Updated text is shown in colored text.

## **SNAPSHOT**

- CDC has reported:
  - 10,442 confirmed and presumptive positive cases of COVID-19
  - 150 COVID-19 related deaths
  - All 50 states, the District of Columbia, Puerto Rico, Guam, and the US Virgin Islands have reported cases of COVID-19.

## MAIN KEY POINTS

- On March 16, 2020 President Trump and the White House Coronavirus Task Force issued new guidelines to help protect Americans during the Coronavirus pandemic.
  - The initiative, called <u>15 Days to Slow the Spread</u>, lays out guidelines for a nationwide effort to slow the spread of COVID-19. It calls for the implementation of measures to increase social distancing between people at all levels of society.
  - This is a massive proactive, preventive response to COVID-19. It aims to slow the spread and blunt the impact of this disease on the United States.
  - All segments of U.S. society have a role to play at this time:
    - People across the country are asked to stay home as much as much as possible and otherwise practice social distancing.
    - This includes <u>canceling or postponing gatherings of more than 10 people</u> and closing schools in some areas as determined by local and state governments.
    - It also includes special measures to protect those people who are most vulnerable to this disease.
      - Two CDC Morbidity & Mortality Weekly Reports (MMWRs) published March 17 underscore how vulnerable older people are to developing serious illness from COVID-19. (See section <u>MMWR publications</u>.)
    - People who are sick are asked to follow CDC <u>guidance on recovering at home</u> and follow the new guidance for when <u>it's OK to interact with other people again</u>.
- There is no vaccine to protect against COVID-19 and no medications approved to treat it.
- There is a body of evidence—based on about 200 journal articles—that supports the effectiveness of social distancing measures, both when used alone and in combination with other measures.
  - Much of this data is outlined in CDC's <u>Community Mitigation Guidelines to Prevent</u> <u>Pandemic Influenza — United States, 2017</u>.
  - These recommendations work better when implemented in concert.
- While the new guidelines are recommended for the next 15 days, government leaders will continually reassess the status of the outbreak in the United States. It may be that these measures will need to be modified or extended for additional periods of time.
- This is a historic, unprecedented outbreak, the likes of which have not been seen since the influenza pandemic of 1918.
- The White House Task Force on Coronavirus has established <u>www.coronavirus.gov</u> as the centralized website for the Federal government.
  - CDC continues to maintain <u>www.cdc.gov/covid19</u>.

#### SITUATION UPDATE

- 10,442 reported cases of COVID-19 have been detected in all 50 states.
- 310 of these cases occurred through close contact with another case.
- 290 cases occurred in persons who had traveled to international areas with sustained (ongoing) transmission and among their close contacts.
- 9,842 cases are still being investigated to determine the source of exposure.
  - The number of cases of COVID-19 being reported in the US is rising quickly.
  - This increase was expected given an increase in testing and ongoing rapid spread of disease across communities in the United States.
  - While these numbers are concerning, the increase is not unexpected.
  - More robust data will allow us to better understand and track the size and scope of the outbreak and strengthen prevention and response efforts.
- A CDC study published March 17 shows that younger people can develop serious COVID-19 illness requiring hospitalization. This finding is different from the first reports from China. Younger people are still much less likely to die from COVID-19 than older people. (See MMWR Publications)
- As of the evening of March 18, 89 state and local public health labs in 50 states, the District of Columbia, Guam and Puerto Rico have verified they are successfully using COVID-19 diagnostic tests. See <u>map showing which states and territories have one or more laboratories that have</u> <u>successfully verified and are currently using COVID-19 diagnostic tests</u>.
- As of the evening of March 19, 2020, CDC and local and state public health laboratories had tested a total of 44,872 specimens.
- Private laboratories are increasing their testing capacity. In addition to the approximately 2,500 tests per day currently done nationally, it is projected that:
  - Roche will increase their capacity up to 10,000 tests per day by end of this week
  - BioReference will increase their capacity by an additional 3,000 tests per day.
- CDC is adapting some of the agency's existing surveillance systems to better track COVID-19.
  - CDC plans to roll out a COVID-19 surveillance report next week.
- On Monday, March 16, CDC reported the first confirmed case in a <u>CDC employee</u>.

#### **MMWR PUBLICATIONS**

- On March 18, CDC published <u>COVID-19 in a Long-Term Care Facility King County, Washington,</u> <u>February 27–March 9, 2020</u> in the Morbidity & Mortality Weekly Report.
  - This report looked at an outbreak of COVID-19 in a long-term residential care facility in Washington state. During the outbreak, 81 residents of one facility were infected along with 34 staff members and 14 visitors. Twenty-three people died.
  - An investigation into the outbreak identified factors that likely contributed to the vulnerability of these facilities, including:
    - 1. Staff members who worked while symptomatic;
    - 2. Staff members who worked in more than one facility;
    - 3. Inadequate familiarity and adherence to standard, droplet, and contact precautions and eye protection recommendations;

- 4. Challenges to implementing infection control practices including inadequate supplies of PPE and other items (e.g., alcohol-based hand sanitizer)
- 5. Delayed recognition of cases because of low index of suspicion, limited testing availability, and difficulty identifying persons with COVID-19 based on signs and symptoms alone.
- These findings underscore improvements that can be made across long-term care facilities in the United States to help protect residents from COVID-19 outbreaks as the pandemic continues to expand in the United States.
- On March 18, CDC published <u>Severe Outcomes Among Patients with Coronavirus Disease 2019</u> (COVID-19) — United States, February 12–March 16, 2020 in the Morbidity & Mortality Weekly Report.
  - This report looked at severity of disease—by age group—among 4,226 COVID-19 cases in the United States that occurred during February 12–March 16, 2020.
  - Overall, 31% of cases, 45% of hospitalizations, 53% of ICU admissions, and 80% of deaths associated with COVID-19 occurred among adults aged 65 years or older. The highest percentage of severe outcomes were among persons adults aged 85 years or older.
  - Among 2,449 patients with known age, 6% were aged 85 years or older, 25% were aged 65–84 years, 18% each were aged 55–64 years and 45–54 years, and 29% were aged 20–44 years. Only 5% of cases occurred in persons aged 0–19 years.
  - Similar to reports from other countries, this finding suggests that the risk for serious disease and death from COVID-19 is higher in older age groups.
  - These preliminary data also demonstrate that severe illness leading to hospitalization, including ICU admission and death, can occur in adults of any age with COVID-19.
  - Approximately 49 million people in the United States are aged 65 years or older.
  - Data on other risk factors, including serious underlying health conditions that could increase risk for complications and severe illness, were unavailable at the time of this analysis.

# CDC GUIDANCE UPDATES

- On March 17, 2020, CDC updated guidance, <u>Strategies for Optimizing the Supply of N95</u> <u>Respirators: Crisis/Alternate Strategies</u>.
- CDC is reviewing and updating <u>travel notices</u> almost on a daily basis.
  - On <u>March 18</u>, CDC posted a Level 3 Travel Health Notice (Avoid Nonessential Travel) for Malaysia. Malaysia is experiencing widespread ongoing transmission of respiratory illness caused by COVID-19.
  - U.S. citizens, residents, and their immediate family members who have been in China, Iran, the United Kingdom, Ireland or any one of 26 European countries within in the past 14 days can enter the United States, but they are subject to health monitoring and possible quarantine for up to 14 days.
  - CDC also has a <u>Global Level 2 Travel Health Notice</u> recommending older adults and those who have chronic medical conditions consider postponing nonessential travel.
  - On March 17, CDC posted a <u>Level 3 Travel Health Notice for Cruise Ship Travel</u>, recommending travelers defer all cruise ship travel worldwide.

- CDC updated its <u>guidance for specimen collection</u> for testing for COVID-19 to collect a single upper respiratory nasopharyngeal swab (NP) instead of an NP and oropharyngeal swab (OP).
- CDC also posted new guidance on when people who have had COVID-19 and have been isolating at home can discontinue isolating in <u>Discontinuation of Home Isolation for Persons with COVID-</u><u>19.</u>
  - Persons with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue home isolation if:
    - At least 3 days (72 hours) have passed since recovery—defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
    - At least 7 days have passed since symptoms first appeared.
- CDC posted <u>Guidance for child care settings</u>, including a decision tree on when schools should close.

## WHAT YOU CAN DO

- Everyone can do their part to help respond to this emerging public health threat:
  - On March 16, the White House announced a program called <u>15 Days to Slow the Spread</u> which is a nationwide effort to slow the spread of COVID-19 through the implementation of social distancing at all levels of society.
  - Older people and people with severe chronic conditions should <u>take special</u> <u>precautions</u> because they are at higher risk of developing serious COVID-19 illness.
  - If you are a healthcare provider, use your judgement to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Factors to consider, in addition to clinical symptoms, may include:
    - Does the patient have recent travel from an <u>affected area?</u>
    - <u>Has the patient</u> been in close contact with someone with COVID-19 or patients with pneumonia of unknown cause?
    - Does the patient reside in an area where there has been community spread of COVID-19?
  - If you are a healthcare provider or a public health responder caring for a COVID-19 patient, please take care of yourself and follow recommended <u>infection control</u> <u>procedures.</u>
  - If you are a close contact of someone with COVID-19 and develop symptoms of COVID-19, call your healthcare provider and tell them about your symptoms and your exposure. They will decide whether you need to be tested. Keep in mind that there is no treatment for COVID-19 and people who are mildly ill are able to <u>isolate at home</u>.
  - For people who are ill with COVID-19, but are not sick enough to be hospitalized, please follow <u>CDC guidance on how to reduce the risk of spreading your illness to others</u>.
    People who are mildly ill with COVID-19 are able to isolate at home during their illness.
  - If you have been in China or another affected area or have been exposed to someone sick with COVID-19 in the last 14 days, you will face <u>some limitations on your movement</u> <u>and activity</u>. <u>Please follow instructions during this time</u>. Your cooperation is integral to the ongoing public health response to try to slow spread of this virus.

For more information please visit the Coronavirus Disease 2019 Outbreak Page at: <a href="http://www.cdc.gov/COVID19">www.cdc.gov/COVID19</a>.