CDC Daily Key Points

Coronavirus Disease 2019 ("COVID-19") Outbreak

February 25, 2020

All content updated since February 24 is shown in colored text.

MAIN KEY POINTS

- There is an expanding global outbreak of respiratory illness caused by a novel (new) coronavirus.
- This virus has been named "SARS-CoV-2;" the disease it causes has been named COVID-19.
 - Due to potential for confusion with SARS-CoV, where possible, public communications will use "the virus that causes COVID-19."
- While most COVID-19 cases outside of China have been associated with travel to or from China, community spread is being detected in a growing number of countries.
- Destinations with apparent community spread of COVID-19 include Hong Kong, Iran, Italy, Japan, Singapore, South Korea, Taiwan, and Thailand.
- The fact that COVID-19 has caused illness, including illness resulting in death, and sustained person-to-person spread is concerning. These factors meet two of the criteria of a pandemic.
- As community spread is detected in more and more countries, the world moves closer toward meeting the third criteria, worldwide spread of the new virus.
- The potential public health threat posed by COVID-19 is high, both globally and to the United States.
- But individual risk is dependent on exposure.
- For the general American public, who are unlikely to be exposed to this virus at this time, the immediate health risk from COVID-19 is low.
- Under current circumstances, certain people will have an increased risk of infection. For
 example, healthcare workers caring for patients with COVID-19 and other close contacts of
 persons with COVID-19. CDC has developed guidance to help in the risk assessment and
 management of people with potential exposures to COVID-19.
- However, it's important to note that current global circumstances suggest it is likely that this virus will cause a pandemic. In that case, risk assessment would be different.
- Global efforts at this time are focused concurrently on containing spread of this virus and mitigating the impact of this virus.
- The federal government is working closely with state, local, tribal, and territorial partners, as well as public health partners, to respond to this public health threat.
- The public health response is multi-layered, with the goal of detecting and minimizing introductions of this virus in the United States so as to reduce the spread and the impact of this virus.
- CDC is operationalizing all of its pandemic preparedness and response plans, working on
 multiple fronts to meet these goals, including specific measures to <u>prepare communities</u> to
 respond local transmission of the virus that causes COVID-19.
- <u>Pandemic guidance</u> developed in anticipation of an influenza pandemic is being repurposed and adapted for a COVID-19 pandemic.
- Public health partners are encouraged to review their pandemic preparedness plans at this time.

- At this time, there is no vaccine to protect against COVID-19 and no medications approved to treat it.
- <u>Nonpharmaceutical interventions</u> would be the most important response strategy.

SITUATION UPDATE

- On February 25, a Morbidity and Mortality Weekly Report (MMWR) Update was published titled
 "Public Health Response to the Coronavirus Disease 2019 Outbreak United States, February
 24, 2020." (See Section "MMWR Update.")
- To date, 37 international locations (including the U.S.) have reported confirmed cases of COVID-19.
- On February 24, CDC issued a Level 2 Travel Notices (Practice Enhanced Precautions) for Iran and Italy.
- On February 24, CDC issued Level 3 Travel Alert Notices (Practice Usual Precautions) for South Korea.
- CDC also recommends that all travelers reconsider cruise ship voyages into or within Asia at this time.
- This is consistent with guidance by the U.S. State Department.
- This is a rapidly evolving situation. CDC is constantly reviewing and updating its guidance as needed.
- CDC is reporting confirmed cases of COVID-19 in the United States in two categories:
 - 1. Cases detected through our domestic public health systems, and
 - 2. Cases among people who were repatriated via U.S. State Department flights from Wuhan, China and from the Diamond Princess cruise ship (Japan).
- Fourteen cases of COVID-19 have been detected in California, Illinois, Massachusetts, Washington, and Wisconsin through U.S. public health surveillance.
- Two of these cases occurred through person-to-person spread. The remaining cases all were in persons who had travel to China.
- 43 cases of COVID-19 have been detected among the 1,100+ people repatriated from Hubei Province, China and the Diamond Princess. (That includes 3 people repatriated from Wuhan and 40 people who were repatriated from the Diamond Princess, an increase of 4 since yesterday.)
- Almost all of the people from the Wuhan flights who were quarantined have finished their 14day quarantine period.
- Because the passengers on the Diamond Princess were in a close setting where there was significant spread of COVID-19, they are considered at high-risk for infection. CDC expects to see additional confirmed cases of among those passengers.

MMWR UPDATE:

- As of February 23, 2020, there were 76,936 reported cases in mainland China and 1,875 cases in locations outside mainland China.
- Fourteen cases have been diagnosed in the United States, and an additional 39 cases have occurred among repatriated persons from high-risk settings, for a current total of 53 cases within the United States.
 - No deaths have been reported in the United States.

- CDC and partners are implementing aggressive measures to slow and contain the spread of COVID-19 in the United States.
 - Although these measures might not prevent widespread transmission of the virus in the United States, they are being implemented to
 - 1) slow the spread of illness;
 - 2) provide time to better prepare state and local health departments, health care systems, businesses, educational organizations, and the general public in the event that widespread transmission occurs; and
 - 3) better characterize COVID-19 to guide public health recommendations and the development and deployment of medical countermeasures, including diagnostics, therapeutics, and vaccines.
 - CDC's COVID-19 Response by the numbers:
 - As of February 24, 2020, a total of 1,336 CDC staff members have been involved in the COVID-19 response, including clinicians (i.e., physicians, nurses, and pharmacists), epidemiologists, veterinarians, laboratorians, communicators, data scientists and modelers, and coordination staff members.
 - CDC teams work with the Department of Homeland Security at 11 airports to screen all travelers from China who are returning to the United States.
 - As of February 23, 2020
 - A total of 46,016 air travelers have been screened at these 11 U.S. airports.
 - Eleven travelers were referred to a hospital and tested for infection; one tested positive and was isolated and managed medically.
 - Seventeen travelers were quarantined for 14 days because of travel from Hubei Province, China.
 - 479 persons for 43 states and territories had been or are being tested for COVID-19; 14 (3%) had a positive test, 412 (86%) had a negative test, and 53 (11%) test results are pending.
 - During January 18-Febrary 23, 2020, CDC laboratories used real-time reverse transcription—polymerase chain reaction (RT-PCR) to test 2,620 specimens from 1,007 persons for SARS-CoV-2.
 - During January 29-February 6, 2020, the U.S. government repatriated 808 U.S. citizens, residents, and their families from Hubei Province, China, on five chartered flights.
 - CDC posts travel notices to inform travelers and clinicians about current health issues that could affect travelers' health.
- CDC and partners are preparing for widespread transmission of COVID-19 in U.S. communities.
- The report is available online.

WHAT YOU CAN DO

- While the immediate risk of this new virus to the American public is believed to be low at this time, everyone can do their part to help us respond to this emerging public health threat:
 - It's currently flu and respiratory disease season and CDC recommends getting a flu vaccine, taking everyday preventive actions to help stop the spread of germs, and taking flu antivirals if prescribed.

- If you are a healthcare provider, be on the look-out for people with who recently traveled from China and fever and respiratory symptoms.
- If you are a healthcare provider caring for a COVID-19 patient or a public health responder, please take care of yourself and follow recommended infection control procedures.
- If you have been in China or have been exposed to someone sick with COVID-19 in the
 last 14 days, you will face some limitations on your movement and activity. Please
 follow instructions during this time. Your cooperation is integral to the ongoing public
 health response to try to slow spread of this virus. If you develop COVID-19 symptoms,
 contact your healthcare provider, and tell them about your symptoms and your travel or
 exposure to a COVID-19 patient.
- For people who have had close contact with someone with COVID-19 who develop symptoms, contact your healthcare provider, and tell them about your symptoms and your exposure to a COVID-19 patient.
- For people who are ill with COVID-19, please follow CDC guidance on how to reduce the risk of spreading your illness to others. This guidance in on the CDC website.

TESTING

- CDC has two laboratories conducting testing for the virus that causes COVID-19. CDC can test approximately 400 specimens per day.
- CDC's testing capacity is more than adequate to meet current testing demands. (There is no backlog of tests at CDC.)
- A number of laboratories are able to test for the virus that causes COVID-19 using CDC's test.
- All confirmatory testing for COVID-19 continues to be performed at CDC. (All positive results from testing conducted in non-CDC, U.S. laboratories must be confirmed at CDC.)
- CDC continues to work on remanufacturing test kits to detect the virus that causes COVID-19, which will be distributed following rigorous quality control processes.
- Commercial labs are working to develop their own tests and hopefully will be available soon. This will allow a greater number of tests to happen close to where potential cases are.

CDC ACTIONS

- CDC is aggressively responding to the global outbreak of COVID-19 and preparing for the potential of community spread in the United States.
- Preparing first responders, healthcare providers, and health systems:
 - Establishing **visibility across healthcare systems** to understand healthcare use, particularly surges in demand for medical care and associated resources.
 - Conducting extensive outreach to clinical and hospital professional organizations to ensure health system <u>preparedness</u>.
 - Producing more than <u>23 guidance documents</u> on infection control, hospital
 preparedness assessments, personal protective equipment (PPE) supply planning, and
 clinical evaluation and management (as of February 22, 2020).
 - Working closely with healthcare facilities and providers to reinforce <u>infection</u> <u>control principles</u> that recognize PPE is one component of a larger set of practices that help to limit the spread of disease.

- Developing a range of <u>respirator conservation strategies</u>, including strategies to make supplies last longer (such as using alternative products like reusable respirators) and extending the use of disposable respirators.
- Leveraging existing **telehealth tools** to direct people to the right level of healthcare for their medical needs.
- Working with supply chain partners to understand supply usage, what products are available, and when more aggressive measures may need to be taken to ensure that healthcare workers at highest risk have access to PPE.
- <u>Sharing information with stakeholders</u> to help them recognize when to shift the strategies they are using.
- Reinforcing state, territorial, and local public health readiness:
 - Assessing state and local readiness to implement community mitigation measures like home containment, including housing and transportation needs.
 - Coordinating with states to identify and mitigate gaps in readiness that will help reduce
 the spread of disease in the community while protecting workers, infrastructure, and
 institutions.
 - Linking public health agencies and healthcare systems to identify and mitigate stressors to the health system
 - Tracking stockpiles of PPE across jurisdictions.
 - Working with state and local public health to use existing <u>Public Health Emergency</u>
 <u>Preparedness (PHEP)</u> funding to support COVID-19 preparedness and response activities.
 - Leveraging funding mechanisms to help states accelerate preparedness activities.
 - Providing technical assistance and guidance to states to improve their ability to respond to the outbreak.
- Supporting communities, businesses, and schools:
 - <u>Creating business guidance</u> to help the public and private sectors ensure they are able
 to operate with adaptations like telework and flexible sick leave policies, as well as how
 to respond if an employee gets sick.
 - Developing guidance for childcare programs, K-12 schools, and colleges/universities to
 help them plan and prepare for COVID-19 and respond if there is a local outbreak in
 their community.
 - Providing planning guides for COVID-19 that households, community- and faithbased organizations, event planners of mass gatherings, and public health communicators can use.
 - Educating communities about **nonpharmaceutical interventions (NPIs)** that help slow the spread of illness, like COVID-19.

NONPHARMACEUTICAL INTERVENTIONS

- Nonpharmaceutical Interventions (NPIs) are actions, apart from getting vaccinated and taking medicine, that people and communities can take to help slow the spread of illnesses like pandemic flu or COVID-19.
- NPIs are also known as community mitigation strategies.
- When a new virus spreads among people, causing illness worldwide, it is called a pandemic.

- Because the virus is new, the human population has little or no immunity against it. This allows the virus to spread quickly from person to person worldwide.
- NPIs are among the best ways of controlling a pandemic caused by a respiratory virus when vaccines are not yet available.
- NPIs are grouped in three categories:
 - 1. personal NPIs (personal protective measures for everyday use and personal protective measures reserved for influenza pandemics);
 - 2. community NPIs (social distancing measures and school closures and dismissals); and
 - 3. environmental NPIs (surface cleaning measures)
- View <u>information about NPIs</u> and <u>factors to consider before implementing nonpharmaceutical</u> interventions.

For more information please visit the Coronavirus Disease 2019 Outbreak Page at: www.cdc.gov/COVID19.