

**CDC Daily Key Points
2019 Novel Coronavirus (2019-nCoV)**

February 10, 2020

MAIN KEY POINTS

- There is an expanding outbreak of respiratory illness centered in China caused by a novel (new) coronavirus abbreviated “2019-nCoV.”
- This virus is able to spread from person-to-person and cause severe disease and death.
- The potential global public health threat posed by this virus is high, but right now, the immediate risk to most Americans is low.
- Most cases are still limited to mainland China.
- Right now, this virus is not spreading in the community in the United States and the vast majority of Americans have a low risk of exposure. The greater risk is for people who have recently traveled to China or their close contacts.
- This is a rapidly evolving situation and the risk assessment for Americans may change.
- The federal government is working closely with state, local, tribal, and territorial partners, as well as public health partners, to respond to this public health threat.
- The public health response is multi-layered, with the goal of detecting and minimizing introductions of this virus in the United States so as to reduce the spread and the impact of this virus.
- Strategies are in place to reduce the number of travelers from China and screen the remaining travelers from that country for illness, with people potentially being subject to a 14-day quarantine.
- These measures are likely to cause some disruption.
- The U.S. public health system also is on high alert to detect cases of 2019-nCoV infection and prevent further spread in the community.
- The success of response efforts now will determine what the coming days, weeks, and months will bring here in the United States.
- While leaning forward aggressively with the hope that we will be able to prevent community spread, we also are preparing for the worst.
- The current outbreak meets two criteria for a pandemic. It is a new virus and it is capable of person-to-person spread.
- Extensive work has been done over the past 15 years to prepare for an influenza pandemic.
- Influenza pandemic preparedness platforms and plans would be appropriate in the event that the current 2019-nCoV outbreak triggers a pandemic.
- Public health partners are encouraged to review their pandemic preparedness plans. Selected materials are available from www.cdc.gov/ncov.

SITUATION UPDATE

- To date, 27 international locations (in addition to the U.S.) have reported confirmed cases of 2019-nCoV infection.
- As of February 10, 2020, at 7pm, 12 infections with 2019-nCoV have been reported in the U.S. in six states – Arizona, California, Illinois, Massachusetts, Washington, and Wisconsin.
 - To date, there have been 398 “persons under investigation” (PUIs) for possible 2019-nCoV infection reported to CDC, with 318 persons ruled

out as negative. These data are updated regularly at <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>.

- Two instances of person-to-person spread with this virus in the United States have been detected, in both cases after close, prolonged contact with a returned traveler from Wuhan.
- Over the weekend, the U.S. Embassy in China announced the death of the first American citizen from 2019-nCoV occurring in that country.
- CDC established a 2019-nCoV Incident Management System on January 7, 2020. On January 21, 2020, CDC activated its Emergency Operations Center to better provide ongoing support to the 2019-nCoV response.
 - As of February 7, 2020, more than 800 CDC staff members had been deployed to the 2019-nCoV Response.
- The CDC-established [International Reagent Resource \(IRR\)](#) is taking orders for real time Reverse Transcription-Polymerase Chain Reaction (rRT-PCR) tests that can diagnose 2019-nCoV in respiratory and serum samples from clinical specimens.
- Over the coming days and weeks, state and local public health departments will begin to test for 2019-nCoV in their laboratories. Test results will be validated at CDC for a period of time, after which states will perform their own testing and report results to CDC. CDC will continue to report case counts in aggregate.
- On February 1, 2020, CDC issued a [Health Alert Network \(HAN\)](#) update with some updates to previously posted guidance and, for the first time, guidance on clinical care of 2019-nCoV patients.
- On February 3, CDC issued "[Interim U.S. Guidance for Risk Assessment and Public Health Management of Persons with Potential 2019 Novel Coronavirus \(2019-nCoV\) Exposure in Travel-associated or Community Settings](#)" to provide U.S. public health authorities and other partners with a framework for assessing and managing risk of potential exposures to 2019-nCoV and implementing public health actions based on a person's risk level and clinical presentation.
- CDC is working with healthcare and industry partners to understand the supply chain for personal protective equipment (PPE) in order to adjust response actions appropriately. Based on the current 2019-nCoV situation and availability of PPE, on February 8, 2020, CDC posted:
 - "[Healthcare Supply of Personal Protective Equipment](#)" which outlines who needs PPE and who does not. (See section Use of Facemasks in U.S. below.)
 - "[Strategies for Optimizing Supply of N-95 Respirators](#)" which was posted in the face of potential ongoing 2019-nCoV transmission in the United States.
- CDC isolated the virus and sent it to the NIH's [BEI Resources Repository](#) for use by the broad scientific community.
- CDC is uploading the full genetic sequence of viruses from all U.S. patients into GenBank as they become available.
- CDC is working with state and local health departments on investigations to trace contacts of the U.S. 2019-nCoV patients to detect person-to-person spread.

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- CDC is preparing senior staff to support the WHO international senior technical mission being formed to work with Chinese public health counterparts to help improve understanding of this new disease, including learning more about transmissibility and severity.

WHAT YOU CAN DO

- While the immediate risk of this new virus to the American public is believed to be low at this time, everyone can do their part to help us respond to this emerging public health threat:
 - It's currently flu and respiratory disease season and CDC recommends getting a flu vaccine, taking everyday preventive actions to help stop the spread of germs, and taking flu antivirals if prescribed.
 - If you are a healthcare provider, be on the look-out for people who recently traveled from China and who have fever and respiratory symptoms.
 - If you are a healthcare provider caring for a 2019-nCoV patient or a public health responder, please take care of yourself and follow recommended infection control procedures.
 - For people who have had close contact with someone infected with 2019-nCoV who develop symptoms, contact your healthcare provider, and tell them about your symptoms and your exposure to a 2019-nCoV patient.
 - For people who are ill with 2019-nCoV, please follow CDC guidance on how to reduce the risk of spreading your illness to others. This guidance is on the CDC website.

USE OF FACEMASKS IN THE U.S.

- At this time, CDC does not recommend the use of facemasks or respirators among the general public. While limited person-to-person spread of 2019-nCoV among close contacts has been detected, this virus is not currently spreading in the community in the United States.
- In the United States, person-to-person spread has been seen only among people in close and prolonged contact with someone who has become infected with 2019-nCoV in China.
- If you are not sick:
 - Members of the general public in the United States DO NOT need to use facemasks. CDC does NOT recommend that people who are well wear a facemask to protect themselves from respiratory viruses, including 2019-nCoV.
 - Masks should be reserved for people who are sick, so they can protect others from getting infected.
- If you are sick (i.e., people with confirmed or possible 2019-nCoV infection, including patients under investigation who do not need to be hospitalized; and people with confirmed 2019-nCoV infection who were hospitalized and determined to be medically stable to go home):

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- You should wear a facemask when you are around other people (e.g., sharing a room or vehicle) and before you enter a healthcare provider's office. This will help protect the people around from getting infected.
- If you are not able to wear a facemask (for example, because it causes trouble breathing), then people who are in the same room with you should wear a facemask, but they should also limit the amount of time they spend in the same room with you.
- If worn properly, a facemask helps block the spread of respiratory viruses by the wearer from spreading to other people and surfaces.
- People with increased risk of exposure to 2019-nCoV, for example household contacts and caregivers of people with known or suspected 2019-nCoV, should wear a facemask if the patient is not able to wear a facemask (for example, due to difficulty breathing while wearing a facemask)
- Facemasks should be used once and then thrown away in the trash.
- Healthcare personnel should wear personal protective equipment (PPE), including respirators, when caring for confirmed or possible 2019-nCoV patients because they are in direct contact with patients, which increases their risk of exposure.
 - Respirators worn by healthcare personnel are not the same as facemasks sold in retail stores, online, etc. for public use.
 - For respirators to work effectively, they must fit snugly against the user's face to make sure particles don't pass through and infect the wearer; healthcare personnel are fit-tested for their respirators and trained to use them to be sure they work correctly.
 - Without proper training, respirators are likely to be worn incorrectly and used ineffectively.
 - Respirators and facemasks designed for general consumer use are not subject to the same regulations required for respirators in workplaces.
- There are everyday preventive actions that EVERYONE can take to prevent the spread of respiratory illnesses, including 2019-nCoV:
 - Avoid close contact with people who are sick.
 - Avoid touching your eyes, nose, and mouth with unwashed hands.
 - Stay home when you are sick.
 - Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
 - Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.
 - Clean your hands often by washing them with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.
 - Hands should be cleaned after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing.

TRAVEL

- On January 31, Health and Human Services Secretary Alex M. Azar II declared a [public health emergency](#) for the United States to aid the nation's healthcare community in responding to 2019 novel coronavirus.
- Also on January 31, the President of the United States issued a "[Proclamation on Suspension of Entry as Immigrants and Nonimmigrants of Persons who Pose a Risk of Transmitting 2019 Novel Coronavirus](#)." The declaration became effective beginning 5 p.m. EST, Sunday, February 2, 2020.
 - Foreign nationals who have visited China in the past 14 days may not enter the United States.
 - Special precautions are required of U.S. citizens, immediate family members of U.S. citizens, and legal permanent residents entering the United States who have been in China during the past 14 days, including up to a 14-day quarantine.
 - All American citizens and exempted persons coming from China will be directed to ("**funneled to**") one of 11 U.S. airports.
 - American citizens and exempted persons who have been in Hubei province in the previous 14 days will have an additional health assessment (screened for fever, cough, or difficulty breathing).
 - If symptomatic, American citizens and exempted persons will be transferred for further medical evaluation. (They will not be able to complete their itinerary.)
 - If asymptomatic, American citizens and exempted persons will be subject to a mandatory 14-day quarantine at or near that location. (They will not be able to complete their itinerary.)
 - American citizens and exempted persons who have been in other parts of mainland China (outside of Hubei Province) in the previous 14 days will have an additional health assessment (screened for fever, cough, or difficulty breathing).
 - If symptomatic, American citizens and exempted persons will be transferred for medical evaluation. (They will not be able to complete their itinerary at that time.)
 - If asymptomatic, American citizens and exempted persons will be allowed to reach their final destination and, after arrival, will be monitored under self-quarantine for 14 days.
 - CDC is working with public health partners to support the implementation of the travel policies detailed in the presidential proclamation (above).
 - **As of February 10, about 30,000 people have been screened at U.S. airports.**
 - On February 3, CDC issued "Interim U.S. Guidance for Risk Assessment and Public Health Management of Persons with Potential

2019 Novel Coronavirus (2019-nCoV) Exposure in Travel-associated or Community Settings” to provide U.S. public health authorities and other partners with a framework for assessing and managing risk of potential exposures to 2019-nCoV and implementing public health actions based on a person’s risk level and clinical presentation.

Repatriated Flights & Quarantine Orders

- CDC supported the Department of State in the safe and expedient ordered departure of U.S. citizens and residents from Wuhan, China on five chartered flights.
- The Department of Health and Human Services (DHHS) Secretary, under statutory authority, issued federal quarantine orders to all the passengers (891 people) entering the United States on these planes.
- The quarantine period is for 14 days, starting from the day the passengers left Wuhan, China.
- The quarantine is a precautionary and preventive step to maximize the containment of the virus in the interest of the health of the American public.
- This quarantine order also will protect the health of the repatriated persons, their families, and their communities.
- Medical staff will monitor the health of each traveler, including temperature checks and observation for respiratory symptoms.
- CDC will work with the state and local public health departments to transport any passenger exhibiting symptoms to a hospital for further evaluation.
- At the end of the 14-day period, people who have not developed symptoms will be free to leave.
- **The first group of returning passengers will complete their 14-day quarantine period on February 11. No cases of 2019-nCoV infection were detected among this group of passengers. Another 600+ persons remain under quarantine.**

For more information please visit the 2019 Novel Coronavirus Outbreak Page at: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>