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# 2019 Novel Coronavirus (COVID-19)

Situational Update call

03/25/2020



# Situational Update

New Cases: 189  
Total Cases: 1,724

New Deaths: 4  
Total Deaths: 20

Total Specimens Tested Yesterday: 2,413

**Total Tests To Date: 13,634**

New Counties: Logan, Morgan (reported out in local press 03.24.2020) **Total Counties: 35 counties**

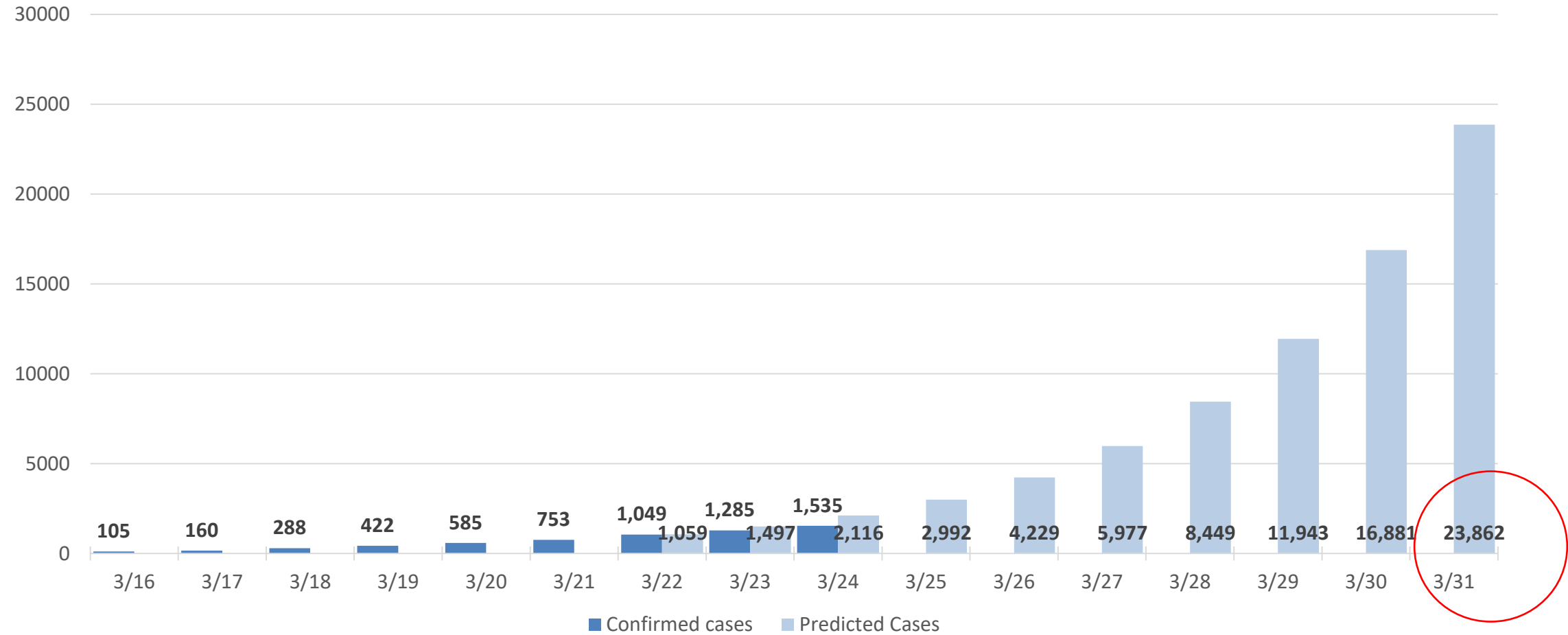
# COVID-19 Confirmed Cases by Jurisdiction

County	Cases	%	County	Cases	%
Cook	1265	73.38%	Woodford	3	0.17%
Lake	130	7.54%	Monroe	2	0.12%
Dupage	121	7.02%	Rock Island	2	0.12%
Will	40	2.32%	Adams	1	0.06%
Kane	36	2.09%	Christian	1	0.06%
Out Of State	25	1.45%	Cumberland	1	0.06%
Mchenry	20	1.16%	Dekalb	1	0.06%
Under Investigation	15	0.87%	Grundy	1	0.06%
Mclean	7	0.41%	Jackson	1	0.06%
Kendall	6	0.35%	Jodaviess	1	0.06%
St Clair	6	0.35%	Livingston	1	0.06%
Winnebago	6	0.35%	Logan	1	0.06%
Kankakee	5	0.29%	Marshall	1	0.06%
Champaign	4	0.23%	Morgan	1	0.06%
Peoria	4	0.23%	Stephenson	1	0.06%
Clinton	3	0.17%	Washington	1	0.06%
Lasalle	3	0.17%	Whiteside	1	0.06%
Madison	3	0.17%	Williamson	1	0.06%
Sangamon	3	0.17%			
				<b>Total</b>	<b>1,724</b>



# Illinois Actual and Projected Cases

Day by Day Comparison



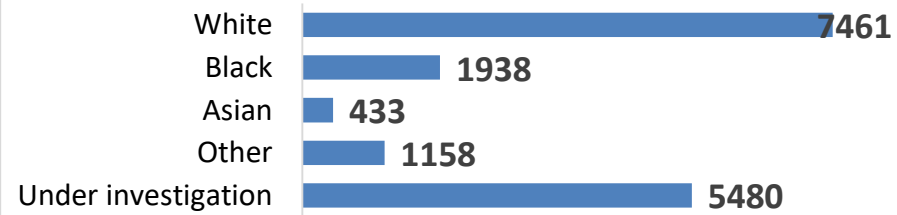
Note: 3/16 was the first day that Illinois exceeded 100 cases.

# Demographics

## Tested

Race	Case Count	Percentage
White	7,461	34.92%
Black or African American	1,938	29.60%
Other	989	7.25%
Asian	433	3.18%
Native Hawaiian or Other Pacific Islander	19	0.14%
American Indian or Alaskan Native	14	0.10%
Under Investigations	5,480	40.19%
Total	13,634	

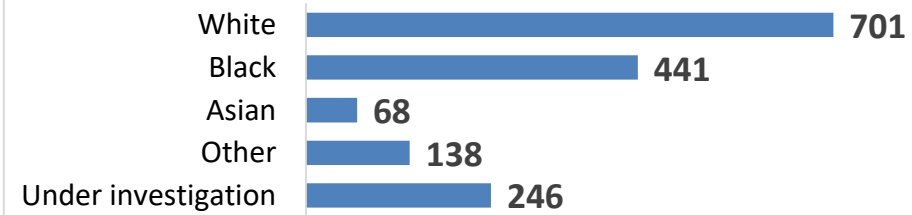
Tested Count by Race



## Confirmed Cases

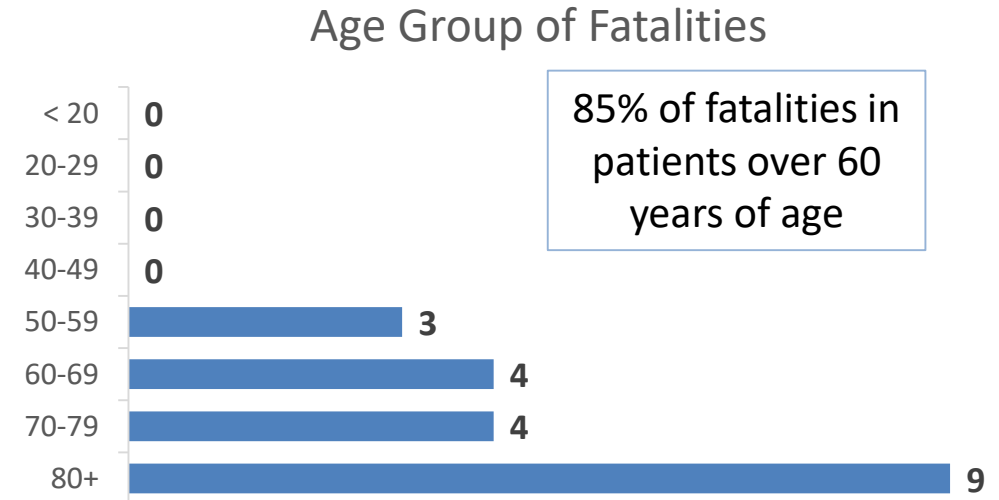
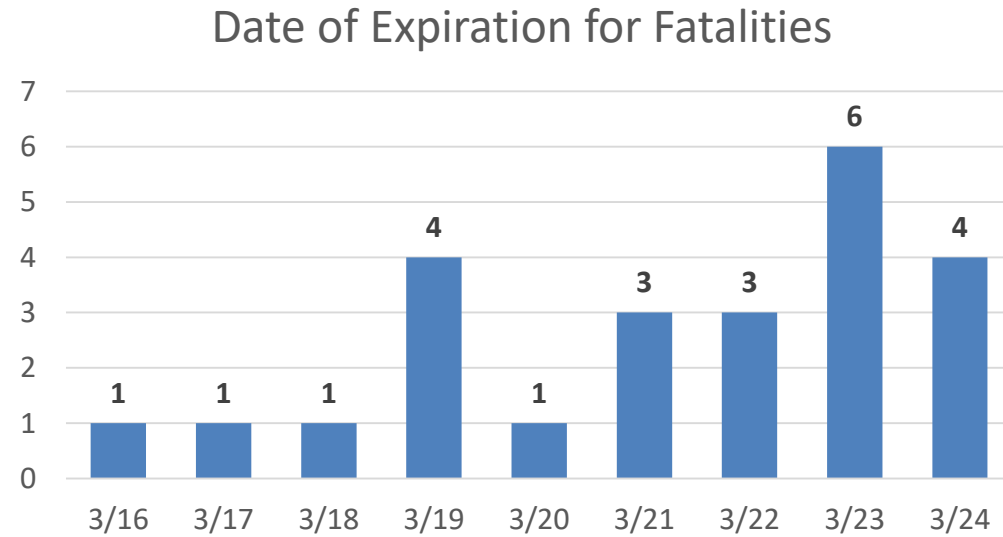
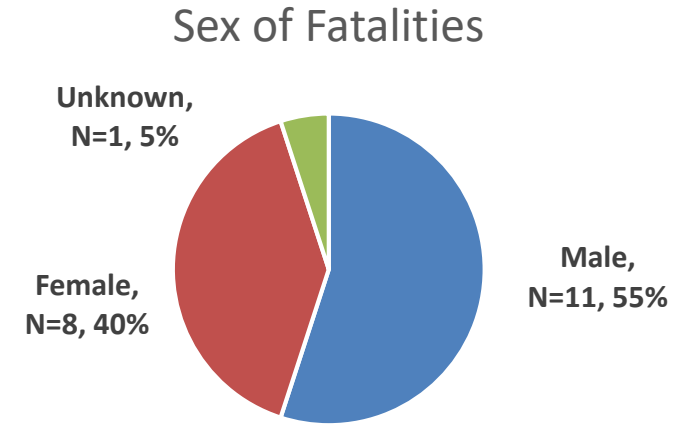
Race	Case Count	Percentage
White	701	40.66%
Black or African American	441	25.58%
Other	136	7.89%
Asian	68	3.94%
Native Hawaiian or Other Pacific Islander	1	0.09%
Two or more races	1	0.09%
Under Investigation	246	14.27%
Total	1,724	

Confirmed Case Count by Race



# COVID-19 Fatalities: N=20

County	Cases
Cook	13
DuPage	2
Kane	1
McLean	1
Will	2
Sangamon	1



**COVID-19 Testing Decision Matrix 3/18/2020**  
**Persons Under Investigation (PUIs) for Testing at IDPH Laboratories**

**RESIDENTIAL CONGREGATE LIVING WITH  
CLUSTERS (2 OR MORE) OF POSSIBLE\* OR  
CONFIRMED COVID-19 CASES IN  
A VULNERABLE POPULATION**

*Persons (may include residents or staff) who are part of a cluster of 2 or more possible or confirmed cases in a residential congregate setting that serves more vulnerable populations such as an assisted living facility, group home, homeless shelter, or correctional settings.*

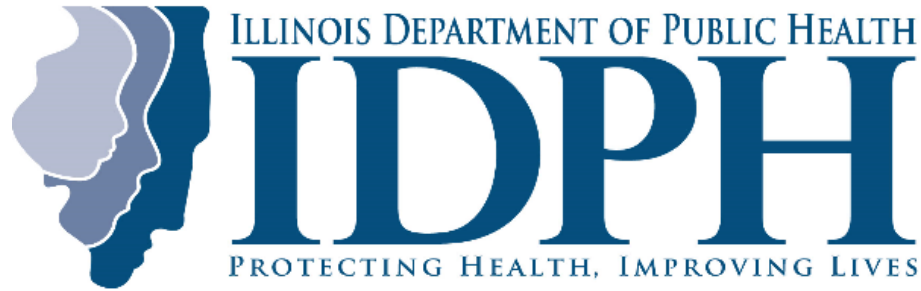
**OR**

**HOSPITALIZED PATIENTS WITH  
UNEXPLAINED PNEUMONIA**

*Be sure to expeditiously test patients from a residential congregate setting that serves vulnerable populations such as an assisted living facility, group home, homeless shelter, or correctional settings.*

\*Possible COVID-19 case: A possible case of COVID-19 is defined as a person with COVID-19-like illness for whom testing was not performed.

COVID-19-like illness is described as new onset of subjective or measured ( $\geq 100.4^{\circ}\text{F}$  or  $38.0^{\circ}\text{C}$ ) **fever OR cough OR shortness of breath OR sore throat** that cannot be attributed to an underlying or previously recognized condition.



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## PROVIDER REQUEST FOR IDPH LABORATORIES COVID-19 TESTING

### DISCLAIMER:

If the submitter on the authorization form cannot collect a specimen, the authorization code is **NOT VALID**.

The facility listed on the authorization form **MUST MATCH** the facility on the lab requisition form.

This form may only be utilized by providers that are able to collect specimens **ONSITE**.

Please complete all information below as completely as possible for the patient you are requesting COVID-19 testing.

PATIENT INFORMATION	
Today's Date:	<input type="text" value="03-24-2020 18:37"/> M-D-Y:H:M
Patient First Name: <small>* must provide value</small>	<input type="text"/>
Patient Last Name: <small>* must provide value</small>	<input type="text"/>
Please provide patient's initials: <small>* must provide value</small>	<input type="text"/> <small>We will use these to communicate with you about this patient.</small>
Patient Date of Birth: <small>* must provide value</small>	<input type="text"/> <input type="text" value="31"/> <input type="text" value="Today"/> M-D-Y
Sex: <small>* must provide value</small>	<input type="radio"/> Male <input type="radio"/> Female <span style="float: right;">reset</span>

- No need to complete PUI form
- Email with approval or denial goes to Requester and LHD
- Clinician requesting is the only one approved for collecting the specimen.
- Can still call the LHD to get approval per the testing algorithm.
- LHD can look up in REDCap (use last 4 digits of approval code)



# Outbreaks



Enter into ORS



One confirmed  
COVID-19 case and at  
least one  
symptomatic



Providers should  
contact LHD with any  
congregate setting  
cases

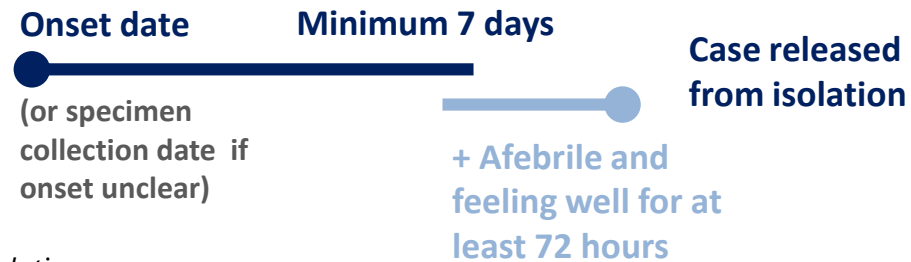
# RELEASING COVID-19 CASES AND CONTACTS FROM ISOLATION AND QUARANTINE



Interim guidance as of March 24, 2020. Subject to change.

## CASES (confirmed and possible)

Must be isolated for a minimum of 7 days after symptom onset and can be released after afebrile and feeling well (without fever-reducing medication) for at least 72 hours.



Note: Lingerin cough should not prevent a case from being released from isolation.

### Examples:

- A case that is well on day 3 and afebrile and feeling well for 72 hours must remain isolated until day 7.
- A case that is still symptomatic on day 7, and symptoms last until day 12, cannot be released until day 15.

## HOUSEHOLD/RESIDENTIAL CONTACTS\*

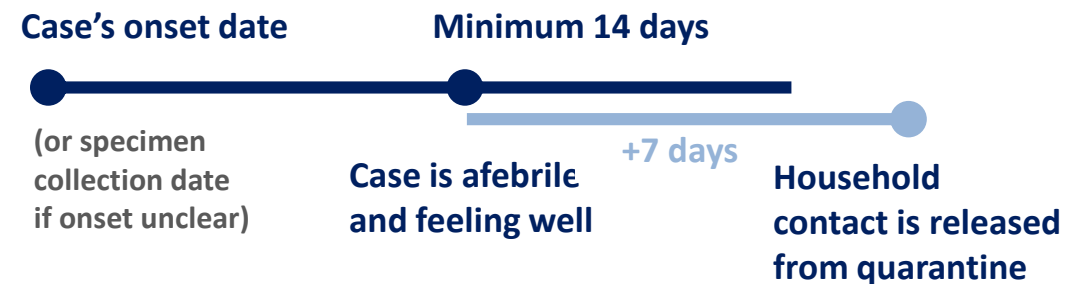
Must be quarantined for 7 days after the case has been afebrile and feeling well (because exposure is considered ongoing within the home) and for a minimum of 14 days.

If a household contact develops symptoms, follow directions for probable case

*This means that household contacts may need to remain at home longer than the initial case.*

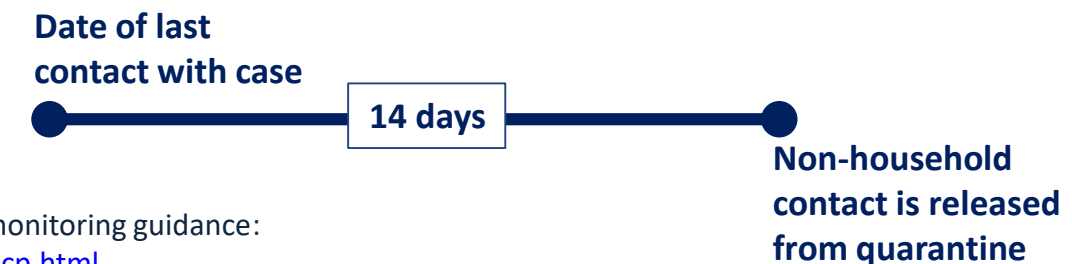
### Examples:

- A case is well 3 days after onset. The household contact must remain quarantined until day 14.
- A case is well 7 days after onset. The household contact can be released on day 14.
- A case is well 14 days after onset. The household contact can be released on day 21.



## NON-HOUSEHOLD CLOSE CONTACTS\*

Must be quarantined for 14 days from the date of last contact with the case.



\*HCWs should discuss returning to work with their employer. See also HCW monitoring guidance:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

# Traveler Monitor



- Travelers are screened at the airport and receive instructions on self monitoring and what to do if they become symptomatic.
- We are suspending importing DGMQ data into I-NEDSS and asking LHDs to make contact and monitor.

## Other guidance

- CD COVID-19 WebPortal pages have been redesigned with index to help find needed information
- New CDC Guidance for Correctional and Detention Facilities
- Only need to use REDCap for Contact Monitoring if needed

# I-NEDSS for Case Surveillance

## ELR with Positive and Negative Results

- Set Filter to Potentially Reportable to see negatives

## Only confirmed cases go into I-NEDSS

## Important to collect/enter

- Demographic information
- Onset date
- Hospital Admission and Discharge Dates
- Co-morbidities
- Occupation

# PPE Conservation Strategies

# Re-Use and Extended Use of N-95 Masks

- When there is a critical shortage of respirator equipment (N-95 respirators and PAPR hoods), re-use or extended use of these items is ***necessary*** to continue patient care activities while also protecting healthcare workers.
- The Illinois Department of Public Health is directing all Illinois hospital and pre-hospital settings to **IMMEDIATELY** implement conservation strategies to extend the use of N95 masks and PAPRs in healthcare settings.

# Consider:

- Minimize the number of individuals who need to use respiratory protection through the preferential use of engineering and administrative controls;
- Use alternatives to N-95 respirators and PAPR's where feasible;
- Implement practices allowing extended use and/or limited reuse of N-95 masks and reuse of PAPR hoods, when acceptable



# Updates to IDPH Guidance:

- Considerations can be made for longer use if the seal check (instructions below) is performed and integrity is maintained, otherwise it needs replaced immediately. ***Organizational or agency policies should be followed regarding extended use.***
- Visual Instructions can be found here - <https://www.cdc.gov/niosh/docs/2018-130/pdfs/2018-130.pdf?id=10.26616/NIOSH PUB2018130>



**DO NOT**  
**ReUSE N-95**  
**respirators**  
**if:**

- Contaminated with blood, respiratory or nasal secretions, or other bodily fluids from patients.
- The straps are stretched out, so they no longer provide enough tension for the respirator to seal the face
- If the nosepiece or other fit enhancements are broken
- The respirator that is obviously damaged or becomes hard to breathe through

# NEW !! Optimizing Supplies of Procedural/Surgical Facemasks:

- Engineering and Administrative Controls –
  - Reduce patients
  - Exclude non-essential personnel from care areas
  - Reduce face to face encounters
  - Exclude visitors that may PPE
  - Maximize telemedicine
  - Employees should demonstrate competency to don and doff PPE correctly
- Use according to product labeling and local, state, and federal requirements
- Selectively cancel elective and non-urgent procedures that would require use of a facemask by healthcare providers or visitors
- Remove facemasks for visitors in public areas
- Implement extended use of facemasks
  - Remove if soiled, damaged, or hard to breath
  - Do not touch facemasks
  - Immediately leave care area if mask is removed
- Facemasks that hook around the ears are more suitable for re-use
- Prioritize re-use for activities such as:
  - Essential surgeries or procedures
  - Care activities that involve splashes or sprays
  - Prolonged face to face contact with potentially infectious people
  - Aerosolizing procedures, if respirators not available

## Unconventional Strategies for Awareness:

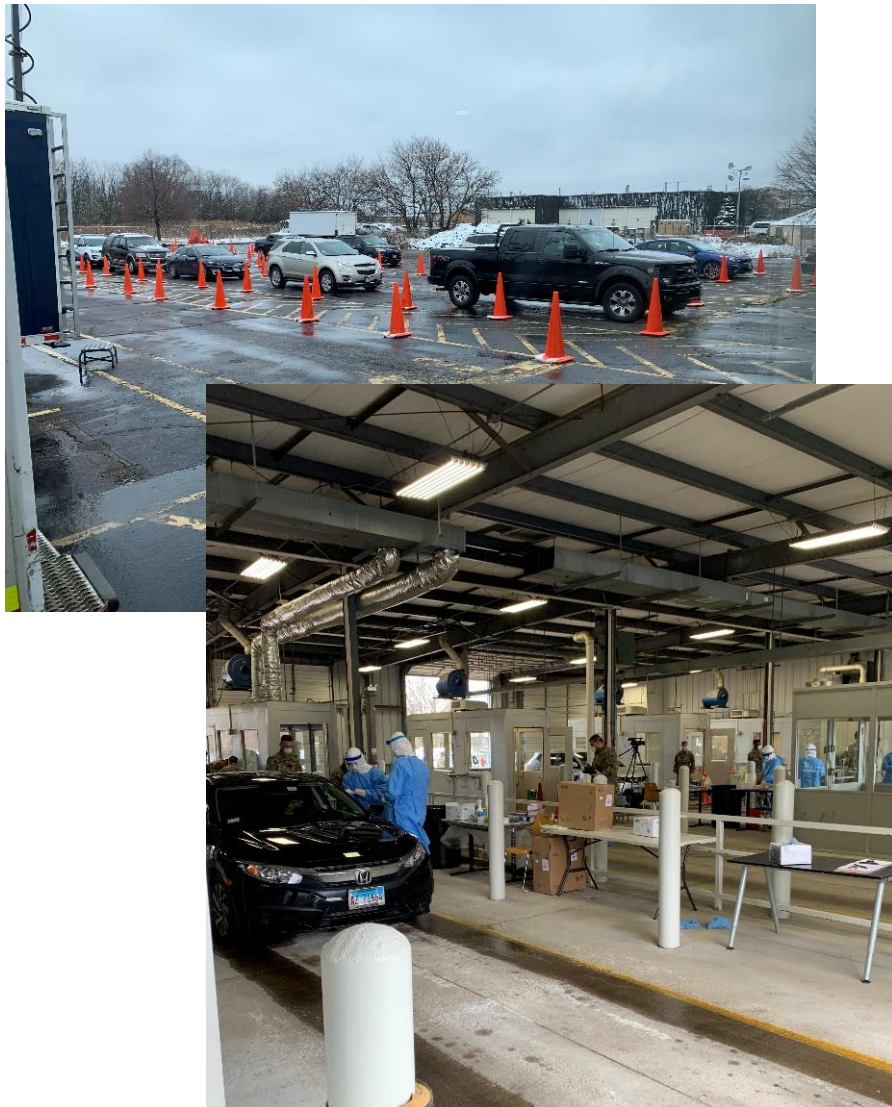
- Cover N-95 with a surgical mask to prevent soiling
- Ultraviolet Germicidal Irradiation (UVGI) for Decon and reuse of masks
- Crisis strategy – use of cloth masks



## FEMA/HHS supported Community Based Testing Sites (CBTS)

- HHS supplying test kits and PPE
- Max 250 specimens collected per day per site
- Specimens sent to LabCorp and Quest for testing
- Current Criteria:
  - Anyone 65 or older with on-site confirmed temp AND respiratory symptoms
  - First responders and healthcare workers regardless of presence of symptoms
- Four CBTS sites operational as of 3/25/2020 with a planned fifth site downstate

# HHS Supported Community Based Testing Sites (CBTS)



- Private sector sites:
  - Wal-Mart, 137 E North Ave, Northlake IL  
Hours of operation: 10-4
  - Wal-Mart, 2424 W Jefferson, Joliet IL  
Hours of operations: 10-4
  - Walgreens, 695 W Boughton Rd, Bolingbrook IL  
Hours of operation: 10-4
- State run sites:
  - Harwood Heights site  
(Former EPA Emissions Testing Facility)  
6959 W Forest Preserve Drive, Chicago, IL Hours of operation: 9-5
  - McLean county fairgrounds  
1106 Interstate Dr. Bloomington, IL  
(tentative soft start Friday 3/27)

# Serve Illinois

- Serve Illinois is working with voluntary organization partners to oversee volunteer and donation management for the response effort
- Volunteerism
  - [www.Serve.Illinois.gov](http://www.Serve.Illinois.gov) is hosting a list of known volunteer opportunities
  - Currently there are 30+ opportunities listed
  - To add your opportunities visit the site
- We are also tracking volunteer activities during the response. Visit the Serve Illinois site to complete the survey
  - Asking for number of volunteers, volunteer hours, and people served
- Donations
- [www.Serve.Illinois.gov](http://www.Serve.Illinois.gov) also has a listing of needed PPE donation items
  - To donate PPE, visit the site to see the needs list, and then email the list of items you have to [PPE.Donations@Illinois.gov](mailto:PPE.Donations@Illinois.gov)

## References:

- IDPH COVID 19:  
<http://dph.illinois.gov/covid19>
- CDC COVID 19:  
<https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- UNMC:  
<https://www.nebraskamed.com/for-providers/covid19>
- UW Medicine: <https://covid-19.uwmedicine.org/Pages/default.aspx>