COVID-19 Update #6

Currently, there are no cases of COVID-19 in Durham Region and the risk for Durham Region residents remains low. The case definition has been expanded (attached) to include patients who are symptomatic and have travelled to one of the following impacted areas: China, Hong Kong, Iran, Italy, Japan, Singapore, and South Korea.

For Health Care Providers who are considering testing patients for COVID-19:

- Contact Durham Region Health Department at 905-668-7711 ext 2996 OR after hours at 905-576-9991 to report the suspected case, for assistance with facilitating the testing process, or with questions about testing patients.
- If you choose to test the patient in your office, ensure you have the appropriate personal protective equipment to do so.
- Testing is currently occurring at 4 Lakeridge Health Emergency Department sites (Ajax Pickering, Bowmanville, Oshawa, and Port Perry).
- If the patient is discharged once testing is complete, the patient should self-isolate at home while awaiting results. Durham Region Health Department will contact all patients who have been tested.

Returning travelers from impacted areas are advised to monitor their health for fever, cough or difficulty breathing and avoid places where they cannot easily separate themselves from others if they become ill. If they develop a fever, cough or difficulty breathing within 14 days they should:

- Isolate themselves from others as quickly as possible.
- Immediately call their health care provider, Durham Region Health Department, or Telehealth at 1-866-797-0000 for further instructions.

The Ministry of Health will continue to finalize guidance documents and post them on their website. Durham Region Health Department will continue to monitor the situation and provide information as it becomes available. Information will also be posted on durham.ca/HCP. You can subscribe to this webpage to get email updates.

February 27, 2020
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.

5. Laboratory confirmation may not be available due to no possibility of acquiring samples for laboratory testing of COVID-19.

6. 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. Impact Area includes all countries/areas listed by the Government of Canada. 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).