

Interim guidance for suspect cases of novel coronavirus (2019-nCoV)

Vancouver Coastal Health and its partners continue to monitor the evolving coronavirus situation (named 2019-nCoV) which originated in the Wuhan area, Hubei province, in China. As of 8:00 AM today (January 24, 2020), nearly 1000 confirmed cases have been reported with all but 25 cases occurring within China. No cases have been reported in Canada. While most cases have a mild illness, there have been a total of 26 deaths reported. Among the deaths for which we currently have information, all have been in older individuals (median age: 75) with underlying comorbidities.

At this time, the risk to Canadians continues to be low. VCH remains vigilant for suspected cases of 2019-nCoV by working together with our provincial, federal and international partners. The situation is evolving rapidly and the screening and testing criteria are expected to change over time.

Travellers presenting at Vancouver's YVR Airport are being screened for symptoms of acute respiratory illness and recent travel to the area of concern. We have robust protocols in place between YVR and VCH to ensure timely assessment and testing of anyone presenting with an illness of concern.

Travellers returning from the exposed areas and who are currently well are being informed about 2019-nCoV and are being advised to call their health care provider or 811 in case of illness within 14 days of return.

We would like to remind our colleagues that while many travellers present with respiratory illness during the winter months, the vast majority of patients will have other common viral or bacterial etiologies. At this time, we recommend the following guidance on the screening, management and investigation of patients:

Please call your local **Medical Health Officer** if a patient presents with:

- Travel to the Wuhan area in China within 14 days of symptom onset **AND**
- Fever and acute respiratory illness with or without pneumonia **AND**
- No clear alternative diagnosis

For patients meeting these criteria, please offer them a surgical mask and place them in a separate room. Use contact and droplet precautions (gloves, gowns, surgical mask and eye protection) particularly during sample collection. Ensure that a viral NP swab or throat swab (red top COPAN with UTM) are completed and promptly sent to BCCDC Provincial Laboratory. If the patient is well enough to return home, they may be discharged with a surgical mask and advised to isolate at home until contacted by our VCH Public Health team. **Please ensure that you notify the Medical Health Officer on call while the patient is still present in the office in case further testing or precautions are indicated.** If you identify other reasons to consider your patient at a high index of suspicion for 2019-nCoV outside of the case criteria presented above, please contact your Medical Health Officer to discuss.

A Medical Health Officer is available 24/7 for guidance on appropriate testing and precautions. We can be reached during business hours at 604-675-3900 or after-hours at 604-527-4893.

Please visit these resources for the latest up-to-date information:

VCH statement on coronavirus: <http://www.vch.ca/about-us/news/vancouver-coastal-health-statement-on-coronavirus>

BCCDC update bulletin <http://www.bccdc.ca/health-professionals/data-reports/communicable-diseases/emerging-respiratory-virus-updates>

Government of Canada Travel Advisory <https://travel.gc.ca/travelling/advisories/pneumonia-china>

**You can reach a Medical Health Officer in Vancouver at 604.675.3900 Toll free at 1.855.675.3900
For public health emergencies after hours contact the Medical Health Officer on call at 604.527.4893**

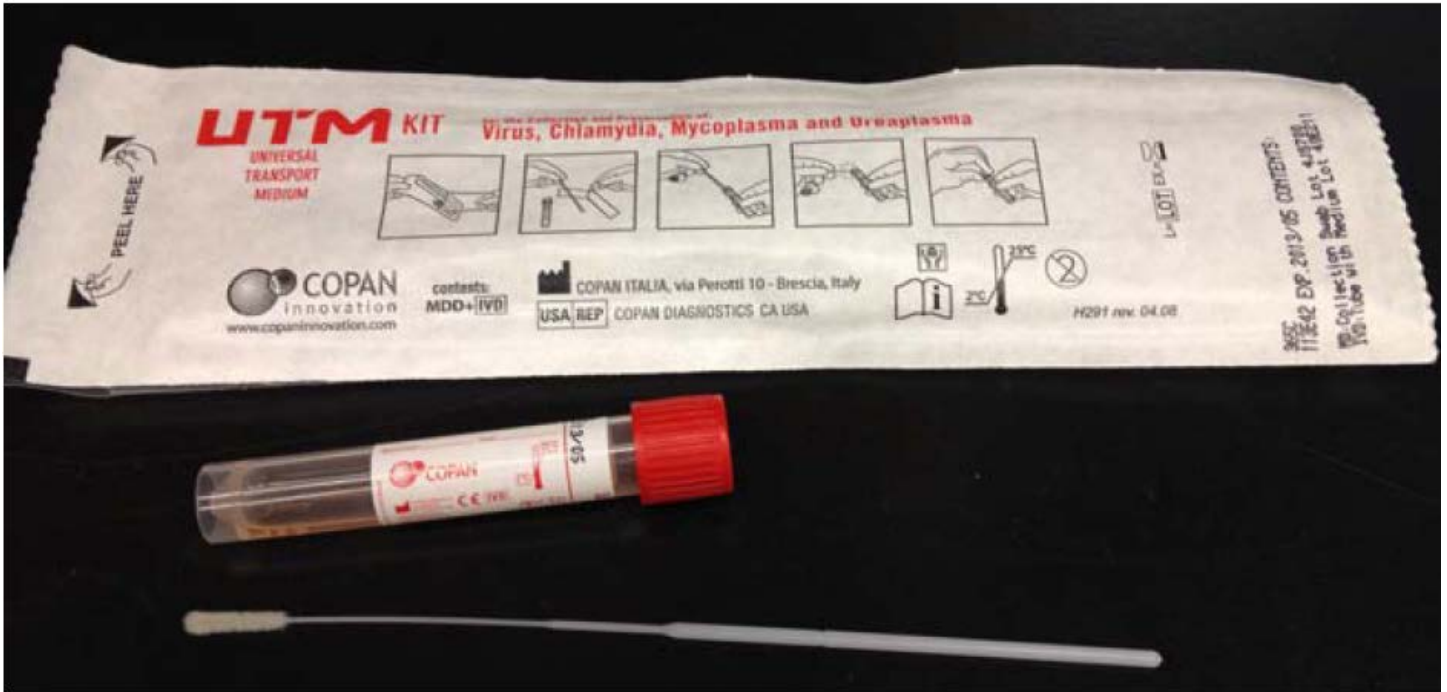
Vancouver Medical Health Officers

Dr. Patricia Daly (Chief Medical Health Officer)

Dr. Réka Gustafson, Dr. John Harding, Dr. Althea Hayden, Dr. James Lu, Dr. Michael Schwandt

To receive Physicians' Updates by email please contact us at: vchregistrationcdc@vch.ca

We know swabs can be confusing. Nasopharyngeal swabs and throat swabs should be collected using a viral NP swab, pictured below. Either blue or red-topped containers are acceptable but UTM is required.



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