



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. BOX 3378
HONOLULU, HI 96801-3378

In reply, please refer to:
File:

March 25, 2020

MEDICAL ADVISORY: UPDATE #7—CORONAVIRUS DISEASE 2019 (COVID-19)

Dear Healthcare Provider:

The Hawaii Department of Health (HDOH) is providing the following COVID-19 updates:

TESTING:

Do **NOT** test asymptomatic persons, even if they are contacts of persons with COVID-19. Results may not predict who will get sick and will not change the need for or duration of quarantine of close contacts of a known case. For patients with symptoms suggestive of COVID-19 (i.e., fever plus cough or shortness of breath), clinicians should send specimens directly to clinical laboratories, now that they have the capacity for COVID-19 testing. However, because testing supplies and personal protective equipment (PPE) remain in critically short supply nationwide, we recommend prioritizing the following specific groups of *symptomatic* patients:

- Persons age 65 years and older, especially those living in congregate settings (i.e., longterm care facilities or assisted living facilities)
- Individuals who have chronic medical conditions, including immunosuppression, and may require altered management if infected with COVID-19 (your clinical judgement is essential for this population)
- Critically ill patients with acute respiratory illness, for whom clinical management and infection control procedures may differ based on a positive COVID-19 test.
- Healthcare workers (HCWs) and first responders

Please complete the Person Under Investigation (PUI)/Case Report Form¹ for any patient who tests **POSITIVE** for COVID-19 and fax to the Disease Outbreak Control Division (DOCD) at (808) 586-4595. COVID-19 is an **URGENTLY REPORTABLE** condition.

Testing at the State Laboratories Division (SLD) will focus on supporting public health investigations and surveillance activities, including:

- Symptomatic close contacts of confirmed cases
- Clusters of illness, especially in congregate settings, compatible with COVID-19
- Sentinel surveillance

HEALTHCARE WORKERS:

Healthcare facilities, if not already, should implement plans to maximize the availability of staff.

- Given the current mandatory 14-day quarantine required of all travelers in Hawaii as well

¹ <https://health.hawaii.gov/docd/files/2020/01/Hawaii-PUI-Form-nCoV-2019.pdf>

as the epidemiological risk associated with travel, discourage any travel for HCWs. To prevent critical staffing shortages, healthcare facilities may consider, especially for HCWs traveling interisland² to provide medical care, allowing a HCW, who has traveled, to work as long as they wear a medical mask for the 14-day period while in the healthcare facility as well as adhere to appropriate and frequent hand hygiene.

- HCWs who travel should minimize interactions with others not in the treatment setting and while traveling.
- As recommended for all HCWs, for those who travel, establish a protocol to pre-screen any patients seen by the traveling HCWs (e.g., specialty group) to detect patients with respiratory symptoms. Place a medical mask on any patient with a respiratory illness. HCWs should have at minimum a medical mask and eye protection readily available to use immediately if they encounter any patient with respiratory illness.
- Ensure HCWs do NOT come to work while ill. Any HCW who develops illness while working should immediately go home. A HCW diagnosed with COVID-19 who worked while symptomatic presents a critical risk for staff depletion given the recommended 14-day quarantine for close co-worker contacts.
- Emphasize the importance of social distancing and infection control to staff, including and especially when outside of the healthcare facility.

PATIENTS REQUIRING TREATMENT ON ANOTHER ISLAND

Patients requiring treatment on another island should be screened for respiratory symptoms before returning to their home island. When on the other island, limit interactions with others to only those necessary for treatment. HCWs involved in such treatment should be screened to ensure they have no respiratory symptoms.

DISCONTINUATION OF TRANSMISSION-BASED PRECAUTIONS³ FOR PATIENTS WITH COVID-19 IN HEALTHCARE SETTINGS⁴:

Hospitalized patients may have longer periods of COVID-19 detection compared with patients with mild or moderate disease. Severely immunocompromised patients may also have longer periods of COVID-19 detection and prolonged shedding. These groups may be contagious for longer than others. In addition, placing a patient in a setting where they will have close contact with individuals at risk for severe disease warrants a conservative approach. Facilities may consider a non-test-based strategy⁵ (e.g. time-since-illness and time-since recovery strategy), especially when testing is not readily available, to discontinue Transmission-Based Precautions or extend the period of isolation beyond the non-test-based strategy duration on a case-by-case basis in consultation with HDOH. An alternative may be a test-based strategy⁶ for patients who

² Transport teams who have limited, brief interactions with others as part of transports may continue to work without need for precautions but should self-monitor for illness.

³ <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>

⁴ <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html>

⁵ Medical Advisory, Update #6: https://health.hawaii.gov/docd/files/2020/03/MedAdvisory-Update6-COVID19_03182020.pdf

⁶ Test-based strategy: Resolution of fever without the use of fever-reducing medications AND improvement in respiratory symptoms (e.g., cough, shortness of breath), AND negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive nasopharyngeal swab specimens collected ≥ 24 hours apart (total of two negative specimens).

require prolonged hospitalization, are severely immunocompromised, or are being transferred to a long-term care or assisted living facility.

DISPOSITION OF PATIENTS WITH COVID-19⁴:

Patients with COVID-19 can be discharged from healthcare facilities when clinically indicated. Meeting criteria for discontinuation of Transmission-Based Precautions is *not* a prerequisite for discharge.

For patients discharged to home:

- Isolation should be maintained at home if the patient is discharged before discontinuation of Transmission-Based Precautions.
- The decision to send the patient home should be made in consultation with the patient's clinical care team and HDOH and should consider the home's suitability for and patient's ability to adhere to home isolation recommendations.

For patients discharged to a long-term care or assisted living facility (LTCF/ALF),

- If Transmission-Based Precautions were NOT discontinued while the patient was hospitalized, these Precautions should be continued in the LTCF/ALF. LTCFs/ALFs may elect to discontinue Precautions using either a test-based or non-test-based strategy and work with HDOH to determine when to discontinue Precautions.
- If Precautions have been discontinued before transfer to the LTCF/ALF and symptoms have improved, patients should be considered cleared and Precautions not required.

All LTCF/ALF staff **MUST** be provided with the PPE needed to keep themselves and the residents safe, including gloves, gowns, facemasks, and eye protection.

OTHER REMINDERS AND UPDATES:

The following resources are available for your patients:

- Centers for Disease Control and Prevention's "Coronavirus Self-Checker" to help patients make decisions about seeking appropriate medical care:
<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html>
- HDOH's COVID-19 Home Care Guide (5 Steps to Follow if You Feel Sick):
<https://health.hawaii.gov/docd/files/2020/03/COVID-19-Home-Care-Guide-HDOH.pdf>

This is a rapidly evolving situation. To ensure you are accessing the latest information, please visit HDOH's clinicians' page at: <https://health.hawaii.gov/docd/for-healthcare-providers/news-updates/> or CDC's COVID-19 website at: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

WHEN TO NOTIFY DOH OF A CONFIRMED OR SUSPECTED COVID-19 CASE

Please notify infection control personnel (as appropriate) and DOCD immediately if:

- **You have received positive COVID-19 test results for a patient tested at clinical laboratories**
- **You suspect a cluster of acute respiratory illness, especially in a congregate setting**

Notification for these scenarios should occur regardless of whether testing is requested from HDOH or clinical laboratories. Suspected COVID-19 is considered an URGENTLY REPORTABLE condition.

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If you have any questions or need to report a patient with suspected COVID-19, please contact us at one of the numbers below.

Oahu (Disease Reporting Line)..... (808) 586-4586
Maui District Health Office..... (808) 984-8213
Kauai District Health Office..... (808) 241-3563
Big Island District Health Office (Hilo)..... (808) 933-0912
Big Island District Health Office (Kona)..... (808) 322-4877
After hours on Oahu..... (808) 600-3625
After hours on neighbor islands.....(800) 360-2575 (toll free)

We appreciate your continued assistance in protecting our community.

Sincerely,



Sarah Y. Park, MD, FAAP
State Epidemiologist