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Distributed by the NH Health Alert Network
Health.Alert@nh.gov
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Coronavirus Disease 2019 (COVID-19) Outbreak, Update # 10

Key Points and Recommendations:

- Access to COVID-19 testing has improved, but testing still potentially exposes the public and healthcare system to contagious cases and consumes limited personal protective equipment (PPE) and testing supplies. DPHS continues to recommend that you prioritize testing for symptomatic patients including:
 - Healthcare workers and first responders
 - Family members of healthcare workers and first responders (because it impacts the ability for these individuals to return to work)
 - Any person residing in, or who has worked or visited, a long-term care facility (LTCF) or healthcare setting
 - Patients hospitalized with fever or respiratory illness
 - Patients who may have had close contact with a large number of people
- When submitting specimens to the New Hampshire Public Health Laboratories (PHL) for COVID-19 testing, use the [new PHL requisition form](#), which includes checkboxes for prioritizing testing of select patients.
- Patients NOT in the above groups with mild illness consistent with COVID-19, who are not in need of medical care, do not need testing and can be managed at home. When patients are being managed at home for suspected or confirmed COVID-19:
 - Provide them the following information:
 - [Caring for yourself at home](#)
 - [Preventing the spread of COVID-19 in homes](#)
 - [Cleaning and disinfection guidance](#)
 - Instruct the person to self-isolate at home until they meet CDC's "7days/72hours" guidance for [discontinuation of home isolation for persons with COVID-19](#):
 - At least 7 days have passed *since symptoms first appeared*,
 - AND**
 - At least 72 hours (3 days) have passed *since recovery* – which is defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms.
- All asymptomatic close contacts of a person with confirmed COVID-19, or persons who are being presumptively managed as COVID-19 (without testing), should stay home (see [self-quarantine guide](#)) for 14 days from the last day of exposure; for a household contact this period would start from the last day a symptomatic person is on home-isolation. Close contacts must still quarantine for 14 days even if they are tested and found to be negative for COVID-19 during the quarantine period.
- For hospitalized patients diagnosed with COVID-19, providers should follow CDC's guidance for [discontinuation of transmission-based precautions](#).

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- The CDC provides clear guidance for the [management of healthcare personnel with potential exposure in a healthcare setting](#) to COVID-19, including recognition that work exclusions may disable critical healthcare services:
 - Facilities can consider allowing asymptomatic healthcare providers who have had an exposure to a patient with COVID-19 to continue to work if necessary due to staffing shortages or to maintain critical healthcare services.
 - These healthcare providers should be screened daily for fever or other symptoms each day prior to starting work.
 - Healthcare providers should wear a surgical facemask while at work for the 14 days after the exposure event.
 - If even mild COVID-19 symptoms develop, the provider must notify their supervisor or occupational health services and leave work immediately.
 - Any healthcare provider with confirmed or suspected COVID-19 who is returning to work should follow CDC's [criteria for return to work for healthcare personnel](#), which include the above "7/72" criteria PLUS:
 - Wear a facemask at all times while in the healthcare facility until all symptoms are completely resolved or until 14 days after illness onset, whichever is longer.
 - Be restricted from contact with severely immunocompromised patients (e.g., transplant, hematology-oncology) until 14 days after illness onset.
 - Adhere to hand hygiene, respiratory hygiene, and cough etiquette in [CDC's interim infection control guidance](#) (e.g., cover nose and mouth when coughing or sneezing, dispose of tissues in waste receptacles).
 - Self-monitor for symptoms, and seek re-evaluation from occupational health if respiratory symptoms recur or worsen
 - Given the increasing incidence of COVID-19 in communities and increasing chance of exposure in healthcare workers, we recommend that all healthcare facilities restrict visitors and implement a process of daily temperature and symptom screening in all employees prior to work.
 - We will continue to host weekly calls to answer healthcare provider and local partner questions about COVID-19. The next discussion will be held on **Thursday March 26th from 12:00 – 1:00 pm** (noon hour), and calls will recur weekly. Call-in information for the Q&A session is: **(833) 709-6685**; this is an operator assisted call so no conference code is needed.
 - **Clinicians should also join us this Thursday March 26th from 11:30 am – 12:00 pm** (prior to our weekly Q&A session) for a review of resources for guiding medical management of hospitalized patients with COVID-19.
 - Please also review the following information from the CDC:
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/therapeutic-options.html/>
 - To join the discussion via Zoom Webinar:
<https://zoom.us/j/794722881>
Call-in phone number: 1-646-558-8656
Webinar ID: 794 722 881

Situational Update:

New Hampshire has confirmed 101 individuals with COVID-19 in the counties of Rockingham (38), Grafton (20), Hillsborough (19), Carroll (7), Belknap (7), Merrimack (4), Strafford (4), Sullivan (1), and Cheshire (1). 56% of individuals report domestic or international travel prior to symptom onset, 14% are identified close contacts to COVID-19 cases, and 24% have no clear risk factors, indicating community-based transmission. Eleven people (11%) have been hospitalized, and one individual has died who was over the age of 60 years and had multiple underlying chronic health conditions. The most updated numbers and information can be found on our [NH COVID-19 website](#).

Additional Information

- NH DHHS COVID-19 website: <https://www.nh.gov/covid19/>
- CDC COVID-19 website: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
 - CDC Information for Healthcare Professionals:
<https://www.cdc.gov/coronavirus/2019-nCoV/guidance-hcp.html>
- World Health Organization COVID-19 website:
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

- For any questions regarding this notification, please call the NH DHHS, DPHS, Bureau of Infectious Disease Control at (603) 271-4496 during business hours (8:00 a.m. – 4:30 p.m.).
- If you are calling after hours or on the weekend, please call the New Hampshire Hospital switchboard at (603) 271-5300 and request the Public Health Professional on-call.
- To change your contact information in the NH Health Alert Network, contact Adnela Alic at (603) 271-7499 or email Adnela.Alic@dhhs.nh.gov.

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From: Benjamin P. Chan, MD, MPH, State Epidemiologist
Originating Agency: NH Department of Health and Human Services, Division of Public Health Services

Attachments: none