مركزالأمــراض الإنــتـقـالـيـــة Communicable Disease Center



Memo

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ATTENTION	All HMC Facility & Start 2020	DATE	9 th April 2020
THRU	Dr. Saad Al – Kaabi Chairman of System Wide Incident Command and Control (SWICC) Committee Changes	Maclamarki 1	. N. K
FROM	Dr. Muna Al Maslamani Medical Director, CDC and Medical Director of All COVID -19 Casts across State of Qatar		045@DC/MD/MM-20-GV
SUBJECT	Revised Covid-19 Case Definition & Criteria for Repeat Testing		
□ URGENT	□ CONFIDENTIAL □ PLEA	ASE PROCI	ESS 🗆 FYI

In reference to the above- mentioned subject, kindly see attached revised COVID-19 Case Definition and Criteria for Repeat COVID-19 Testing.

Thank you.

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CASE DEFINITION

Suspected case (requires diagnostic testing)

1.

Acute respiratory tract infection (Sudden onset of the following: fever ≥37.8C and/or cough and/or shortness of breath)

AND

No other etiology that fully explains the clinical presentation particularly if he/she lives or works in area reporting recent local transmission of COVID-19.

OR

Close contact with a confirmed or probable COVID-19 case within ≤14 days prior to onset of symptoms

OR

Recent travel within the previous 14 days

OR

History of residence in country reporting local transmission of COVID 19 Disease.

2.

Severe acute respiratory infection (fever \$\geq 37.8C\) and/or at least one sign / symptoms of respiratory diseases (eg: cough, fever, shortness of breath)

AND

Requiring hospitalization

AND

No other etiology that fully explains the clinical presentation

3.

Individuals present with **any** acute respiratory illness including older adults (55 years or more) and individuals with chronic medical conditions and/or an immunocompromised state that may put them at higher risk for poor outcomes (e.g., diabetes, heart disease, receiving immunosuppressive medications, chronic lung disease, chronic kidney disease, cancer) regardless of travel history

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4.

Cluster case (2 or more cases with fever of 37.8 and/or respiratory symptoms in a small area such as families, offices, school room etc. within 2 weeks

Probable case

Suspected case + inconclusive COVID-19 test

Confirmed case

Laboratory-confirmed infection, regardless of signs and symptoms

CRITERIA FOR REPEAT COVID-19 TESTING

Symptoms and/or signs consistent with COVID-19 (as above)

AND

No confirmed etiology that explains the clinical presentation

AND

Abnormal baseline chest x-ray or chest CT scan (infiltrates, ground-glass opacities)

OR

Known close contact with suspected or confirmed COVID-19 within ≤14 days prior to onset of symptoms

A third test may be required in cases where suspicion remains high despite 2 negative upper airway samples. This requires approval by Infectious Diseases.

In Asymptomatic patients or low suspected COVID negative sample is enough to rule out COVID-19 infections.

DEFINITION OF CLOSE CONTACT:

Any one of the following:

- 1. A person living in the same household as a COVID-19 case
- 2. A person having had unprotected direct physical contact with a COVID-19 case (e.g. shaking hands)

- 3. A person having unprotected direct contact with infectious secretions of a COVID-19 case (e.g. being coughed on, touching used paper tissues with a bare hand)
- 4. A person having had unprotected (Gloves and mask) face-to-face contact with a COVID-19 case within <2m and for >15 min
- 5. A person who was in a closed environment (e.g. meeting room, hospital waiting room, etc.) with a COVID-19 case within <2m and for >15 min
- 6. HCW or other care provider for a COVID-19 case, or laboratory workers handling specimens from a COVID-19 case without recommended PPE or with a possible breach of PPE

Note: If any suspected case requiring hospitalization waiting for COVID-19 results, patients should be admitted under your respective department with no delay in the management and wear surgical mask all the time during hospital stay till COVID-19 ruled out. Staff should also maintain strict infection control measures (Isolation and proper PPE).

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