High SARS-CoV-2 Attack Rate Following Exposure at a Choir Practice

CDC Morbidity and Mortality Weekly Report (MMWR) – May 15, 2020
From The New York Times: How Coronavirus Attacks the Body

[Link to article]

New Admission & Readmission

**COVID-19 status is unknown = Observation (aka Quarantine)**

- Actively screen at time of admission and at least daily for fever and respiratory symptoms
- Options include:
  - Separate observation area OR
  - Single-person room
- All recommended PPE to be worn for Transmission Based Precautions for COVID-19.
- Transferred out of observation after 14 days if afebrile & no symptoms
- Can consider testing to increase certainty

**COVID-19 status is Positive (Case) or has symptoms (Suspected) = Isolation**

- Facility can accept residents as long as it can follow Transmission Base Precautions for COVID-19
- Ideally placed in private room with own bathroom and ideally cared for in a dedicated unit/section of facility with dedicated HCP
- Increased monitoring of ill residents 3x a day with symptom screen, vital signs, pulse ox and respiratory exam
- Can Discontinue Transmission-Based Precautions either using test-based or symptom based strategy.
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**Remember:**

- PPE must be donned correctly before entering the patient area (e.g., isolation room, unit if cohorting).
- PPE must remain in place and be worn correctly for the duration of work in potentially contaminated areas. PPE should not be adjusted (e.g., retying gown, adjusting respirator/facemask) during patient care.
- PPE must be removed slowly and deliberately in a sequence that prevents self-contamination. A step-by-step process should be developed and used during training and patient care.

**Preferred PPE – Use:** N95 or Higher Respirator

- Face shield or goggles
- One pair of clean, non-sterile gloves

**Acceptable Alternative PPE – Use:** Facemask

- Face shield or goggles
- One pair of clean, non-sterile gloves

N95 or higher respirator

When respirators are not available, use the best available alternative, like a facemask.

Facemask

N95 or higher respirators are preferred but facemasks are an acceptable alternative.
Transferring Resident - Suspected or Confirmed COVID-19 Case to a Hospital

- Contact local health department
- If symptoms mild and patient does not require hospital level care then can isolate in facility as long as facility can adhere to infection prevention and control practices recommended for care of resident with COVID-19
- If more severe symptoms develop and require transfer to a hospital for a higher level of care – inform EMS and receiving facility of resident’s diagnosis.
- Pending transfer or discharge, place a facemask on the resident and isolate him/her in a room with the door closed