



nCorona Virus outbreak control and
prevention State Cell
Health & Family Welfare Department,
Govt of Kerala.
Thiruvananthapuram, Kerala

REVISED GUIDELINES FOR n Corona Virus SURVEILLANCE

DATED 1st Feb 2020

Case definitions

1. Asymptomatic travellers

A traveller who has started journey from China,(not necessarily limited to Wuhan city) , or as the disease evolves, from any country/province notified to be 'affected' and has arrived in the state directly at one of the notified Point of entry is in the State

or

Indirectly after landing at neighboring or other airports in the country, and who has no symptoms whatsoever.

Action to be taken :

1. Strict home quarantine with fever surveillance for all
2. For all travelers from Wuhan(After Jan 15 , 2020) Sample Testing should be done

Person responsible :

Local PHC/ LOCAL THQ/GH/MCH

2. Suspect case

i) A person with severe acute respiratory illness (SARI) / history of fever and cough requiring admission to hospital / no other etiology that fully explains the clinical presentation (clinicians should also be alert to the possibility of atypical presentations in patients who are immunocompromised);

AND

any one of the following

A history of travel to China or any other country affected by nCorona Virus 14 days prior to

symptom onset.

- *the disease occurs in a health care worker who has been working in an environment where patients with severe acute respiratory infections are being cared for, without regard to place of residence or history of travel;
- **the person develops an unusual or unexpected clinical course, especially sudden deterioration despite appropriate treatment, without regard to place of residence or history of travel, even if another etiology has been identified that fully explains the clinical presentation

Or

ii) Individuals with acute respiratory illness of any degree of severity who, within 14 days before onset of illness, had any of the following exposures:

- close physical contact with a confirmed case of nCoV infection, while that patient was symptomatic.
- a healthcare facility in a country where hospital associated nCoV infections have been reported.
- direct contact with animals (if animal source is identified) in countries where then CoV is known to be circulating in animal populations or where human infections have occurred as a result of presumed zoonotic transmission.

*,** OMU (outbreak monitoring unit) alert to be given to decide on further evaluation and management.

Action to be taken: All suspect cases should be admitted to the designated isolation ward in the identified hospital with ICU facility prior to any sample taking as per testing protocol. Samples are to be sent for confirmation of n- Corona

Person responsible:

Superintendent of hospital/Nodal officer.

3. Confirmed case

The person as described above, in whom the recommended tests (Rt-PCR) /any other which may be notified later, from NIV Pune /Any other designated facility authorized by Government of Kerala.

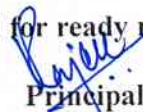
RISK STRATIFICATION OF CONTACTS

RISK CATEGORY	DESCRIPTION
High risk	<ol style="list-style-type: none"> 1. Touched body fluids of the patient (respiratory tract secretions , blood, vomit, saliva, urine, faeces) 2. Had direct physical contact with the body of the patient including physical examination without full precautions . 3. Touched or cleaned the linens, clothes, or dishes of the patient 4. Lives in the same household as the patient. 5. Close contact within 3ft (1mtr) of the confirmed case without precautions. 6. Passenger of the aero plane with a confirmed n-Corona passenger for more than 6 hours. <p>NB: Healthcare workers and other contacts who have taken recommended infection prevention and control precautions, including the use of full PPE, while caring for a confirmed 2019-nCoV case are not considered to be close contacts.</p>
Low risk	<p>Shared the same space: (same class for school/worked in same room/similar and not having a high risk exposure to confirmed or suspect case of 2019 n- Corona virus. Travel in the same environment (bus/train/Flight) but not having a high-risk exposure as cited above.</p>

FOLLOW-UP ACTION

RISK CATEGORY	Follow-up action
High risk	<p>Asymptomatic- Strict Home quarantine with active follow up for fever, by health workers using telephone, twice a day for 28 days .</p> <p>Symptomatic (fever)- Immediate admission in designated isolation ward with ICU facility</p>
Low risk	<p>Asymptomatic- Home quarantine and follow up for fever by telephone once a day for 28 days</p> <p>Symptomatic (fever)- Immediate admission in designated isolation facility</p>

*The proforma for the nCorona Virus Surveillance is attached for ready reference.


Principal Secretary
Health & Family Welfare

