



Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

January 30, 2020

## **ADVISORY NO. 2**

### **Decision Tool for 2019-Novel Coronavirus Acute Respiratory Disease (2019-nCoV ARD) Health Event as of January 30, 2020**

While the current understanding of the disease caused by the novel coronavirus remains limited, the number of cases being reported in China and in other parts of the world is deeply concerning.

This advisory is issued to inform all Undersecretaries and Assistant Secretaries of Health, Centers for Health Development and Bureau Directors, Minister of Health – Bangsamoro Autonomous Region in Muslim Mindanao, Special and Specialty Hospital Directors, Chiefs of Medical Centers, Hospitals and Sanitaria, and other concerned of the revised the decision tool as of January 30, 2020 for the management of 2019-nCoV ARD health events.

The Department of Health will continue to update the decision tool as new information about 2019-nCoV ARD becomes available.

For your information and guidance.



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**Decision Tool for Novel Coronavirus Assessment for Bureau of Quarantine and Hospitals**  
(Version as of January 30, 2020)

| Fever $\geq 38^{\circ}\text{C}$ (current fever or with history of fever) | Respiratory Infection (cough AND/OR colds) | Travel History for the past 14 days in China | History of Exposure <sup>1</sup> | Case Category/ Intervention  |   |
|--|--|--|----------------------------------|--|---|
| +  | +  | +  | +                                | <b>Category: Patient Under Investigation (PUI)</b>   |   |
| +  | +  | +  | -                                | <b>Bureau of Quarantine (BoQ)</b> <ul style="list-style-type: none"> <li>Gives mask and isolate PUI</li> <li>Collects and evaluates the BoQ Health Declaration Card</li> <li>Endorses patient for admission in a hospital.</li> <li>Arranges transportation of PUI to hospital</li> </ul> <b>Hospitals</b> <ul style="list-style-type: none"> <li>Completes the case investigation form (CIF)</li> <li>Trained hospital staff collects specimens (nasopharyngeal swab [NPS] and oral pharyngeal swab [OPS]) and sends to RITM. (NPS/OPS must be collected upon admission and after 24 to 48 hours)</li> <li>Coordinates with RESU for reporting and transport of specimens</li> <li>Manages PUI accordingly</li> </ul> |   |
| +  | +  | -  | +                                |  |   |
| +  | -  | +  | +                                |  |   |
| -  | +  | +  | +                                |  |   |
| +  | -  | +  | -                                |  |   |
| -  | +  | +  | -                                |  |   |
| +  | -  | -  | +                                |  |   |
| -  | +  | -  | +                                |  |   |
| -  | -  | +  | +                                |  | <b>Category: Person under Monitoring*</b>   |
| -  | -  | +  | -                                |  | <b>Bureau of Quarantine</b> <ul style="list-style-type: none"> <li>Collects and evaluates the BoQ Health Declaration Card</li> <li>Advises person to go on self-quarantine for 14 days, monitor body temperature daily, and observe any signs and symptoms of respiratory infection</li> <li>If symptoms worsen, immediately notify the nearest hospital for consultation and provide travel history</li> </ul> |
| -  | -  | -  | +                                | <b>Centers for Health Development</b> <ul style="list-style-type: none"> <li>Monitor strictly those who are self-quarantined</li> </ul> <p>*Anyone who came from other parts of the world with confirmed 2019-nCoV ARD infection except China, has no history of exposure, but with fever and/or cough, is considered <b>Person under Monitoring</b> and is advised to go on self-quarantine for 14 days</p>   |   |

<sup>1</sup> History of exposure Include:

a. close contact who took care, handled specimens and/or lived with a confirmed case of 2019-nCoV infection; or

• Close contact is defined as:

- Health care associated exposure, including providing direct care for nCoV patients, working with health care workers infected with novel coronavirus, visiting patients or staying in the same close environment as a nCoV patient
- Working together in close proximity or sharing the same classroom environment with a nCoV patient
- Traveling together with a nCoV patient in any kind of conveyance
- Living in the same household as a nCoV patient

b. visiting/working in a live animal market in China

c. direct contact with animals in China with circulating 2019-nCoV in human and animals<sup>2</sup> NPS,