NEW INFORMATION

- Test for COVID-19 in patients with a clinically compatible illness who have travelled or transited through a higher (mainland China, Iran, Italy or South Korea) or moderate (Cambodia, Hong Kong, Indonesia, Japan, Singapore, Thailand) risk country in the last 14 days.
- Healthcare workers who have returned from a higher risk country (mainland China, Iran, Italy or South Korea) should not work in a hospital or residential care setting for 14 days after leaving the higher risk country.

For an up to date list of countries visit:

Healthcare workers (HCWs) in hospitals and residential care settings

- HCWs who have returned from any higher risk country should not undertake work in a hospital or residential care setting, including aged care facility, for 14 days after leaving the higher risk country.
- HCWs returning from moderate risk countries should self-monitor for any symptoms for 14 days after leaving the moderate risk countries, and self-isolate if symptomatic.

Suspect case

Fever or acute respiratory infection (e.g. shortness of breath or cough) with or without fever, AND

- travel or transit through a country considered to pose a risk of transmission* 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.

*Countries considered to pose a risk of transmission:

- Higher risk: Mainland China, Iran, Italy, South Korea
- Moderate risk: Cambodia, Hong Kong, Indonesia, Japan, Singapore, Thailand


Isolate patients suspected to have COVID-19 until results are available.

Testing

- Dry swabs for PCR testing: a nasopharyngeal swab AND an oropharyngeal (throat) swab placed in transport medium.
- Lower respiratory tract samples for PCR testing: sputum, bronchoalveolar lavage, tracheal aspirate, pleural fluid if obtainable.
- Serum “to store” for use when serology testing becomes available.

Send samples to your pathology laboratory with an urgent request for ‘respiratory virus panel and SARS-CoV-2’ with their travel/case contact history.

Infection control for suspect and confirmed cases

- Routine care: contact and droplet precautions.
- Higher level care: use contact and airborne precautions for aerosol generating procedures, non-ICU patients requiring high level/high volume hands-on contact, and patients in ICU.
- Prolonged care: use powered air purifying respirators (PAPRs) for additional comfort and visibility when providing prolonged continuous care (e.g. more than an hour) in a patient’s room.

Reporting

Suspected COVID-19 is urgently notifiable to the Department of Health.

<table>
<thead>
<tr>
<th>Metro</th>
<th>Kimberley</th>
<th>South West</th>
</tr>
</thead>
<tbody>
<tr>
<td>9222 8588 / 1300 MCDCWA (1300623292)</td>
<td>9194 1630</td>
<td>9781 2350</td>
</tr>
<tr>
<td>Goldfields</td>
<td>Midwest</td>
<td>Wheatbelt</td>
</tr>
<tr>
<td>9080 8200</td>
<td>9956 1985</td>
<td>9690 1720</td>
</tr>
<tr>
<td>Great Southern</td>
<td>Pilbara</td>
<td>After hours/on call</td>
</tr>
<tr>
<td>9842 7500</td>
<td>9174 1660</td>
<td>9328 0553</td>
</tr>
</tbody>
</table>

Refer to the COVID-19 Series of National Guidelines for more information.

Dr Donna Mak, Senior Medical Advisor,
COMMUNICABLE DISEASE CONTROL DIRECTORATE