

Health Update:

Update: COVID-19 Interim Case Definition and Reporting Information for Healthcare Providers

April 10, 2020

This document will be updated as new information becomes available. The current version can always be viewed at <http://www.health.mo.gov>.

The Missouri Department of Health & Senior Services (DHSS) is now using four types of documents to provide important information to medical and public health professionals, and to other interested persons:

Health Alerts convey information of the highest level of importance which warrants immediate action or attention from Missouri health providers, emergency responders, public health agencies or the public.

Health Advisories provide important information for a specific incident or situation, including that impacting neighboring states; may not require immediate action.

Health Guidances contain comprehensive information pertaining to a particular disease or condition, and include recommendations, guidelines, etc. endorsed by DHSS.

Health Updates provide new or updated information on an incident or situation; can also provide information to update a previously sent Health Alert, Health Advisory, or Health Guidance; unlikely to require immediate action.

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SUBJECT: Update: COVID-19 Interim Case Definition and Reporting Information for Healthcare Providers

On Sunday, April 5, 2020, the interim position statement entitled "Standardized surveillance case definition and national notification for 2019 novel coronavirus disease (COVID-19)" was approved. This includes standardized criteria for case identification and classification for COVID-19, including asymptomatic infections caused by SARS-CoV-2. The case definition was developed by the Council of State and Territorial Epidemiologists (CSTE), the Association of Public Health Laboratories (APHL), and the Centers for Disease Control and Prevention (CDC). The CSTE position statement is available [here](#), and a quick reference chart is included as part of this Health Update (page 3).

Though the case definition is meant for public health surveillance purposes, both probable and confirmed cases investigations should follow the same guidelines regarding self-isolation and quarantine for close contacts as advised by public health authorities. All individuals with pending COVID-19 tests should be advised to self-isolate at least until the test results are received. Additionally, household and close contacts may be required to self-quarantine, dependent on their status as a critical infrastructure worker. See [CDC Interim Guidance for Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19](#).

Required Case and Associated Data Reporting

During this unprecedented public health emergency, ensuring accurate and timely surveillance is more important than ever. Without critical case information provided from healthcare partners, the COVID-19 response may be delayed or improperly targeted outside of geographic areas that most need resources.

Healthcare providers are required to report both suspected and confirmed COVID-19 cases to the Missouri Department of Health and Senior Services (DHSS), as described in the April 6, 2020 Health Update, *Reporting COVID-19 Cases*, (<https://health.mo.gov/emergencies/ert/alertsadvories/pdf/update4620.pdf>).

Note: Only single, COVID-19 death reports should be communicated to DHSS via phone as described in this document.

Due to the high volume of case reports, [COVID-19 case](#) reports should be transmitted to DHSS using the other methods of communication listed in the April 6, 2020 Health Update.

Required elements for case reporting, which are included in the DHSS CD-1 form (<https://health.mo.gov/living/healthcondiseases/communicable/communicabledisease/cdmanual/pdf/CD-1.pdf>), are outlined in 19 CSR 20-20.020 (<https://www.sos.mo.gov/cmsimages/adrules/csr/current/19csr/19c20-20.pdf>). These include:

- Patient name
- Home address with zip code
- Date of Birth
- Age
- Sex
- Race
- Home phone number
- Name of Disease
- Condition or finding diagnosed or suspected
- Date of onset of illness
- Name and address of treating facility (if any)
- Name and office address of attending physician
- Any appropriate laboratory results

*****Missouri healthcare providers and public health practitioners: Please contact your local public health agency or the Missouri Department of Health and Senior Services (DHSS), Bureau of Communicable Disease Control and Prevention (BCDCP) at 573-751-6113 with questions regarding this Update.*****

Public Health COVID-19 Case Classifications	
Confirmed	Meets confirmatory laboratory evidence.
Probable	Any of the following three options: <ul style="list-style-type: none"> Meets clinical criteria AND epidemiologic evidence with no confirmatory laboratory testing performed for COVID-19. Meets presumptive laboratory evidence AND either clinical criteria OR epidemiologic evidence. Meets vital records criteria with no confirmatory laboratory testing performed for COVID-19.
Classification Considerations	
Clinical Criteria	At least <u>two</u> of the following symptoms: fever (measured or subjective), chills, rigors, myalgia, headache, sore throat, new olfactory and taste disorder(s) OR At least <u>one</u> of the following symptoms: cough, shortness of breath, or difficulty breathing OR Severe respiratory illness with at least one of the following: Clinical or radiographic evidence of pneumonia Acute respiratory distress syndrome (ARDS). AND No alternative more likely diagnosis.
Laboratory Criteria Laboratory evidence using a method approved or authorized by the FDA or designated authority	Confirmatory laboratory evidence: Detection of SARS-CoV-2 RNA in a clinical specimen using a molecular amplification detection test Presumptive laboratory evidence: Detection of specific antigen in a clinical specimen Detection of specific antibody in serum, plasma, or whole blood indicative of a new or recent infection*
Epidemiologic Linkage One or more of the following exposures in the 14 days before onset of symptoms:	<ul style="list-style-type: none"> Close contact** with a confirmed or probable case of COVID-19 disease; Close contact** with a person with: <ul style="list-style-type: none"> clinically compatible illness AND linkage to a confirmed case of COVID-19 disease. Travel to or residence in an area with sustained, ongoing community transmission of SARS-CoV-2. Member of a risk cohort as defined by public health authorities during an outbreak.
Vital Records Criteria for Reporting	A death certificate that lists COVID-19 disease or SARS-CoV-2 as a cause of death or a significant condition contributing to death.

*serologic methods for diagnosis are currently being defined

**Close contact is defined as being within 6 feet for at least a period of 10 minutes to 30 minutes or more depending upon the exposure. In healthcare settings, this may be defined as exposures of greater than a few minutes or more. Data are insufficient to precisely define the duration of exposure that constitutes prolonged exposure and thus a close contact.