



Nebraska Department of Health and Human Services  
**HEALTH ALERT NETWORK**  
**Advisory**



TO: Nebraska Physicians, Hospital Administrators, Laboratories, Infection Preventionists, Emergency Rooms, and Public Health

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RE: 2019 Novel Coronavirus: Update

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Knowledge and practice of infection control is currently our best tool to combat novel coronavirus (2019-nCoV) in Nebraska. Having both a well-informed health care community and general public can help mitigate the impact of this emerging virus. Since there is no vaccine or pharmaceutical therapy at present, strict adherence to recommended infection control practices must serve as our main tool to control this virus. When implemented thoroughly, infection prevention has proven effective for similar corona virus pathogens such as SARS and MERS CoV.

Nebraska public health officials continue our heightened vigilance regarding the public health dimensions of the 2019-nCoV outbreak both globally and in the U.S. At this time, the public health goal is to minimize introduction of this virus into our state and to quickly identify and isolate any person suspected of infection with the virus. While five such individuals have been confirmed nationally, the immediate risk of infection from this new virus is still believed to be low in Nebraska and across the country.

This notice is to advise the Nebraska health care community in two critical settings:

**Physician Offices/Ambulatory Clinics/Emergency Rooms:**

- 1) Be vigilant in assessing travel and exposure history in persons presenting with febrile respiratory conditions. While the full clinical profile of infection from this virus has not been well-defined or published, we are focusing attention on persons within a 14-day window of travel to China who have fever and respiratory symptoms. Ideally, persons fitting this profile should call ahead to their medical provider's office prior to their visit, and should be provided a facemask upon arrival and placed in a private room apart from other patients.
- 2) High risk persons need to be placed in a private room, preferably with negative pressure, and remain carefully isolated. They should be tested to rule-out known endemic respiratory diseases such as influenza or other non-influenza respiratory pathogens.
- 3) Contact a local/state public health agency for guidance on specimen collection for 2019-nCoV.
- 4) Recommend patients practice social distancing (e.g., self-isolation at home) while awaiting test results and resolution of symptoms. CDC provides guidance for patients with 2019-nCoV who are self-isolating at home: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html>

- 5) Practice recommended infection control precautions to avoid acquisition of this and other pathogens as outlined below.
- 6) Persons who have had close contact with someone infected with 2019-nCoV and who develop symptoms should contact their healthcare provider, and explain both their symptoms and their exposure to a 2019-nCoV patient.

Asymptomatic shedding of 2019-nCoV is a possibility and such patients could expose and infect others who could lack the known epidemiologic risk factors (e.g. recent travel to China, or exposure to a known 2019-nCoV-infected patient). Nebraska health care providers should remain vigilant for persons lacking known risk factors for 2019-nCoV with severe lower respiratory infections with no identified pathogen. This scenario is not uncommon, and most often poses little to no public health threat. However, if no diagnosis is forthcoming after thorough workup for known endemic pathogens, and the remote possibility of 2019-nCoV infection becomes a consideration, providers should contact a public health authority for a discussion regarding diagnostic testing.

### **Health Care Facilities**

All acute care hospitals should review, update, and practice their emergency response and infection control protocols that address the care of patients with this pathogen. Infection preventionists should connect with administrative leadership and engage in strategic planning (including the availability of an adequate number of supplies) and rehearsal to ensure that a facility is fully prepared to safely manage patients presenting 2019-nCoV. Special attention should focus on Emergency Department patient intake and triage, and intensive care unit practices. All staff who enter the room of a patient with suspected 2019n-CoV infection should utilize standard, contact, airborne precautions and use eye protection. This means the use of gown, gloves, masks (preferable N-95s) and a face shield or goggles. Staff involved with bronchoscopy and intubation or airway management are at particular risk and need to review and practice infection control protocols included in the links below. These areas were particularly vulnerable during the 2003 SARS coronavirus outbreak and merit special attention to avoid a repeat of nosocomial transmission seen with that related virus.

Colleagues at the University of Nebraska Medical Center's Biocontainment Unit have developed an online training module that provides an excellent guide to proper infection control protection for health care workers caring for suspected 2019-nCoV patients:

<https://app1.unmc.edu/nursing/heroes/mpv.cfm?updateindex=75&src=yt>

CDC has available two document-size PDF posters that depict appropriate donning and doffing of protective gear which can be reproduced and posted in critical areas as an additional resource to help promote the practice of these critical infection prevention methods:

<https://www.cdc.gov/hai/prevent/ppe.html>

In addition, the CDC has prepared a checklist for health care facilities to ensure that all critical aspects of infection control are considered and implemented:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/hcp-hospital-checklist.html>

The World Health Organization (WHO) has additional guidance regarding Infection Prevention and Control, including detailed guidance regarding airborne precautions for aerosol-generating procedures:

[https://www.who.int/publications-detail/infection-prevention-and-control-during-health-care-when-novel-coronavirus-\(ncov\)-infection-is-suspected-20200125](https://www.who.int/publications-detail/infection-prevention-and-control-during-health-care-when-novel-coronavirus-(ncov)-infection-is-suspected-20200125)

**CDC will be hosting a webinar for clinicians tomorrow (Friday, January 31, 2020) at 2:00 ET. For information about the call: [https://emergency.cdc.gov/coca/calls/2020/callinfo\\_013120.asp](https://emergency.cdc.gov/coca/calls/2020/callinfo_013120.asp)**