COVID-19 CASE INVESTIGATION OVERVIEW

Use this document to conduct a COVID-19 case investigation. For more information about coronavirus investigations, please refer to the NC CD Manual.

As this is a rapidly evolving situation, please ensure you are using the most current case definition and following current CDC and NC DPH recommendations. Current information can be found on the NCDHHS webpage.

For additional support, consult the NC Communicable Disease Branch at (919) 733-3419 (available 24/7).

TESTING AVAILABILITY

Commercial Laboratories	• **Commercial laboratory testing is available**. Prior authorization is **not** required for commercial laboratory testing. • Individuals will be considered a Person Under Investigation (PUI) and should be given the PUI Guidance at time of testing.

SLPH	• Clinicians can submit specimens to the State Laboratory of Public Health for persons with symptoms compatible with COVID-19 who are in one of the following categories:
	  ○ Hospitalized patients
	  ○ Healthcare workers or first responders
	  ○ Persons who live or have regular contact with a high-risk setting
	  ○ Persons who are at higher risk of severe illness and for whom a clinician has determined that results would inform clinical management
	  ○ Uninsured patients
	  ○ Post-mortem specimens from patients in whom COVID-19 was suspected but not confirmed prior to death
	• More information is available on the NCDHHS SLPH website
	• **Pre- approval is NOT required**

CASE INVESTIGATION

1. Review Lab Information	• Ensure lab criteria meets the case definition
	• Confirmed Case Definition
	  ○ Detection of SARS-CoV-2 RNA in a clinical specimen using a molecular amplification detection test approved or authorized by the FDA or designated authority.
	• Probable Case Definition
	  ○ Detection of SARS-CoV-2 in a respiratory specimen by antigen test approved or authorized by the FDA or designated authority.

2. Verify County of Residence	• If out of state, update address in Person tab, then assign to State Disease Registrar as "Does not meet." • CDB will ensure out of state notifications are sent to the appropriate state. • If resident of another county, reassign to that county in the Administrative Package. Call the NCEDSS Help Desk if assistance is needed with reassignment of the event.

3. Manage the Case	• Upon notification of a confirmed COVID-19 case in your county:
	  ○ Ensure the patient has been notified of their test results by communicating with their provider
	  ○ Ensure the patient is isolated either in the hospital or at home
	  ○ If at home:
	  ▪ Review the home care guidance
	  ▪ Conduct a needs assessment as described in the home care guidance prerequisites to ensure the patient can be cared for adequately at home
	• Inform the patient that they should isolate until they meet the criteria for discontinuation of isolation

	• Instruct persons who have had close contact with a confirmed case or a person with respiratory illness to stay home to the extent possible and monitor their symptoms for 14 days after last contact with the confirmed case.
4. Risk Categorization	• Determine if the case is part of one of the following high-risk groups: ○ Resident or employee of a long-term care facility or other congregate setting Setting-specific guidance available here ○ Healthcare workers
5. Gather Exposure Information	• Review potential exposures: ○ Travel to area with sustained transmission ○ Contact with a confirmed case of COVID-19 ○ Part of a known outbreak or cluster of COVID-19 ○ Attendance at a public gathering
6. Identify Contacts	• Contact tracing is to be conducted using COVID-19 Contact Tracing Instructions for LHD found in NC CD Manual • Additional contact tracing information can be found on NC CD Manual under Contact Tracing and Movement and Monitoring
• Implement Control Measures	• See number 3 above for cases and follow guidance under this number (6) for contacts
7. Patient Follow-up	• If the patient is recovering at home maintain contact to monitor the patient's condition • If in the hospital: instruct the Public Health Epidemiologist or other hospital contact to inform you if the patient is discharged or dies. • Determine if discharged patients still need to be isolated. If they do, manage as in Step 3.
8. Special Considerations	• Always use appropriate Personal Protective Equipment (PPE) when interacting with suspected or confirmed COVID-19 patients. Follow the latest CDC recommendations.

CRITICAL ELEMENTS FOR NCEDSS

- Administrative Package
  - Case Status: Confirmed – Detection of SARS-CoV-2 RNA in a clinical specimen using a molecular amplification detection test approved or authorized by the FDA or designated authority.
  - Case Status: Probable – Detection of SARS-CoV-2 in a respiratory specimen by antigen test approved or authorized by the FDA or designated authority.
- Demographic Package
- Clinical Package
  - Date that best reflects the earliest date of illness identification
    - Best choice is **always** the date of illness onset (signs and symptoms), 2nd best is specimen collection date
  - Hospitalization – were they admitted to the hospital for at least 1 overnight stay
  - Outcome - Survived/Died
- Risk Package
  - Live or work in a congregate setting
    - Include setting name, location and type
  - Healthcare worker

REPORTING COVID-19 DEATH IN NCEDSS

COVID-19 Deaths are reported separately in NCEDSS

- If there is an existing COVID-19 event
  - Update the Clinical Package with the outcome information
  - Add the date of death to the Person Tab
  - If the event is part of an outbreak, link it to the outbreak **before** changing the disease to Coronavirus Death
  - Edit the Event Properties and change the disease to Coronavirus Death
  - Complete event and assign to the state
- If there is no existing COVID-19 event
  - Create a new Coronavirus Death event
  - Complete the event.
    - *If the death is part of an outbreak
      - First create a COVID-19 event
      - Link the event to the outbreak
      - Then change the disease to Coronavirus Death
  - Assign completed event to the state

RISK/PUBLIC COMMUNICATION

- COVID-19 outbreaks and clusters can draw intense media interest. Continual communication between local and state health officials will be necessary for outbreaks that receive lots of media attention to ensure messaging is consistent and information is up-to-date.
- If public notification is considered, consult with CDB Epi on Call so messaging is consistent.
- Protect patient confidentiality and carefully consider whether public notification is necessary.
- NC DHHS Public Information Office is available at 818-855-4840 or news@dhhs.nc.gov to assist local health departments as needed.

Resources:

- https://epi.dph.ncdhhs.gov/cd/lhds/manuals/cd/coronavirus.html
- https://www.cdc.gov/coronavirus/2019-ncov/index.html