

مركز الأمراض الإنتقالية Communicable Disease Center

عضو في مؤسسة حمد الطبية
A Member of Hamad Medical Corporation



Memo

ATTENTION	All HMC Facility <i>to all HMC Staff.</i> <i>Saad.</i> <i>09/04/2020</i>	DATE	9 th April 2020
THRU	Dr. Saad Al – Kaabi Chairman of System Wide Incident Command and Control (SWICC) Committee Changes		
FROM	Dr. Muna Al Maslamani Medical Director, CDC and Medical Director of All COVID-19 Cases across State of Qatar <i>Dr. Muna Al Maslamani</i> <i>Medical Director</i> <i>Communicable Disease Center, CDC, HMC</i> <i>098813</i>	REF. NO.	046CDC/MD/MM-20-GV
SUBJECT	Covid-19 Diagnostic Criteria for Suspected Cases		
<input type="checkbox"/> URGENT <input type="checkbox"/> CONFIDENTIAL <input type="checkbox"/> PLEASE PROCESS <input type="checkbox"/> FYI			

In reference to the above- mentioned subject, kindly see attached Covid-19 Diagnostic Criteria for Suspected Cases

Thank you.

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DIAGNOSTIC CRITERIA FOR SUSPECTED CASES

Epidemiological History

- History of travel to or residence of epidemic communities where cases reported within 14 days prior to the onset of disease
OR
- In contact with the COVID patients within 14 days prior to disease onset
OR
- In contact with patients who had fever or respiratory symptoms from epidemic communities confirmed cases reported within 14 days before disease onset
OR
- Clustered cases (2 or more cases with fever and/or respiratory symptoms in a small area such as families, offices, school room within 2 weeks.)

Clinical Feature

1. Fever and/or Respiratory Symptoms

2. Clinical Imaging Characteristics:
 - In early stage, multiple spotted shadows and interstitial changes
 - Multiple ground-glass shadows and Infiltrations shadows bilaterally.
 - In severe cases lung consolidation.

3. Laboratory Test:
 - In most patients:
 - ✓ White Blood Cells was normal or decreased with lymphocyte count decreased.
 - ✓ C-Reactive protein & ESR were elevated.
 - Some patients show increase in liver enzymes, lactate dehydrogenase (LDH), Muscle Enzymes & Myoglobin.
 - In severe cases, D-Dimer increased progressively.

Diagnostic Criteria for Suspected Cases

- Anyone of the epidemiological history with any of two of the clinical features.
- All three clinical features.

Note:

1. All Suspected case should be immediately in single room for isolation and treatment if available or cohorting with other suspected cases with the physical barrier with the patients and distance of not less than 6 feet.
2. The samples should be collected Nasopharyngeal and oropharyngeal swabbing for PCR Testing.
3. In highly suspected cases two nucleic acid tests, taken at least 24 hours apart, of COVID-19 suspected case is negative, and the viral specific IgM and IgG antibody are negative (If available) after 7 days from onset of disease, the suspect diagnosis can be rule out

OR

Three Nucleic acid tests taken at least 24 hours apart, of COVID-19 suspect case is negative, the suspected diagnosis can be rule-out.

4. A third test may be required in cases where suspicion remains high despite 2 Negative upper airway sample this requires approval by Infectious Diseases.
5. Any suspected cases requiring hospitalization waiting for COVID-19 results, patients should be admitted and wear surgical mask all the time during hospitalization stay till COVID-19 rule out.
6. All healthcare worker should also maintain strict Infection Control measures as per HMC policy once labeled suspected.
7. Pending swab result will not prevent or delay patient's hospitalization and management.
8. In asymptomatic patient or low suspected COVID-19 Infection, One negative sample is enough to rule out COVID-19 Infections.