EASA SD No.: 2020-01



Safety Directive under Article 76(6)(b) of Regulation (EU) No 2018/1139

SD No.: 2020-01

Issued: 13 March 2020

Note: This safety directive (SD) reacting to an urgent safety problem is issued by the Agency in accordance with Art. 76 (6) (b) of Regulation (EU) No 2018/1139.

Subject: Operational measures to prevent the spread of Coronavirus 'SARS-CoV-2'

infection

Effective Date: 16 March 2020

Supersedure: Not applicable

Росавиация

BX-23888 18.03.2020

Applicability:

National Aviation Authorities (NAAs) responsible for the certification and oversight of aircraft operators involved in commercial air transport of passengers in accordance with Commission Regulation (EU) 965/2012.

Definitions:

Airports located in affected areas with high risk of transmission of the CoViD-19 infection are airports listed in Annex 1 to this Safety Directive. This Annex 1 is developed in coordination with Member States and based on the information from World Health Organization (WHO), European Centre for Disease Prevention and Control (ECDC) and other reputable public health institutes. This list will be regularly updated and available in the EASA Safety Publication Tool and on the <u>EASA</u> website.

Reason:

The outbreak of novel coronavirus disease (CoViD-19) in the city of Wuhan, People's Republic of China (PRC) that is caused by SARS-CoV-2 has spread rapidly in China and worldwide, and has been qualified by WHO as a pandemic on 11 March 2020. Based on the reports published by the WHO, the International Civil Aviation Organization (ICAO) and the ECDC, EASA issued the Safety Information Bulletin (SIB) 2020-02 (later revised, now at Revision 2), providing recommendations to the NAAs and Aircraft and Aerodrome operators in order to reduce the risk of spreading of the SARS-CoV-2.

Since that SIB was issued, the situation concerning CoViD-19 across Europe has rapidly evolved with the development of European clusters of the virus. The spread of SARS-CoV-2 is still on an increasing curve and the peak values as estimated by DG SANTE and ECDC have not yet been reached. Furthermore, the current scientific evidence show a potential persistence of SARS-CoV-2 on surfaces up to several days depending on the environment.



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EASA SD No.: 2020-01

For the reasons described above and in order to prevent the spread of the SARS-CoV-2 from potentially contaminated surfaces inside aircraft operated by operators certified in accordance with Commission Regulation (EU) 965/2012, EASA has decided to issue this Safety Directive which:

- (1) determines the safety objective to be achieved by the NAAs in respect of those operators, and
- (2) recommends corrective actions to be taken to achieve that objective.

In parallel EASA has issued, in accordance with Article Art. 76 (6) (a) of Regulation (EU) No 2018/1139, an equivalent Safety Directive 2020-02 addressed to Third Country Operators (TCOs) authorised by EASA pursuant to Commission Regulation (EU) No 452/2014 to perform commercial air transport operations into, within or out of the territory subject to the provisions of the Treaty on European Union.

Safety Objective(s) to be achieved:

To minimise the risks to passengers and to the general public, due to operations from airports located in affected areas with high risk of transmission of the CoViD-19 infection by aircraft operators certified in accordance with Commission Regulation (EU) 965/2012.

Recommended Corrective Action(s) to be taken:

- (1) NAAs to ensure, by taking the appropriate national measures, that aircraft operators under their oversight and involved in commercial air transport of passengers in accordance with Commission Regulation (EU) 965/2012 from an airport located in an affected area with high risk of transmission of the CoViD-19 infection:
 - (1.1) Clean and fully disinfect the aircraft using substances suitable for aviation use after each flight coming from an airport located in an affected area with high risk of transmission of the CoViD-19 infection (see Note 1 of this SD).

Note 1: Such as substances containing 62%-71% ethanol alcohol, 0.5% hydrogen peroxide, or 0.1% sodium hypochlorite. Suitability of the substances should be checked against the aircraft manufacturers' documentation.

The operator may implement different disinfection frequency based on a risk assessment which takes into account the operational circumstances and the duration of the disinfecting effects of the substance used. In such a case, the operator shall ensure that the aircraft is fully cleaned and disinfected not later than 24 hours after the departure from an airport located in an affected area with high risk of transmission of the CoViD-19 infection.

(1.2) Equip the aircraft with one or more Universal Precaution Kits. Such kits should be used to protect crew members who are assisting potentially infectious cases of suspected CoViD-19 and in cleaning up and correctly discarding any potentially infectious contents.

Information on the actions taken:

(2) NAAs shall take measures to achieve the determined safety objective within 7 days from the effective date of this Safety Directive and inform EASA of those measures.



Page 2 of 3

EASA SD No.: 2020-01

Ref. Publications:

EASA SD 2020-02 dated 13 March 2020.

Remarks:

1. Enquiries regarding this SD and the information on the actions taken to implement it should be referred to the EASA Programming and Continued Airworthiness Information Section, E-mail: ADs@easa.europa.eu.



Annex 1 - List of airports located in affected areas with high risk of transmission of the CoViD-19 infection

Issue: 01

Issue Date: 13 March 2020. Effective Date: 16 March 2020

This Annex is developed in coordination with EASA Member States and based on the information from WHO, ECDC and other reputable public health institutes.

A. EU Member States, Switzerland, Norway, Iceland

State	Regions/Airports				
Will be updated on 16 March 2020	Will be updated on 16 March 2020				

B. Third countries

State	Regions/Airports			
China	All airports			
South Korea	All airports			
Iran	All Airports			



International Civil Aviation Organization

ELECTRONIC BULLETIN

For information only

EB 2020/21 13 March 2020

REQUEST TO LIMIT INFORMATION PROVIDED UNDER THE AIRAC SYSTEM

- 1. The outbreak of COVID-19 was declared to constitute a Public Health Emergency of International Concern (PHEIC) on 30 January 2020. As of 7 March 2020, the global number of confirmed cases of COVID-19 has surpassed 100 000. The World Health Organization (WHO) has called on all countries to stop, contain, control, delay and reduce the impact of the virus at every opportunity (https://www.who.int/news-room/detail/07-03-2020-who-statement-on-cases-of-covid-19-surpassing-100-000). On 11 March 2020, WHO announced that "COVID-19 can be characterized as a pandemic" and called for stronger measures to contain the disease (https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---11-march-2020).
 - 2. The International Civil Aviation Organization (ICAO) is working closely with WHO in providing updated advice regarding COVID-19 and civil aviation. In relation with international travel health related issues, one that WHO and ICAO have also signed a joint Statement (https://www.icao.int/Security/COVID-19/Pages/Statements.aspx) which we remind all stakeholders of the importance of following existing regulations and guidance, particularly the relevant standards contained within the various Annexes to the Convention on International Civil Aviation and the International Health Regulations (2005).
- 3. A Advice on reducing the risk of the spread of COVID-19 in aviation is available on the Collaborative Arrangement for the Prevention and Management of Public Health Events in Civil Aviation (CAPSCA) website (https://www.capsca.org/CoronaVirusRefs.html).
- 4. The ICAO Council affirmed the urgent need to reduce the public health risk of the spread of COVID-19 by air transport and protect the health of air travellers and aviation personnel. Furthermore, the Council urged ICAO Member States and stakeholders to take the necessary actions to maintain the sustainability of air transport and the highest level of safety (https://www.icao.int/Newsroom/Pages/ICAO-Council-adopts-covid.aspx).
 - 5. Due to the COVID-19 outbreak, data houses have implemented contingency plans to assure the production and delivery of aeronautical data products. However, these contingency plans have limited their capacity and therefore States are advised to limit, as much as possible, the information provided under the Aeronautical Information Regulation and Control (AIRAC) system. With this request, ICAO intends to minimize the impact of the current situation on the aviation industry and ensure that changes are processed and made available in time for the continuing safe air operations.

Issued under the authority of the Secretary General

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UNITING AVIATION

Coronavirus disease 2019 (COVID-19) Situation Report – 55

Data as reported by national authorities by 10 AM CET 15 March 2020

HIGHLIGHTS

- Nine new countries/territories/areas (African Region [7], European Region [1] and Region of Americas [1]) in have reported cases of COVID-19 in the past 24 hours.
- A WHO high-level technical mission concluded a visit to Iraq to support the Iraqi Ministry of Health in their COVID-19 prevention and containment measures. WHO is working around the clock to establish 3 negative-pressure [contagious respiratory disease isolation] rooms in Baghdad, Erbil and Basra to accommodate patients who might require more sophisticated medical treatment. For detailed information, please see here.

SITUATION IN NUMBERS total and new cases in last 24 hours

Globally

153 517 confirmed (10 982 new) 5735 deaths (343 new)

China

81 048 confirmed (27 new) 3204 deaths (10 new)

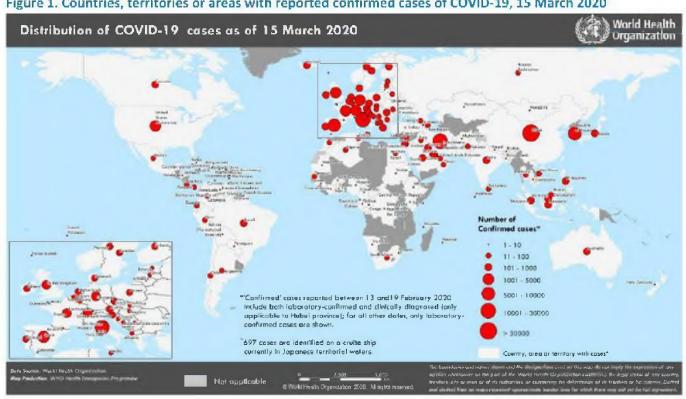
Outside of China

72 469 confirmed (10 955) 2531 deaths (333 new) 143 countries/territories/ areas (09 new)

WHO RISK ASSESSMENT

China Very High Regional Level Very High Global Level Very High





SURVEILLANCE

Table 1. Confirmed and suspected cases of COVID-19 acute respiratory disease reported by provinces, regions and cities in China, Data as of 15 March 2020

Province/ Region/ City	Born destroy		In last 24 hours	Cumulative		
	(10,000s)	Confirmed cases	Suspected cases	Deaths	Confirmed cases	Deaths
Hubei	5917	4	1	10	67794	3085
Guangdong	11346	1	1	0	1357	8
Henan	9605	0	0	0	1273	22
Zhejiang	5737	4	2	0	1231	1
Hunan	6899	D	0	0	1018	4
Anhuí	6324	0	0	0	990	6
Jiangxi	4648	0	0	0	935	1
Shandong	10047	0	0	0	760	7
Jiangsu	8051	0	1	0	631	0
Chongqing	3102	0	0	0	576	6
Sichuan	8341	0	0	0	539	3
Heilongjiang	3773	0	0	0	482	13
Beijing	2154	5	9	0	442	8
Shanghai	2424	3	24	0	353	3
Hebei	7556	0	0	0	318	6
Fujian	3941	0	0	0	296	1
Guangxi	4926	0	0	0	252	2
Shaanxi	3864	0	0	0	245	2
Yunnan	4830	0	0	0	174	2
Hainan	934	0	0	0	168	6
Guizhou	3600	0	0	0	146	2
Hong Kong SAR	745	4	0	0	141	4
Tianjin	1560	0	1	0	136	3
Shanxi	3718	0	0	0	133	0
Gansu	2637	3	0	0	132	2
Liaoning	4359	0	0	0	125	1
Jilin	2704	0	0	0	93	1
Xinjiang	2487	0	0	0	76	3
Ningxia	688	0	0	0	75	0
Inner Mongolia	2534	0	0	0	75	1
Taipel and environs	2359	3	0	0	53	1
Qinghai	603	0	0	0	18	0
Macao SAR	66	0	0	0	10	0
Xizang	344	0	0	0	1	0
Total	142823	27	39	10	81048	3204

Table 2. Countries, territories or areas outside China with reported laboratory-confirmed COVID-19 cases and deaths. Data as of 15 March 2020

Reporting Country/ Territory/Area [†]	Total confirmed t cases	Total confirmed new cases ¹	Total deaths	Total new deaths ¹	Transmission classification§	Days since last reported case
Western Pacific Regio						
Republic of Korea	8162	76	75	3	Local transmission	0
Japan	780	64	22	1	Local transmission	0
Australia	249	52	3	0	Local transmission	0
Malaysia	238	41	0	0	Local transmission	0
Singapore	212	12	0	0	Local transmission	0
Philippines	111	47	6	4	Local transmission	0
Viet Nam	53	5	0	0	Local transmission	0
Brunei Darussalam	40	15	0	0	Local transmission	0
Cambodia	7	0	0	0	Local transmission	1
New Zealand	6	0	0	0	Local transmission	1
Mongolia	1	0	0	0	Imported cases only	5
Territories			-		Imported cases of ity	
French Polynesia	3	2	0	0	Imported cases only	0
European Region	1 3		U	U	imported cases only	
Italy	21157	3497	1441	173	Local transmission	0
	5753	1522	136	16	Local transmission	0
Spain France	4469	829	91	12	Local transmission	0
	3795	733	8		Local transmission	0
Germany Switzerland	1359	234	11	5	Local transmission	0
						0
The United Kingdom Netherlands	1144	342	21	11	Local transmission	
	959	155	12	2	Local transmission	0
Sweden	924	149	0	0	Local transmission	0
Norway	907	157	1	0	Local transmission	0
Denmark	827	26	0	0	Local transmission	0
Austria	800	296	1	0	Local transmission	0
Belgium	689	90	0	0	Local transmission	0
Greece	228	130	2	1	Local transmission	0
Czechia	214	64	0	0	Local transmission	0
Finland	210	101	0	0	Local transmission	0
Israel	178	78	0	0	Local transmission	0
Slovenia	141	0	0	0	Local transmission	1
Iceland	138	77	0	0	Local transmission	0
Ireland -	129	39	2	1	Local transmission	0
Romania	123	59	0	0	Local transmission	0
Portugal	112	0	0	0	Local transmission	1
Poland	111	47	3	2	Local transmission	0
San Marino	92	26	5	3	Local transmission	0
Estonia	79	0	0	0	Local transmission	1
Slovakia	44	14	0	0	Local transmission	0
Bulgaria	43	36	2	1	Local transmission	0
Serbia	41	10	0	0	Local transmission	0
Albania	38	5	1	0	Local transmission	0
Luxembourg	38	0	1	0	Local transmission	1
Croatia	37	10	0	0	Local transmission	0
Russian Federation	34	0	0	0	Imported cases only	2
Hungary	32	13	0	0	Local transmission	0
Georgia	30	5	0	0	Imported cases only	0
Latvia	30	14	0	0	Imported cases only	0

Belarus	21	0	0	0	Local transmission	1
Cyprus	21	7	0	0	Imported cases only	0
Azerbaijan	19	8	0	0	Imported cases only	0
Bosnia and						
Herzegovina	18	7	0	0	Local transmission	0
North Macedonia	13	4	0	0	Local transmission	0
Malta	12	0	0	0	Imported cases only	2
Republic of Moldova	12	4	0	0	Imported cases only	0
Lithuania	9	3	0	0	Imported cases only	0
Armenia	8	0	0	0	Local transmission	1
Kazakhstan	6	6	0	0	Imported cases only	0
Turkey	5	0	0	0	Imported cases only	1
Liechtenstein	4	0	0	0	Imported cases only	2
Ukraine	3	0	1	0	Local transmission	1
Andorra	2	0	0	0	Imported cases only	1
Monaco	2	0	0	0	Under investigation	1
Holy See	1	0	0	0	Under investigation	9
Territories	1	U		U	Order investigation	
Faroe Islands	9	6	0	0	Imported cases only	0
Gibraltar	1	0	0	0	Under investigation	11
Guernsey	1	0	0	0	Imported cases only	5
Jersey	2	0	0	0	Imported cases only	2
South-East Asia Region			3	U	Imported educationity	
Indonesia	117	48	4	1	Local transmission	0
India	107	25	2	0	Local transmission	0
Thailand	75	0	1	0	Local transmission	2
Sri Lanka	11	5	0	0	Local transmission	0
Maldives	10	1	0	0	Local transmission	0
Bangladesh	3	0	0	0	Local transmission	6
Bhutan	1	0	0	0	Imported cases only	9
					•	
Nepai Eastern Mediterranean	1	0	0	0	Imported cases only	51
	Region		1		T T	
Iran (Islamic Republic	12729	1365	CDC	0.4	Local transmission	0
of)		1365	608	94		0
Qatar	337	75	0	0	Local transmission	0
Bahrain	211	1	0	0	Local transmission	0
Kuwait	112	12	0	0	Local transmission	0
Saudi Arabia	103	41	0	0	Local transmission	0
Egypt	93	0	2	0	Local transmission	1
Iraq	93	0	9	0	Local transmission	1
Lebanon	93	16	3	0	Local transmission	0
United Arab Emirates	85	0	0	0	Local transmission	2
Pakistan	28	7	0	0	Imported cases only	0
Oman	20	1	0	0	Imported cases only	0
Morocco	18	11	1	0	Local transmission	0
Tunisia	16	0	0	0	Local transmission	1
Afghanistan	10	3	0	0	Imported cases only	0
Jordan	1	0	0	0	Imported cases only	12
Sudan	1	0	0	0	Imported cases only	1
Territories"						
occupied Palestinian						
territory	38	3	0	0	Local transmission	1
Region of the Americas						
United States of	1678	0	41	0	Local transmission	1

America						
Canada	244	68	1	0	Local transmission	0
Brazil	121	23	0	0	Local transmission	0
Chile	61	18	0	0	Local transmission	0
Argentina	45	11	2	0	Local transmission	0
Peru	43	15	0	0	Local transmission	0
Mexico	41	15	0	0	Imported cases only	0
Panama	27	0	1	0	Local transmission	1
Colombia	24	8	0	0	Local transmission	0
Costa Rica	23	0	0	0	Local transmission	1
Ecuador	23	0	0	0	Local transmission	1
Jamaica	8	1	0	0	Local transmission	0
Guyana	1	0	1	0	Imported cases only	2
Paraguay	6	0	0	0	Local transmission	1
Dominican Republic	5	0	0	0	Imported cases only	5
Cuba	4	0	0	0	Imported cases only	1
Bolivia (Plurinational	4	0	V	- 0	imported cases only	1
State of)	3	0	0	0	Imported cases only	2
Puerto Rico	3	0	0	0	Imported cases only	1
Honduras	2	0	0	0		3
	۷	U	U	U	Imported cases only	3
Venezuela (Bolivarian	ר		0		Important concentration	4
Republic of)	2	0	0	0	Imported cases only	1
Antigua and Barbuda	1	0	0	0	Imported cases only	1
Saint Vincent and the	4			_		2
Grenadines	1	0	0	0	Imported cases only	2
Trinidad and Tobago	1	0	0	0	Imported cases only	1
Territories French Guiana	7	1	0	0	Imported cases only	2
	10	4	0	0	Imported cases only	0
Martinique Saint Martin			0		Imported cases only	12
	2	0		0	Under investigation	
Saint Barthelemy	1	0	0	0	Under investigation	12
Cayman Islands	1	0	0	0	Imported cases only	1
Guadeloupe	3	2	0	0	Imported cases only	0
Curação	2	2	0	0	Imported cases only	0
African Region			Ť.	,	-	
South Africa	38	21	0	0	Local transmission	0
Algeria	37	11	3	1	Local transmission	0
Senegal	21	11	0	0	Local transmission	0
Burkina Faso	3	1	0	0	Imported cases only	0
Cameroon	3	1	0	0	Local transmission	0
Cote d'Ivoire	3	2	0	0	Imported cases only	0
Democratic Republic						
of the Congo	2	0	0	0	Imported cases only	1
Ghana	2	1	0	0	Imported cases only	0
Namibia	2	2	0	0	Imported cases only	0
Nigeria	2	0	0	0	Imported cases only	6
Central African						
Republic	1	1	0	0	Imported cases only	0
Congo	1	1	0	0	Imported cases only	0
Equatorial Guinea	1	1	0	0	Imported cases only	0
	1	1	0	0	Imported cases only	0
Eswatini					,	
	1	0	0	0	Imported cases only	1
Eswatini Ethiopia Gabon	1	0	0	0	Imported cases only Imported cases only	1 1

Kenya	1	0	0	0	Imported cases only	1
Mauritania	1	1	0	0	Imported cases only	0
Togo	1	0	0	0	Imported cases only	8
Territories"						
Réunion	6	1	0	0	Imported cases only	0
Mayotte	1	1	0	0	Imported cases only	0
Subtotal for all						
regions	71772	10955	2524	333		
International						
conveyance	697	0	7	0	Local transmission	1
(Diamond Princess)						
Grand total	72469	10955	2531	333		

Numbers include both domestic and repatriated cases

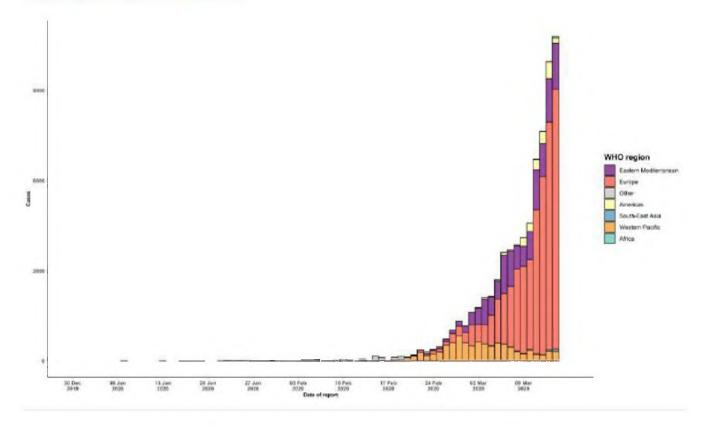
[§]Transmission classification is based on WHO analysis of available official data and may be subject to reclassification as additional data become available. Countries/territories/areas experiencing multiple types of transmission are classified in the highest category for which there is evidence; they may be removed from a given category if interruption of transmission can be demonstrated. It should be noted that even within categories, different countries/territories/areas may have differing degrees of transmission as indicated by the differing numbers of cases and other factors. Not all locations within a given country/territory/area are equally affected.

Terms

- Community transmission is evidenced by the inability to relate confirmed cases through chains of transmission for a large number of cases, or by
 increasing positive tests through sentinel samples (routine systematic testing of respiratory samples from established laboratories).
- Local transmission indicates locations where the source of infection is within the reporting location.
- Imported cases only indicates locations where all cases have been acquired outside the location of reporting.
- Under Investigation indicates locations where type of transmission has not been determined for any cases.
- Interrupted transmission indicates locations where interruption of transmission has been demonstrated (details to be determined)
- ** "Territories" include territories, areas, overseas dependencies and other jurisdictions of similar status

New countries/territories/areas are shown in red.

Figure 2. Epidemic curve of confirmed COVID-19 cases reported outside of China (n=72 469), by date of report and WHO region through 15 March 2020



The designations employed and the presentation of the material in this publication do not imply the expression of any opinion whatsoever on the part of WHO concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement. *Case classifications are based on WHO case definitions for COVID-19.

¹ Due to a retrospective data consolidation exercise, some numbers may not reflect the exact difference between yesterday's and today's totals.

STRATEGIC OBJECTIVES

WHO's strategic objectives for this response are to:

- Interrupt human-to-human transmission including reducing secondary infections among close contacts and health care workers, preventing transmission amplification events, and preventing further international spread*;
- Identify, isolate and care for patients early, including providing optimized care for infected patients;
- Identify and reduce transmission from the animal source;
- Address crucial unknowns regarding clinical severity, extent of transmission and infection, treatment
 options, and accelerate the development of diagnostics, therapeutics and vaccines;
- Communicate critical risk and event information to all communities and counter misinformation;
- Minimize social and economic impact through multisectoral partnerships.

*This can be achieved through a combination of public health measures, such as rapid identification, diagnosis and management of the cases, identification and follow up of the contacts, infection prevention and control in health care settings, implementation of health measures for travelers, awareness-raising in the population and risk communication.

PREPAREDNESS AND RESPONSE

- To view all technical guidance documents regarding COVID-19, please go to this webpage.
- WHO has developed interim guidance for laboratory diagnosis, advice on the use of masks during home care and
 in health care settings in the context of the novel coronavirus (2019-nCoV) outbreak, clinical management,
 infection prevention and control in health care settings, home care for patients with suspected novel
 coronavirus, risk communication and community engagement and Global Surveillance for human infection with
 novel coronavirus (2019-nCoV).
- WHO is working closely with International Air Transport Association (IATA) and have jointly developed a
 guidance document to provide advice to cabin crew and airport workers, based on country queries. The
 guidance can be found on the <u>IATA webpage</u>.
- WHO has been in regular and direct contact with Member States where cases have been reported. WHO is also
 informing other countries about the situation and providing support as requested.
- WHO is working with its networks of researchers and other experts to coordinate global work on surveillance, epidemiology, mathematical modelling, diagnostics and virology, clinical care and treatment, infection prevention and control, and risk communication. WHO has issued interim guidance for countries, which are updated regularly.
- WHO has prepared a <u>disease commodity package</u> that includes an essential list of biomedical equipment, medicines and supplies necessary to care for patients with 2019-nCoV.
- WHO has provided recommendations to reduce risk of <u>transmission from animals to humans</u>.
- WHO has published an <u>updated advice for international traffic in relation to the outbreak of the novel</u> coronavirus 2019-nCoV.
- WHO has activated the R&D blueprint to accelerate diagnostics, vaccines, and therapeutics.
- OpenWHO is an interactive, web-based, knowledge-transfer platform offering online courses to improve the
 response to health emergencies. <u>COVID-19 courses can be found here</u>. Specifically, WHO has developed online
 courses on the following topics: A general introduction to emerging respiratory viruses, including novel

- coronaviruses (available in Arabic, English, French, Chinese, Spanish, Portuguese, and Russian); Critical Care of Severe Acute Respiratory Infections (available in English and French); Health and safety briefing for respiratory diseases ePROTECT_(available in English, French, and Russian); Infection Prevention and Control for Novel Coronavirus (COVID-19) (available in English and Russian); and COVID-19 Operational Planning Guidelines and COVID-19 Partners Platform to support country preparedness and response.
- WHO is providing guidance on early investigations, which are critical in an outbreak of a new virus. The data collected from the protocols can be used to refine recommendations for surveillance and case definitions, to characterize the key epidemiological transmission features of COVID-19, help understand spread, severity, spectrum of disease, impact on the community and to inform operational models for implementation of countermeasures such as case isolation, contact tracing and isolation. Several protocols are available here. One such protocol is for the investigation of early COVID-19 cases and contacts (the "First Few X (FFX) Cases and contact investigation protocol for 2019-novel coronavirus (2019-nCoV) infection"). The protocol is designed to gain an early understanding of the key clinical, epidemiological and virological characteristics of the first cases of COVID-19 infection detected in any individual country, to inform the development and updating of public health guidance to manage cases and reduce the potential spread and impact of infection.

RECOMMENDATIONS AND ADVICE FOR THE PUBLIC

If you are not in an area where COVID-19 is spreading or have not travelled from an area where COVID-19 is spreading or have not been in contact with an infected patient, your risk of infection is low. It is understandable that you may feel anxious about the outbreak. Get the facts from reliable sources to help you accurately determine your risks so that you can take reasonable precautions (see Frequently Asked Questions). Seek guidance from WHO, your healthcare provider, your national public health authority or your employer for accurate information on COVID-19 and whether COVID-19 is circulating where you live. It is important to be informed of the situation and take appropriate measures to protect yourself and your family (see Protection measures for everyone).

If you are in an area where there are cases of COVID-19 you need to take the risk of infection seriously. Follow the advice of WHO and guidance issued by national and local health authorities. For most people, COVID-19 infection will cause mild illness however, it can make some people very ill and, in some people, it can be fatal. Older people, and those with pre-existing medical conditions (such as cardiovascular disease, chronic respiratory disease or diabetes) are at risk for severe disease (See <u>Protection measures for persons who are in or have recently visited (past 14 days) areas where COVID-19 is spreading</u>).

CASE DEFINITIONS

WHO periodically updates the <u>Global Surveillance for human infection with coronavirus disease (COVID-19)</u> document which includes case definitions.

For easy reference, case definitions are included below.

Suspect case

A. A patient with acute respiratory illness (fever and at least one sign/symptom of respiratory disease (e.g., cough, shortness of breath), AND with no other etiology that fully explains the clinical presentation AND a history of travel to or residence in a country/area or territory reporting local transmission (See situation report) of COVID-19 disease during the 14 days prior to symptom onset.

OR

B. A patient with any acute respiratory illness AND having been in contact with a confirmed or probable COVID-19 case (see definition of contact) in the last 14 days prior to onset of symptoms;

OR

C. A patient with severe acute respiratory infection (fever and at least one sign/symptom of respiratory disease (e.g., cough, shortness breath) AND requiring hospitalization AND with no other etiology that fully explains the clinical presentation.

Probable case

A suspect case for whom testing for COVID-19 is inconclusive.

Inconclusive being the result of the test reported by the laboratory

Confirmed case

A person with laboratory confirmation of COVID-19 infection, irrespective of clinical signs and symptoms.

. Information regarding laboratory guidance can be found here.