

Dear colleagues

Wuhan Novel Coronavirus: Advice for the NHS in England

You will be aware of the evolving situation in China where, as of 23rd January 2020 it has been reported that around 571 people have been identified with respiratory infections caused by a novel coronavirus.

Most reported cases are at the mild end of the spectrum; with no confirmed cases in the UK.

The severity of the infections ranges from mild symptoms of upper respiratory tract infection (with or without fever) to fulminant pneumonia requiring hospitalisation and advanced respiratory support, and the disease has sadly proved fatal in 17 cases in China. The annual Chinese New Year celebrations are imminent (start 25 January 2020); this typically involves the mass movement of people both within and outside China and may amplify transmission.

At the current time, if the novel coronavirus is seen in the UK it is most likely to be in a traveller who has visited Wuhan City in China. To date, all cases detected outside China, currently 10, are in patients who have recently travelled to Wuhan.

Advice for NHS organisations is as follows:

- It is essential that an accurate travel history is obtained from all patients with acute respiratory infections to help identify potential cases.
- Primary care practices are asked to identify possible cases, isolate them immediately, and seek specialist advice from a microbiologist, virologist or infectious disease physician at your local trust. They are not expected to undertake any clinical assessment or sampling. Guidance for primary care can be found here.
- All acute trusts are expected to assess possible cases of Wuhan novel coronavirus
 using appropriate isolation facilities. <u>They should review the Public Health England</u>
 (PHE) guidance and ensure that they have considered how to operationalise this.
- Acute trusts should be prepared to undertake sampling and transport samples to PHE for testing as well as making arrangements for such patients to be identified immediately and isolated according to the PHE guidance, or in discussion with PHE, in home isolation if appropriate.
- If the novel coronavirus is detected, the patient will be transferred to an Airborne High Consequences Infectious Diseases centre. PHE will undertake contact tracing and advise on management as more is known about this infection. Guidance will be updated.

The attached pathway outlines the initial assessment questions to identify a patient who may require isolation and testing. All primary and secondary healthcare providers should make arrangements for such patients to be identified immediately and isolated according to the PHE guidance. The current patient pathway is for assessment in airborne isolation in an acute trust, followed by testing and a period of isolation (at home or in hospital) whilst awaiting the results.

PHE in collaboration with the NHS has published guidance covering the following:

- Initial assessment and investigation of cases
- Infection prevention and control and guidance
- Guidance on diagnostics
- Guidance for primary care



The four key principles to bear in mind in community settings are to:

- Identify possible cases as soon as possible
- Isolate to prevent transmission to other patients and staff
- Avoid direct physical contact unless wearing appropriate personal protective equipment
- Get **specialist advice** from a local microbiologist, virologist or infectious disease physician at your local trust

Best wishes

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NHS England and NHS

Improvement

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