

GUIDANCE DOCUMENT FOR POEs, STATES AND UTs FOR SURVEILLANCE OF 2019-nCoV

Situation Update (as on 25 January, 2020)

The Ministry of Health and Family Welfare (MoHFW), GoI is closely monitoring the outbreak of respiratory illness caused by a novel (new) coronavirus (termed “2019-nCoV”) that was first detected in Wuhan City, Hubei Province, China and which continues to expand.

As 25th January 2020, a total of 1287 cases and 41 deaths were reported in 29 provinces (districts and cities) of China. In addition, 28 cases have been confirmed outside Chinese mainland: 5 cases in Hong Kong, 2 cases in Macao, 3 cases in Taiwan, 4 cases in Thailand (2 cases cured), 2 cases in Japan (1 case cured), 2 cases in South Korea, 2 cases in the United States, 2 cases in Vietnam, 3 cases in Singapore, 1 case in Nepal and 2 cases in France.

Coronaviruses are a large family of viruses, some causing illness in people and others that circulate among animals, including camels, cats and bats. Rarely, animal coronaviruses can evolve and infect people and then spread between people such as has been seen with [MERS](#) and [SARS](#).

Initially, many cases reported in the outbreak in Wuhan, China had some link to a large seafood and animal market, suggesting animal-to-person spread. However, with increased number of cases being reported without any history of exposure to animal markets, suggests person-to-person transmission might be occurring. At this time, it’s unclear whether the human to human transmission is sustainable or not.

Limited information is available to characterize the spectrum of clinical illness, however yet modes of transmission, incubation period and period of communicability is unknown. No vaccine or specific treatment for 2019-nCoV infection is available; supportive care is recommended.

This is a rapidly evolving situation and information will be updated as it becomes available. These guidelines have been developed based on what currently is known about the disease and guidance from WHO. These are subject to change as additional information becomes available at a short notice.

Risk assessment: WHO assesses the risk of this event to be very high in China, high at the regional level and moderate at the global level.

Currently, WHO has not declared the situation as PHEIC.

Response from MoHFW(GoI):

- MoHFW is closely monitoring this situation in collaboration with WHO.
- MoHFW has initiated inflight announcements with regard to nCoV and entry screening for travellers from 2019-nCoV affected countries (China) at designated airports
- Mechanism for in country surveillance and contact tracing has been put in place through Integrated Disease Surveillance Programme(IDSP), NCDC.

- Advisories for travellers visiting China and arriving from China have been issued.
- Public health preparedness including diagnostics, hospital preparedness, IPC, response, logistics is being constantly reviewed.
- Risk Communication has been initiated and signages have been displayed at PoEs.

Scope of the guidance: It is mainly targeted towards health personnel involved in entry screening at Points of Entries (designated Airports) and in community surveillance through the mechanism of IDSP.

Objectives of the guidance:

- *To establish system for screening of travellers from 2019 nCoV affected countries (China) at Points of Entries:*
 - In flight announcement and filling of Self declaration form in the flight (Annexure 1)
 - Suspect case of 2019nCoV based on WHO case definition (identified during screening at APHO) will be referred to designated Hospital and information shared with CSU IDSP/NCDC immediately (Annexure 6).
 - Close contacts of the suspect case (co passengers seated in the same row, 3 rows in front and 3 rows behind along with some of the cabin crew) – Information be shared as per interim guidelines (page no. 5) in the format (Annexure 2)
 - List of passengers who have history of close contact (as per self declaration form) will be shared to IH Division and State/District for in-country surveillance by IDSP on daily basis.
- *To establish In country/ community surveillance through the Integrated Disease Surveillance Programme network (IDSP)*
 - SSU/DSU will receive line list / emails of Passengers under observation, coming from 2019-nCoV affected countries* from APHO, Office of Emergency Medical Relief, MEA or CSU and information collected in Format A & B. (Annexure 3 & 4)
 - Health Status of these passengers to be shared with CSU in Format C (Annexure 5) as per SoPs (Page no. 3).
 - Passengers who have history of close contact will be followed by IDSP officials on daily basis.
 - Close contacts of the suspect case – Information be shared as per interim guidelines in the format (Annexure 2)

PROTOCOL FOR SENDING DAILY HEALTH STATUS OF PASSENGERS UNDER OBSERVATION

SOPs for SSOs

- 1) SSU will receive line list / emails of Passengers under observation, coming from 2019-nCoV affected countries* from APHO, Office of Emergency Medical Relief, MEA or CSU.
- 2) SSU will share the line list / mails with DSUs immediately and Ensure immediate tracing of Passengers under observation by DSUs.
- 3) Information regarding any passenger who travels to another State will be immediately notified to the concerned State Health authority and comment shared in Format C.
- 4) SSU will receive complete investigation details in enclosed Format A from DSU as soon as possible on the same day.
- 5) SSU will ensure daily follow up of Passengers under observation for 28 days starting from date of last exposure/arrival.
- 6) SSU to compile the line list of all Passengers under observation daily, updating daily health status of Travelers / Suspects in enclosed Format B and share daily report of health status of Passengers under observation with CSU / EMR daily (Format C).
- 7) If any passenger is not traceable initially or during any duration while being followed up should be immediately notified to CSU.

All SSUs will keep themselves updated by routinely checking WHO and NCDC website on 2019-nCoV. Any guidelines shared by MoHFW on 2019-nCoV will be disseminated to concerned State/District authorities.

SOPs for DSU

- 1) Receive line list/ email of Passengers under observation from SSU/CSU/APHO.
- 2) Immediately trace the Passengers under observation and begin investigation and fill the enclosed format A. On first visit, passenger is to be provided a mask to be put on immediately in case symptoms such as fever and cough develop.
- 3) Passenger will be provided following advice during first visit by Health care provider:
 - a. You will also receive daily calls/visit from health department to ask your health status for the day, kindly cooperate with them.
 - b. You are requested to self-monitor for development of symptoms suggestive of 2019-nCoV i.e. Fever and Cough for 28 days from the date of arrival from 2019-nCoV affected countries*.
 - c. In case you initiation of symptoms (fever and cough), put on the mask immediately, restrict your outdoor movement and contact 24 hours helpline number 011-23978046. The Call operator will tell you whom to contact further. In the meanwhile, keep yourself isolated in your house/room.
- 4) DSU has to ensure daily follow up of Passengers under observation for 28 days starting from date of possible exposure/arrival. Passengers will also be counseled for self-reporting of illness suggestive of 2019-nCoV.

- 5) Information regarding any passenger who travels to another District will be immediately notified to the concerned District Health authority and SSU.
- 6) In case, Passengers under observation develop symptoms suggestive of ARI/ILI, S/he has to be shifted to identified health facility with isolation unit (as transmission pattern of the virus is still unclear). Laboratory guidelines will be shared soon.
- 7) Daily follow up of Passengers under observation to be continued for 28 days starting from the date of last exposure/departure.
- 8) If any passenger is not traceable initially or during any duration while being followed up should be immediately notified to SSU/CSU.
- 9) Daily health status to be shared with SSU every day by 12:00 PM.

*Currently China only.

Advisory:

1. Format C to be sent positively every day to idsnp-npo@nic.in by 12:00 pm including 'Nil' report.
2. The passenger has to be observed from 28 days from the day of possible exposure/arrival to India.
3. **In case passenger develop any symptom, s/he will be requested to wear amask. Health care provider will arrange for the transfer of such patient from home to isolation facility. During the procedure, standard infection control practice for eg. wearing mask and hand washing should be performed by Health care providers.**

Interim Guidelines for community based Tracing and Management of Contacts for 2019- nCoV Case

Contact tracing: the process

Contact tracing is the process of identifying, assessing, and managing people who have been exposed to a disease to prevent onward transmission. People who may have been exposed to 2019-nCoV are to be followed for 28 days from the date of the probable last exposure/arrival from 2019-nCoV affected countries.

Any person who has had contact with a patient under investigation/treatment for suspected, probable or confirmed case of 2019-nCoV (refer WHO case definition) should be carefully monitored for the appearance of symptoms of 2019-nCoV.

Contact is defined as:

Anyone who provided care for the suspect or confirmed case, including a health care worker or family member, or who had other similarly close physical contact;

Anyone who stayed at the same place (e.g. lived with, visited) while the suspect or confirmed case was symptomatic.

Note: This should include health workers (including those involved in cleaning, waste management, laboratory technicians, healthcare workers, etc.)

If symptoms of 2019-nCoV appear within the first 28 days following the contact, the individual should be considered a probable case and reported through IDSP network to NCDC.

Community based Contact Tracing Implementation Guidelines

1. As soon as the single event (identification of suspect or confirmed case) is detected, contact tracing must be aggressively implemented (preferably to be completed within 48 hours).
2. The contact tracing shall preferably be done by visiting the local residence of the contact(s) by a Health Personnel. Other methods of communication like telephone may be used in certain circumstances or for follow-up.
3. On meeting the 'contact person' the visiting Health Personnel should introduce him (her)-self, explain the purpose of contact tracing and should collect data in the prescribed format (Annex).
4. Contact tracing must include identification of extended social networks and travel history of cases during the 28 days after onset of illness.
5. Contacts of confirmed cases should be traced and monitored for at least 28 days after the last exposure to the case patient for evidence of 2019-nCoV symptoms as per case definition.
6. Information about contacts can be obtained from: a. Patient, his/her family members, persons at patient's workplace or school associates, or b. others with knowledge about the patient's recent activities and travels.

7. Case wise Line-listing (Performa enclosed at Annex) of all exposed contacts shall be maintained with the following information: a. demographic information, b. date of last exposure or date of contact with the case patient, c. date of onset of fever or other symptoms developed, if any.

Advisory for Symptomatic contacts:

Refer persons with fever and cough and history of contact with a confirmed case within last 28 days for:

1. Isolation for strict infection control
2. Collection and transportation of sample for laboratory testing at designated lab.
3. Appropriate medical care for management of patient.

Depending on the severity of illness, acceptability, and availability of hospital beds, ill contacts may be isolated at a health-care facility or at home while awaiting test-results. However, once confirmed by laboratory, such cases must be managed in a designated health facility.

Advisory for Asymptomatic Contacts:

- Remain at home (home quarantine) for at least 28 days after the last exposure with the case.
- Initiate self-health monitoring for the development of fever or cough within 28 days after the last exposure to the case patient and maintain a list of contacts on daily basis.
- If above described symptoms develop, person must put on the mask, self-isolate him in the home and inform the identified Local Health Official/District CMO/DSO by telephone and further management must be done at a designated health facility.
- Active monitoring (e.g. daily visits or telephone calls) for 28 days after the last exposure shall be done by the identified Local Health Officials.

Health and safety precautions for the contact tracing official:

- Maintain a distance of at least 2 meter (as advised by WHO*) from the contact.
- Personal protective equipment (PPE) is not needed for Contact Follow-up Teams and should not be worn. However, masks should be worn by the contact tracing team.
- Maintain standard infection prevention and control measures and hand washing should be performed.

ANNEXURE 1 – SELF DECLARATION FORM



Ministry of Health and Family Welfare
Government of India

SELF REPORTING FORM

FOR ALL TRAVELLERS ARRIVING from 2019-nCoV affected countries* (TO BE PRESENTED AT THE IMMIGRATION COUNTER)

All persons coming to India from 2019-nCoV affected countries are required to fill-up this proforma. You are requested to provide the following information to safeguard your own health.

Personal Information

1	Name of the passenger			
	Seat No.		3. Flight No.	
4	Passport No.			
5	Date of Arrival			
6	Port of origin of Journey			
7	Port of final destination			

Contact Address in India for Indian Nationals:

1	House Number	
2	Street/ Village	
3	Tehsil	
4	District/ City	
5	State	
6	Pin	
7	Residence Number	
8	Mobile Number	
9	E mail ID	

(PART-A)

- I) During your visit to China, what all cities did you visit? _____
- II) Have you visited Wuhan city in Hubei province, China in last 14 days? Yes/ No
- If yes, period and duration _____
- III) In the Last 14 days during your visit, did you#:
- Visit any sea food/animal food market? Yes / No
 - Come in close contact of any person suffering from Fever and cough? Yes / No
 - Visit any health facility in China? Yes / No
- IV) Are you suffering from any of the following symptoms**
- Fever Yes No
 - Cough Yes No
 - Respiratory distress Yes No

Signature of the passenger

*CHINA

If answer to any of the above questions is "yes", Consider them as close contact.

**If answer to any of the above questions is "yes", please present yourself to the Airport Health counter for preliminary screening.

In case you develop symptoms such as fever and cough within 28 days of leaving this airport, restrict your outdoor movement and contact MoHFW's 24 hours helpline number 011-23978046. Call operator will tell you whom to contact further. In the meanwhile, keep yourself isolated in your house/room.

ANNEXURE 3

Format A - for surveillance of Passenger for 2019-nCoV (To be filled by District Surveillance Unit and send to SSU daily)

Full Name:																																																																																																																									
Age in years:																																																																																																																									
Gender:																																																																																																																									
Passport number:																																																																																																																									
Complete Address (For Indian passport holders)																																																																																																																									
Place of Stay during visit to India (For International tourists)																																																																																																																									
Landline number with STD code (In India)																																																																																																																									
Mobile number (In India)																																																																																																																									
Countries visited in last 14 days																																																																																																																									
Date of arrival from 2019-nCoV affected country to India																																																																																																																									
Passenger History:																																																																																																																									
Clinical details: write 'N' for No & 'Y' for Yes																																																																																																																									
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In case of any symptoms the passenger should be immediately isolated at designated hospital following standard Infection, control practices.																																																																																																																									

Filled by.....

ANNEXURE 4

Format B (Linelist of Format A from all DSU to be updated on daily basis by SSU)

NAME OF State:

LINELIST FORMAT FOR REPORTING OF DAILY HEALTH STATUS OF PASSENGERS UNDER OBSERVATION												
Sl.No.	Name	Age	Gender	Address	Phone	District	Country of visit	Date of departure from affected country	Date of receipt of information	Observation started from	Today's Health status	Comments

- New passengers enrolled for observation:
- Cumulative number of Passengers under observation:
- No. of passengers who have completed 28 days observation period:

ANNEXURE 5

FORMAT FOR DAILY REPORTING OF HEALTH STATUS OF PASSENGERS ARRIVING FROM 2019-nCoV AFFECTED COUNTRY.

Date:.....

Time:.....

S. No.	State	New passengers enrolled for observation	Cumulative number of Passengers under observation	No. of passengers who have completed 28 days observation period	Number of passengers found symptomatic & referred	Comments
1	A&N Island					
2	Andhra Pradesh					
3	Arunachal Pradesh					
4	Assam					
5	Bihar					
6	Chandigarh					
7	Chhattisgarh					
8	D N Haveli					
9	Daman & Diu					
10	Delhi					
11	Goa					
12	Gujarat					
13	Haryana					
14	Himachal Pradesh					
15	Jammu & Kashmir					
16	Jharkhand					
17	Karnataka					
18	Kerala					
19	Lakshadweep					
20	Madhya Pradesh					
21	Maharashtra					
22	Manipur					
23	Meghalaya					
24	Mizoram					
25	Nagaland					
26	Odisha					
27	Puducherry					
28	Punjab					
29	Rajasthan					
30	Sikkim					
31	Tamil Nadu					

32	Telangana					
33	Tripura					
34	Uttar Pradesh					
35	Uttarakhand					
36	West Bengal					
	TOTAL					

ANNEXURE 6

Suspect Case Referral Form: For any passenger developing symptom as per case definition of 2019-nCoV, requisite information will be shared to NCDC/CSU/SSU immediately

Full Name:	
Age in years:	
Gender:	
Passport number:	
Complete Address (For Indian passport holders)	
Place of Stay during visit (For International tourists)	
Landline number with STD code (In India)	
Mobile number (In India)	
Countries visited in last 28 days	
Date of departure from 2019-nCoV affected country	
Passenger Clinical History:	
Travel History after arrival in India:	
Name & Contact details of the Hospital where currently admitted:	