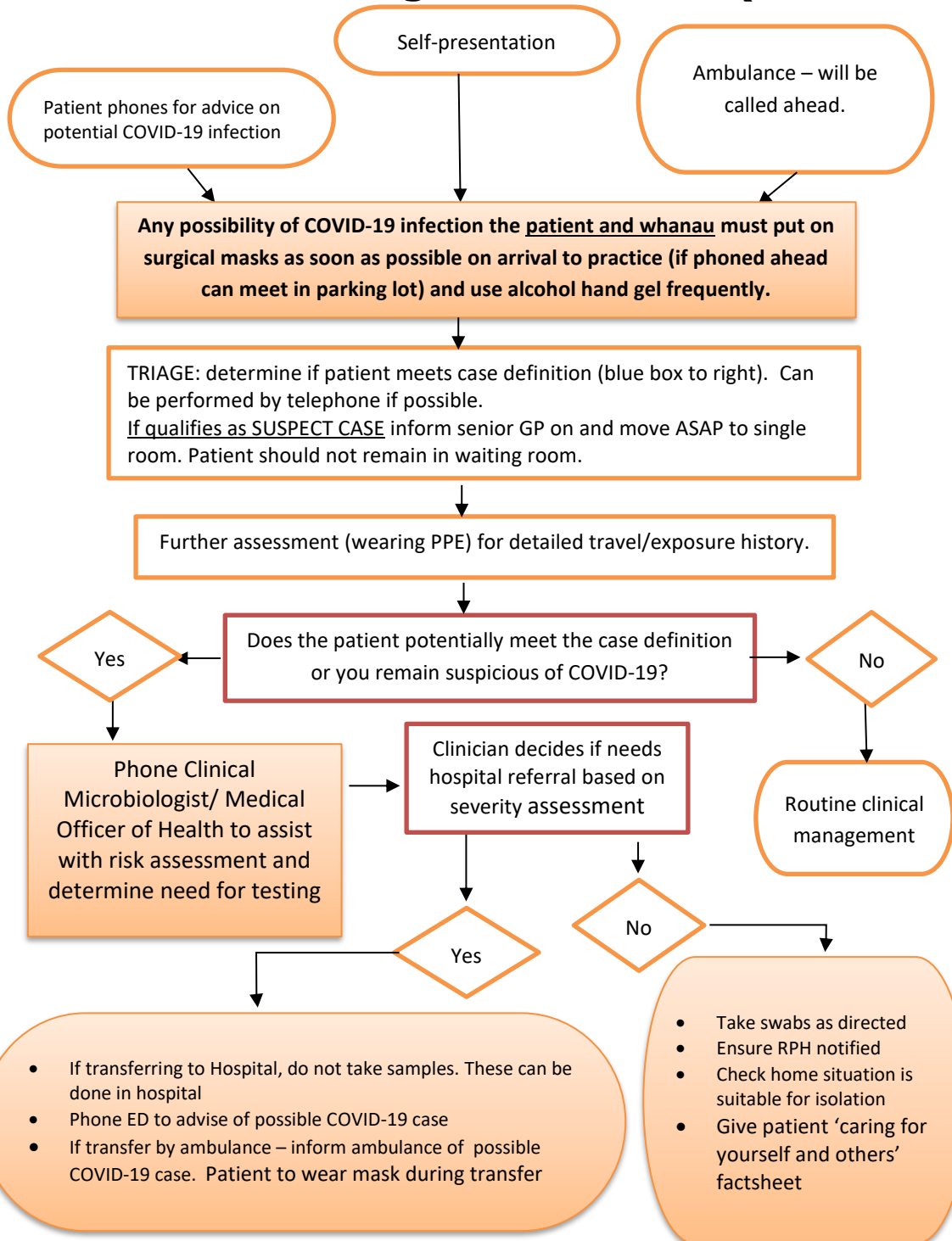


Guideline for Triage of COVID-19 (Coronavirus) in primary care



Case Definition

The patient is classified as a suspect case if they satisfy **both** the epidemiological and clinical criteria.

Epidemiological criteria

Travel to or from (including transit through) **mainland China** within 14 days before onset of illness **OR**
Close contact (refer close contact section) in 14 days before onset of illness with a confirmed case of 2019-nCoV infection

Clinical criteria

Fever ($\geq 38^{\circ}\text{C}$) or history of fever and acute respiratory infection with at least one of the following symptoms: shortness of breath, cough or sore throat.

Further guidance available in MoH Guidance document (incl 'close contact' definition):

https://www.health.govt.nz/system/files/documents/pages/interim_health_advice_for_health_professionals_novel_coronavirus_wuhan_2020_02_03.pdf

Infection control precautions:

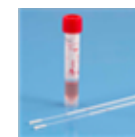
Personalised protective equipment (PPE): CONTACT + DROPLET

- Single room with door closed at all times
- Surgical Mask
- Apron or Gown
- Gloves
- Hand hygiene
- Eye protection (goggles or visor) if going within 1m of patient or taking nasopharyngeal swab

Do NOT give patient nebulisers in primary care setting – due to risk of aerosolisation

Cleaning:

- Wipe down all surfaces with disinfectant wipes as for influenza
- Dispose of PPE and cleaning wipes in biohazard bin
- Perform hand hygiene after cleaning.



Laboratory Testing

- discuss with on-call Microbiologist **before** testing – no tests will be processed unless
- Red viral swabs in UTM: ONE nasopharyngeal and ONE oropharyngeal swab placed in same UTM tube plus ONE nasopharyngeal swab in separate UTM
- When collecting swabs, PPE is required.