



Official Utah Department of Health Alert and Update
COVID-19 Response – Persons Under Investigation Update
HAN #: 02292020-01

Intended audience: The public health and health care community

Title: Clarification on CDC criteria for evaluation of persons under investigation (PUI) for COVID-19

Summary/Background:

On February 27, 2020, the CDC changed the criteria that public health uses to decide who should be tested for COVID-19, known as persons under investigation (PUI). These criteria provide guidance for case-by-case evaluation by healthcare providers in consultation with public health and reflect the rapidly changing situation.

The CDC PUI criteria is summarized in the below table.

Clinical Features	&	Epidemiologic Risk
Fever or signs/symptoms of lower respiratory illness (e.g. cough or shortness of breath)	AND	Any person, including healthcare workers, who has had close contact with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset
Fever and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization	AND	A history of travel from affected geographic areas (see below) within 14 days of symptom onset
Fever with severe acute lower respiratory illness (e.g., pneumonia, ARDS) requiring hospitalization and without alternative explanatory diagnosis (e.g., influenza)	AND	No source of exposure has been identified

The above PUI guidance includes two significant updates:

1. Epidemiologic risk includes people who have traveled to geographic regions where sustained community transmission has been identified. These countries have at least a CDC Level 2 Travel Health Notice. As of 2/29/20, this includes: mainland China, South Korea, Italy, Iran, and Japan.
2. Patients with fever and severe lower respiratory illness without any epidemiologic risk **AND** no alternative explanatory diagnosis can be considered for testing for COVID-19 on a case-by-case basis. All testing decisions should be made in consultation with the Utah Department of Health (UDOH).

This HAN is meant to clarify how these PUI changes impact healthcare personnel receiving patients, especially with regards to the second update above. The UDOH confirmed the intent of this update with CDC.

The CDC and the UDOH are bound by the FDA’s Emergency Use Authorization (EUA), which requires a patient meet CDC testing criteria to be tested for COVID-19. The new criterion for severe lower respiratory illness without an

epidemiologic risk is to allow selective testing of those in whom there is a high index of suspicion. It is NOT meant to be directive as to who must be tested. It is NOT the intention of CDC or the UDOH that everyone with severe lower respiratory illness who tests negative for common respiratory pathogens be considered a possible COVID-19 patient.

At this time, there is no evidence of widespread COVID-19 transmission in Utah or the U.S. The main risk factors for this disease are travel to an affected area and contact with a confirmed case. At this time, healthcare personnel caring for patients with fever and severe lower respiratory illness without any epidemiologic risk for COVID-19 should use contact and droplet precautions with eye protection (unless another diagnosis requires a higher level of precaution, e.g. tuberculosis).

For patients with fever and severe lower respiratory illness without any epidemiologic risk AND no alternative explanatory diagnosis, the UDOH recommends considering an infectious disease consultation in addition to consultation with public health. The decision to test for COVID-19 will be made based on a high index of suspicion. For example considerations might include:

- A clinical course typical for COVID-19; e.g. severe respiratory compromise following about a week of illness that began with cough, fever, perhaps with myalgia or headache.
- Careful exclusion of other causes of severe lower respiratory illness, including a range of causes of viral respiratory illness (e.g. respiratory FilmArray or similar broad panel).
- Ground Glass opacities on radiologic imaging studies (if available) typical of COVID-19.

The guidance is likely to change when there is widespread transmission of COVID-19 in Utah and the U.S.

Recommendations:

- Obtain a travel history of all patients presenting with fever or lower respiratory symptoms. Symptomatic patients who have traveled in the past 14 days to an area affected by COVID-19 should be assessed for the disease. Contact your local health department or the UDOH for COVID-19 testing guidance (1-888-EPI-UTAH / 1-888-374-8824).
- All patients in the healthcare setting who are being assessed for COVID-19 should be isolated in a private room with limited traffic and a closed door. The patient should wear a surgical mask when someone else enters the room.
- Patients who are being tested for COVID-19 but do not require hospitalization are recommended to adhere to home isolation until testing is completed.
- Healthcare personnel caring for patients with fever and severe lower respiratory illness WITHOUT any epidemiologic risk for COVID-19 should:
 - use standard, contact, and droplet precautions with eye protection;
 - proceed to work-up for common causes of respiratory illness (e.g., FilmArray);
 - if no alternative explanatory diagnosis, obtain an infectious disease consultation in addition to consultation with public health.
- After consultation with public health, if a patient is considered to be a PUI and is being tested for COVID-19, use standard, contact, and airborne precautions with eye protection when providing care.
- Healthcare personnel that cared for a PUI or a confirmed COVID-19 case should have their exposure risk assessed and be excluded from work based on the CDC's work restriction recommendations.

For More Information:

- UDOH COVID-19 Information: <https://health.utah.gov/coronavirus>
- CDC PUI guidance: <https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html>
- CDC COVID-19 information for travel: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/>

- CDC information for healthcare professionals: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/index.html>
- CDC guidance for home isolation: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html>
- CDC guidance for healthcare personnel exposure assessment and work restriction recommendations: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

Contact:

For questions, please call 1-888-EPI-UTAH (374-8824).