

# Coronavirus Disease 2019 (COVID-19)

Implementation of Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential COVID-2019 Exposure in Travel-associated or Community Settings for Asymptomatic Persons

Version 3 | March 13, 2020

## Summary

- The Department of Health (DOH) will implement risk assessment and public health management of all persons potentially at risk for COVID-19 according to guidelines from The Centers for Disease Control and Prevention (CDC).
- DOH will only be implementing these guidelines prospectively for persons arriving in the United States, or otherwise identified as at-risk, on or after February 3, 2020.
- It is anticipated that in the coming weeks to months most persons needing to undergo active monitoring, or self-monitoring with public health supervision, will be in the medium-risk category.
- Contact investigations in response to confirmed cases and any person who potentially meet the high risk criteria should be discussed on a case-by-case basis with the Bureau of Epidemiology.
- County health officers and epidemiology staff should work with Central Office to plan for seeking public health orders for isolation or quarantine, in the event that these orders are needed to prevent the spread of disease.
- CDC and DOH guidance is interim and expected to change. Documents on this topic dated after the version date supersede this one.

## Implementation in Florida

This document describes how DOH will implement the CDC guidelines described here: [Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential 2019 Novel Coronavirus \(2019-nCoV\) Exposure in Travel-associated or Community Settings](#)

**Notification:** The Bureau of Epidemiology will notify county health department primary epidemiology contacts of persons meeting criteria for monitoring within 24 hours of receiving the information about persons at-risk for COVID-19 from CDC.

**Expectations:** County health departments (CHDs) will initiate monitoring within 24 hours of receiving information about persons at-risk for COVID-19. Staff will conduct risk assessment and monitoring, as defined in the CDC and DOH guidance, for any at-risk persons that traveled from China or Iran, or part of a conveyance contact investigations identified by the department, whether sent from CDC or other reliable sources (i.e. CHD staff, hospitals/health care, etc.).

All persons traveling from countries with a [level 3 travel advisory](#) should self-isolate and practice social distancing for 14 days. Persons traveling from countries with a level 2 travel advisory or from cruises should self-monitor for symptoms. Unless specified above, CHDs are not asked to track/monitor these persons.

## Summary Recommendations for Asymptomatic Persons with Potential COVID-19 Risk

Risk Category	Movement Restriction and Public Activities	Type of Monitoring Permissible	Travel Restrictions
High Risk	Quarantined (voluntary or under public health orders)	Direct active monitoring, once daily in-person, or remote equivalent (e.g. VDOT)	Controlled travel

		temperature and symptom check	
Medium Risk	Remain at home or in a comparable setting to the extent possible. Avoid congregate settings, limit public activities, and practice social distancing. Persons are excluded from public places, schools, public conveyances, and work* for duration of the potential incubation period.	<p><u>Category 1–Close contact of case or airline contact risk:</u></p> <p>Active monitoring, with daily phone call or text.</p> <p><u>Category 2–Including travelers from countries with Level 3 CDC travel advisory or identified as part of a cruise ship contact investigation:</u></p> <p>Self-monitoring with public health supervision. Phone calls or texts every 3<sup>rd</sup> day, including weekends.</p> <p>All persons should record their temperature twice daily.</p>	Postpone additional travel after reaching their destination.
Low Risk	No restriction	<p>Self-observation:</p> <p>Initial phone contact with county health department with guidance to immediately notify the CHD if fever or respiratory symptoms develop.</p> <p>Including travelers from countries with level 2 travel advisory and cruise passengers not included in a conveyance contact investigation</p>	None

\*In limited circumstances, as determined on a case-by-case basis through consultation with the Bureau of Epidemiology, persons may be allowed to work in a setting that provides clear distancing from others. If available, working remotely is requested.

For all persons:

- Upon initial phone contact, re-evaluate the risk status of travelers using the CDC criteria. Note: Changing planes, without leaving the airport, in affected regions is not considered to be a risk for COVID-19.
- For persons who are determined not to be in Florida, notify Bureau of Epidemiology monitoring unit to transfer them to another jurisdiction.
- For invalid phone numbers and addresses, use Lexis-Nexis to attempt to find better information.
- For person who are unable to be contacted after multiple phone calls and emails. Document them as “contact attempted, no response” in Merlin.

For high risk persons:

- Contact the Bureau of Epidemiology for quarantine guidance.

For medium risk persons:

- Following initial phone contact, provide written material on symptom monitoring, phone call schedule, when and who to call with questions or to report illness, and a thermometer (if needed).
- If symptoms develop: Immediate isolation at home or a health care facility is necessary.
- If persons miss more than one monitoring day, or are otherwise not cooperative, please contact the Bureau of Epidemiology.

Persons in all risk levels should contact the established CHD point of contact if they experience fever (subjective or measured), cough, or shortness of breath.

The CHD should determine if the person is going to seek health care, and if so, coordinate prior notification of the facilities or emergency medical services staff to ensure immediate implementation of infection control precautions. Please refer to [COVID-19 - Interim Enhanced Surveillance Guidance for County Health Departments](#) for guidance on symptomatic persons under investigation (PUI).

The CHD should prepare to provide essential services (i.e. shelter, food, water, and other necessities) to persons in quarantine and in limited circumstances where no social support system exists, to persons under active monitoring or self-monitoring with public health supervision.

For persons who need to communicate in other languages, CHD staff should utilize the Language Line services by calling 866-874-3972. Staff should be prepared to provide the CHD client ID number, which can be provided by the CHD’s budget office.

### **Tracking Monitoring of Persons At-Risk for COVID-19 in Merlin**

See COVID-19 Merlin data management guidance.

**Example: Script for Calling Persons Undergoing Public Health Monitoring****Initial Contact:****If no one answers, leave the following message:**

“Hello, my name is \_\_\_\_\_ and I’m calling from the Florida Department of Health in \_\_\_\_\_ County regarding an urgent health issue. Please call me at \_\_\_\_\_ as soon as possible”

**If the contact answers:**

Hello, my name is \_\_\_\_\_ and I’m calling from the Florida Department of Health in \_\_\_\_\_ County. May I speak to (the parent of) / Is this \_\_\_\_\_ ? We have been notified by the CDC that you have recently traveled to China. We’re contacting persons who may have been exposed to the novel coronavirus, COVID-19, which is a new virus spreading from person-to-person in China and to a lesser extent, other countries, including the United States. Health experts are concerned because little is known about this new virus and it has the potential to cause severe illness and pneumonia in some people. The virus is spread through respiratory droplets of a contagious person. Symptoms develop anywhere from 2 to 14 days after exposure to the virus and include fever, cough and difficulty breathing. Do you have difficulty breathing, cold or flu like symptoms at this time?

If no:

We are asking that you remain at home and avoid public settings for the 14 days after your last exposure. This would mean through \_\_\_\_\_ [insert date 14 days from last exposure to case or date left China]. You’ll also need to monitor for symptoms including checking your temperature twice a day. Please check once in the morning and then once in the evening. A staff member will be reaching out to you every third day to confirm your health status. Should you develop a fever or other symptoms such as cough or shortness of breath, please immediately contact us at \_\_\_\_\_ [county health department 24/7 number]. We will help to coordinate medical care if needed. Do you have any questions for me at this time? To confirm, we will be monitoring your health status through \_\_\_\_\_ [insert date 14 days from exposure date]. Please don’t hesitate to reach out to a staff member with any questions or concerns. Thank you for taking the time to speak with me.

If yes, follow protocol for PUI surveillance guidance.

**Follow-up Contact:****If no one answers, leave the following message:**

“Hello, my name is \_\_\_\_\_ and I’m calling from the Florida Department of Health in \_\_\_\_\_ County to check in as previously discussed. Please call me at \_\_\_\_\_ as soon as possible”

**If the contact answers:**

Hello, this is \_\_\_\_\_ from the Florida Department of Health in \_\_\_\_\_ County. I’m calling to check in on your health status as we planned. How have you been feeling? What have your temperatures been like? I, or another staff member, will be checking in again in three days. Please call us if anything changes prior to then. Thank you for taking the time to speak with me.



