Clinician Screening Tool for Identifying Persons Under Investigation for 2019 Novel Coronavirus (2019-nCoV)

Only consider persons with travel to mainland China or close contact\(^1\) with a laboratory-confirmed\(^2,3\) 2019-nCoV patient within 14 days of symptom onset.

A. Person traveled to or from **Hubei Province**, China

Does the person have fever\(^4\) and symptoms of lower respiratory illness (e.g., cough, shortness of breath)?

- **YES**
- **NO**

B. Person traveled to or from **mainland China** but not Hubei Province

Has person been **hospitalized** with symptoms of fever\(^4\) and lower respiratory illness (e.g., cough, shortness of breath)?

- **YES**
- **NO**

C. Person had close contact\(^1\) with a laboratory-confirmed\(^2,3\) 2019-nCoV patient

Does the person have fever\(^4\) or symptoms of lower respiratory illness (e.g., cough, shortness of breath)?

- **YES**
- **NO**

STOP: No 2019-nCoV testing needed
Continue to treat patient normally.

This patient meets the criteria for a patient under investigation for 2019-nCoV. The Florida Department of Health asks that you **immediately** notify both your county health department ([FloridaHealth.gov/CHDEpiContact](http://FloridaHealth.gov/CHDEpiContact)) and infection control personnel at your health care facility and:

- Ask the patient to wear a surgical mask.
- Evaluate the patient in a private room with the door closed, ideally an airborne isolation room, if available.
- Initiate contact and airborne precautions, including use of eye protection (e.g., goggles or a face shield) for all health care personnel entering the room.

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\(^1\) Close contact is defined as: (1) Being within approximately six feet (two meters), or within the room or care area, of a 2019-nCoV case for a prolonged period of time while not wearing recommended personal protective equipment (PPE) (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection); close contact can include caring for, living with, visiting, or sharing a health care waiting area or room with a 2019-nCoV case, or (2) Having direct contact with infectious secretions of a 2019-nCoV case (e.g., being coughed on) while not wearing PPE.

Data to inform the definition of close contact are limited. Considerations with assessing close contact include the duration of exposure (e.g., longer exposure time likely increases exposure risk) and clinical symptoms of the person with 2019-nCoV (e.g., coughing likely increases exposure risk as does exposure to a severely ill patient). Special consideration should be given to those exposed in health care settings.

\(^2\) Category also includes any member of a cluster of patients with severe acute lower respiratory illness (e.g., pneumonia, acute respiratory distress syndrome) of unknown etiology in which 2019-nCoV is being considered as a differential diagnosis that requires hospitalization. Such persons should be evaluated in consultation with state and county health departments regardless of travel history.

\(^3\) Documentation of laboratory-confirmation of 2019-nCoV may not be possible for travelers or persons caring for patients in other countries.

\(^4\) Fever may be subjective or confirmed.