Clinician Alert #13 General Practitioners
COVID-19 (Coronavirus disease)

NEW INFORMATION
IMPORTANT CHANGE TO THE SUSPECT CASE DEFINITION
Test for COVID-19 in patients with a clinically compatible illness who have travelled overseas in the last 14 days

Self-Isolation for return travellers
- Incoming travellers who have returned from mainland China or Iran (any date), the Republic of Korea (on or after 5 March 2020) or Italy (on or after 11 March 2020) will be required to self-isolate at their intended place of residence for a period of 14 days from the date of departure.

Suspect case
- Fever OR acute respiratory infection (e.g. shortness of breath, cough or sore throat) with or without fever, AND
  - international travel in the 14 days before the onset of illness, OR
  - close or casual contact in 14 days before illness onset with a confirmed case of COVID-19, OR
- Bilateral severe community acquired pneumonia (critically ill) and no other cause is identified, with or without recent international travel, OR
- Moderate or severe community acquired pneumonia (hospitalised) in a healthcare worker, with or without international travel.

Patients suspected to have COVID-19 should be tested and isolated until results are available.

Testing and infection control:
Patient
- Give the patient a surgical mask to put on and direct to a single room with the door closed.
- Patients with severe symptoms suggestive of pneumonia (breathing difficulty, or frequent, severe or productive cough) should be managed and tested in a hospital in a negative pressure isolation room where possible, phone ahead to the Emergency Department to advise.

Clinician
- Use standard, contact and droplet precautions: a disposable fluid resistant gown, gloves, surgical mask, and eye protection while testing patients with mild symptoms.

Testing
- Dry swabs for PCR testing: a nasopharyngeal swab AND an oropharyngeal (throat) swab
- Serum “to store” for use when serology testing becomes available.
- Send samples to any pathology laboratory with an urgent request for ‘SARS-CoV-2’ with any travel/case contact history and whether they are a healthcare worker. Specimen collection is available at COVID Clinics (metro), some PathWest collection centres and domiciliary collection may be possible. Call ahead for advice.

Reporting
Suspected COVID-19 is urgently notifiable to the Department of Health by completing the notification form either ONLINE or by printing out the notification form.
Call your local PHU to discuss urgent testing or if after consulting the COVID-19 Series of National Guidelines, you have any public health queries regarding COVID-19:

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<thead>
<tr>
<th>Metro</th>
<th>Kimberley</th>
<th>South West</th>
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<tbody>
<tr>
<td>9222 8588 / 1300 MCDCWA (1300623292)</td>
<td>9194 1630</td>
<td>9781 2359</td>
</tr>
<tr>
<td>Goldfields</td>
<td>Midwest</td>
<td>Wheatbelt</td>
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<tr>
<td>9080 8200</td>
<td>9956 1985</td>
<td>9690 1720</td>
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<tr>
<td>Great Southern</td>
<td>Pilbara</td>
<td>After hours/on call</td>
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<td>9842 7500</td>
<td>9174 1660</td>
<td>9328 0553</td>
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For up to date information refer to the WA Health website (www.health.wa.gov.au/coronavirus).
Dr Paul Armstrong, Director
COMMUNICABLE DISEASE CONTROL DIRECTORATE