## Case Definition – Novel Coronavirus (COVID-19)

These case definitions* are for surveillance purposes and they are current as of March 12 2020. They are not intended to replace clinical or public health practitioner judgment in individual patient assessment and management.

### A. Person Under Investigation

- Based on the evolving situation with COVID-19 there is no longer a PUI definition for surveillance purposes
- See below for guidance on testing for COVID-19

### B. Probable Case

A person with fever (over 38 degrees Celsius) and/or onset of (or exacerbation of chronic) cough **AND** any of the following within 14 days prior to onset of illness:

- Travel to an impacted area** or**
- Close contact with a confirmed or probable case of COVID-19 **or**
- Close contact with a person with acute respiratory illness who has been to an impacted area** AND**

- In whom laboratory diagnosis of COVID-19 is not available, recommended, inconclusive, or negative (if specimen quality or timing is suspect)

### C. Presumptive Confirmed Case

- Based on the evolving situation with COVID-19 there is no longer a Presumptive Confirmed Case definition for surveillance purposes
- See below for guidance on testing for COVID-19

### D. Confirmed Case

A person with laboratory confirmation of COVID-19 infection using a validated assay, consisting of positive real-time PCR on two genomic targets, or a single positive target **AND** additional detection with nucleic acid sequencing. Laboratory confirmation is performed at reference laboratories (e.g., The National Microbiology Laboratory or Public Health Ontario Laboratory) or non-reference laboratories (e.g., hospital or community laboratories). (see footnote 8)
Case Definition Footnotes

1. The incubation period of COVID-19 is unknown. SARS-CoV demonstrated a prolonged incubation period (median 4-5 days; range 2-10 days) compared to other human coronavirus infections (average 2 days; typical range 12 hours to 5 days). The incubation period for MERS-CoV is approximately 5 days (range 2-14 days). Allowing for variability and recall error and to establish consistency with the World Health Organization’s COVID-19 case definition, exposure history based on the prior 14 days is recommended at this time.

2. A close contact is defined as a person who provided care for the patient, including healthcare workers, family members or other caregivers, or who had other similar close physical contact OR who lived with or otherwise had close prolonged contact with a probable or confirmed case while the case was ill.

3. Other exposure scenarios not specifically mentioned here may arise and may be considered at jurisdictional discretion (e.g., history of being a patient in the same ward or facility during a nosocomial outbreak of COVID-19).

4. There is limited evidence on the likelihood of COVID-19 presenting as a co-infection with other pathogens. At this time, the identification of one causative agent should not exclude COVID-19 where the index of suspicion may be high.

5. Laboratory confirmation may not be available due to no possibility of acquiring samples for laboratory testing of COVID-19.

6. Inconclusive is defined as a positive test on a single real-time PCR target without sequencing confirmation, or a positive test with an assay that has limited performance data available.

7. Laboratory tests are evolving for this emerging pathogen, and laboratory testing recommendations will change accordingly as new assays are developed and validated.

8. Some hospital and community laboratories have implemented COVID-19 testing in-house and report final positive results, which is sufficient for case confirmation. Other hospital and community laboratories will report positives as preliminary positive during the early phases of implementation and will require confirmatory testing at a reference laboratory (e.g., Public Health Ontario Laboratory or the National Microbiology Laboratory).

9. Impacted areas is based on current epidemiology and WHO Situation Report.

10. For clinical testing purposes, the following groups should be tested:
   - Symptomatic contacts of confirmed cases, until community transmission is established
   - Individuals admitted to hospital with acute respiratory illness
   - Health care workers with acute respiratory illness
   - Individuals with acute respiratory illness who reside in long term care homes and retirement homes
• Individuals with acute respiratory illness who reside in other institutions and as directed by local public health officials
• Health care workers as part of a health care institutional outbreaks and as directed by local public health officials
• First Nation Community members living on-reserve with acute respiratory illness

Testing outside of these recommendations based on public health and clinical judgement can be made in consultation with local public health officials. As this goal is for prioritization of those that are at highest risk, this would decision should be made by exception.

Other individuals meeting the case definition should be advised to self isolate at home until 24 hours after symptoms have been resolved.

11. Under the Health Protection and Promotion Act, clinicians who suspect COVID-19 (i.e., are ordering testing for COVID-19), are required to report the individual to their local public health unit.