primary care

The four key principles to bear in mind in community settings are to:

- **Identify** possible cases as soon as possible
- **Isolate** to prevent transmission to other patients and staff
- Avoid direct physical contact unless wearing appropriate personal protective equipment
- Get specialist advice from a local microbiologist, virologist or infectious disease physician at your local trust

Best wishes,

Professor Stephen Powis **National Medical Director** NHS England and NHS

Improvement

Professor Chris Whitty Chief Medical Officer for England

Professor Sharon Peacock

Soleanck

Director - National Infection Service

Public Health England