External Circular No - رقم تعليم خارجي -
ADPHC - DG / C / 02- / 2020

بشأن
إخطار بخصوص فيروس تاجي (كرونا) جديد

Novel coronavirus (2019- nCoV) alert

Greetings,

In regards to the increasing number of the novel coronavirus (2019-nCoV) cases in China and other countries, Abu Dhabi Public Health Center emphasizes that all health care providers adhere below:

- Report any suspected or confirmed case of 2019-nCoV (Attached is the case definition, Appendix 1) immediately to ADPHC through the infectious diseases electronic notification system (https://bpmweb.haad.ae/usermanagement) by selecting Occurrence of any unusual diseases from the infectious diseases list.

- Practice standard, contact and airborne infection control precautions for patients or dead bodies with known or suspected 2019 nCoV. (Attached are the recommended infection control measures, Appendix 2).

• اتبع المعايير واتخاذ الاحتياطات اللازمة لمكافحة الأمراض المُنقولة عن طريق الرذاذ والنقلة عن طريق التلامس أثناء التعامل مع أي مريض أو جثة متوifi بأعراض فيروس كورونا الجديد.

• مراكز احتياجات مكافحة العدوى الموسي بها الملحق 2.

• الإبلاغ لفوري عن كل الحالات المشتبه بها أو المؤكدة بفيروس كورونا الجديد وذلك باختبار من قائمة الأمراض السارية في موقع التبليغ الإلكتروني للأمراض المعدية (الملحق 1 تعريف الحالة) (https://bpmweb.haad.ae/usermanagement)
• Follow the guidelines (appendix 3,4,5) of the following:

1. suspected 2019 nCoV case management flowchart
2. clinical pathway and testing for positive cases
3. contacts tracing and testing

Thank you for your cooperation.

Appendices:
1. Updated case definition
2. Infection Control Measures for suspected cases
3. Case assessment for Suspected 2019 nCoV
4. Clinical Care pathway
5. Management of close contacts

• اتباع الإرشادات الواردة في الملحق (3,4,5) وتشمل:

1. تصنيف الحالات المشتبهة بفيروس كورونا الجديد
2. إرشادات الفحص للحالات الإيجابية
3. تصنيف المخالطين وفحصهم

شكراً لكم حسن تعاونكم معاً.

مدير عام مركز أبوظبي للصحة العامة

المرفقات:
1. تعريف الحالة المحدثة
2. إجراءات مكافحة العدوى الواردة فيد أخذها للفحوصات المشتبهة
3. مخطط تقييم الحالات المشتبهة بفيروس كورونا الجديد
4. مسار الرعاية السريرية للحالات
5. آلية التعامل مع المخالطين

تاريخ الإصدار: 30/1/2020
Annex (1)

Case Definition for Novel Coronavirus 2019-nCoV

Suspected 2019-nCoV case is defined as:

A person with upper or lower respiratory illness AND any of the following:

- A history of travel to China in the 14 days prior to symptom onset.
- Severe acute respiratory infections (SARI)* with no other lab result that explains illness
- 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.
- Close physical contact with a confirmed case of nCoV infection while that patient was symptomatic

Confirmed 2019-nCoV Case:

A case with laboratory confirmed diagnostic evidence of nCoV infection.

Laboratory Criteria for Diagnosis:

- Polymerase Chain Reaction (RT-PCR) from respiratory sample
- Serologic assay in acute & convalescent samples
Annex (2)

Infection prevention measurements for a novel coronavirus (2019-nCoV)
(Route of transmission unknown but suspected to be respiratory)

<table>
<thead>
<tr>
<th>Component</th>
<th>Recommendations</th>
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</table>
| Patient placement                   | • Place patients in adequately ventilated single rooms.  
• When single rooms are not available, cohort patients suspected of nCoV infection together.  
• Offer a medical mask for suspected nCoV infection for those who can tolerate it.  
• Educate them on importance of covering nose and mouth during coughing or sneezing with tissue or flexed elbow.  
• Avoid the movement and transport of patients out of the room or area unless medically necessary.  
• Limit the number of HCWs, family members and visitors in contact with a patient with suspected nCoV infection.  
• Maintain a record of all persons entering the patient’s room including all staff and visitors. |
| Personal Protective Equipment (PPE)  | • Rational, correct, and consistent use of PPE and appropriate hand hygiene helps to reduce the spread of the pathogens.  
• PPE effectiveness depends on adequate and regular supplies, adequate staff training, proper hand hygiene and specifically appropriate human behavior. Use PPEs as per standard, contact and airborne precautions requirement: |
| Hand hygiene                        | • Perform hand hygiene before and after contact with the patient and his or her surroundings and after PPE removal                                                                                             |
| Aerosol generating procedures       | • Ensure that healthcare workers performing aerosol generating procedures (i.e. aspiration or open suctioning of respiratory tract specimens, intubation, cardiopulmonary resuscitation, |

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bronchoscopy) healthcare workers should wear a fit tested N95 mask, eye protection, gloves and impermeable apron/gown.

- Perform procedures in an adequately ventilated room or negative pressure room with at least 12 air changes per hour
- Limit number of persons present in the room to the minimum required for the patient’s care and support.

<table>
<thead>
<tr>
<th>Waste management</th>
<th>Ensure that all materials used is disposed appropriately</th>
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<tbody>
<tr>
<td>Disinfection of surfaces /equipment’s</td>
<td>Disinfect work areas and possible spills of blood or infectious body fluids with chlorine-based solutions</td>
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<td>Use either single use disposable equipment or dedicated equipment (e.g. stethoscopes, blood pressure cuffs and thermometers).</td>
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<td>If equipment needs to be shared among patients, clean and disinfect between each patient use.</td>
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</tbody>
</table>

*Additional contact and airborne precautions should continue until the patient is asymptomatic.*
Clinical pathway for managing patients positive for 2019-nCoV
Management of close contacts for a confirmed 2019-nCoV

Contact tracing process is supervised and reported to ADPH, outbreak response team.