# Chinese Center for Disease Control and Prevention Technical Guidance for Prevention and Control of COVID-19

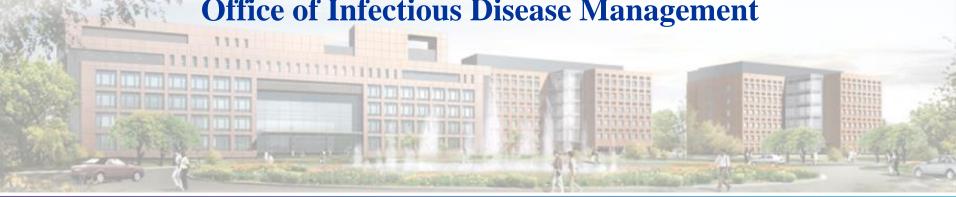
**Audio and Video Training Courseware** 

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# **Guidelines for Epidemiological Investigation** of COVID-19

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### **Technical basis**

- Technical documents for COVID-19 prevention and control of the Chinese Center for Disease Control and Prevention
- Protocol for Prevention and Control of COVID-19 (Edition 6)
- Protocol for Prevention and Control of COVID-19 (Edition 5)



### **Outline**

- Purpose
- Objects
- Contents and methods
  - Case investigation
  - Cluster outbreak investigation

- Organization and implementation
- Report and analysis of information
- Annexes
  - Form for Case investigation of COVID-19
  - Investigation and analysis methods for Cluster outbreak



### **Purpose**

- Investigate the source of infection in cases, and track and identify close contacts;
- Investigate incidence, status on seeking medical attention, clinical characteristics and risk factors;
- Investigate and analyze the transmission
   characteristics and transmission chain of cluster
   outbreaks.



### **Objects**

Suspected case Confirmed case Asymptomatic infection Cluster outbreak

For definition, see *Protocol for Prevention and Control of COVID-19* (*Edition 6*)



#### **Contents and Methods-Case Investigation**

#### Suspected case

Basic Information Close contacts

Health Status
Monitoring Case
Form for Close
Contacts

#### Confirmed case Asymptomatic infection

Basic Information Onset and consultation Risk factors and exposure history Laboratory testing

Health Status Monitoring Case Form for Close Contacts



See Guideline for Investigation and Management of Close Contacts of COVID-19 Cases



### **Contents and Methods-Cluster Outbreak Investigation**

- The county (district) -level disease control agencies shall immediately investigate the clustered outbreak situation that meets the definition based on the online direct report information and case investigation.
- Content: information on the source of infection and close contacts of all cases. Focus on epidemiological links between cases, and analyze transmission chains and routes of transmission.



### Organization and implementationlocalized management

- The county (district) -level health administrative department, where the medical institution in which cases are treated is located, organizes the disease control agencies to conduct the investigation.
- The investigation unit shall promptly establish an on-site investigation team, clarify the purpose of the investigation, formulate an investigation plan, and determine the staffing and assignment of responsibility of the investigation team.
- During the investigation, investigators should take good personal protection.
- Municipal, provincial and national centers for disease control and prevention can rush to the scene to participate in the investigation



### Report and Analysis of Information

- Form for Case investigation of COVID-19 (confirmed cases, asymptomatic infections)
  - Timely reporting through the network reporting system
  - Quality auditing
  - > Timely supplementing and correcting based on investigation progress
  - Cluster outbreak investigation
    - > Timely reporting through the network reporting system
    - Quality auditing
    - > Timely supplementing and correcting based on investigation progress
    - Filling in the basic information, preparing initial, progress and closing reports
    - Key information on clustered outbreak cases is attached to the closing report



# Form for Case investigation of COVID-19 (1)

Basic information
1. Name:;
2. Sex: □male □ Female
3. Whether imported cases are overseas: $\square$ Yes $\square$ No (added in infectious disease report card)
If yes, please fill in the following information:
The country or region where you live or travel before entering the country (multiple choices): (Added in the infectious disease report card)
Countries and regions through which to enter the country:
Nationality: Passport number:
Port of Entry:Province(please fill in the airport, station or terminal, etc.)
Date of entry:
Mode of entry (flight number, train number, ship number, etc.):



# Form for Case investigation of COVID-19 (2)

II. Case detection and consultation
4. Pathway of Case detection: $\square$ Active consultation $\square$ Detection of close
management $\square$ Entry screening $\square$ Active screening of population
$\square$ Routine surveillance findings such as influenza and SARI $\square$ Other
5. Date of admission:
6. Symptoms and signs on admission: $\ \square$ Fever: maximum temperature: $^{\circ}$ C
$\square$ chills $\square$ dry cough $\square$ sputum $\square$ nasal congestion $\square$ Running nose $\square$ sore throat
$\square$ headache £ fatigue $\square$ Dizziness $\square$ muscle soreness $\square$ arthralgia $\square$ shortness of
breath
☐ breathing difficulty ☐ chest tightness ☐ Chest pain ☐ conjunctival hyperemia ☐ nausea ☐ vomiting ☐ diarrhea ☐ abdominal pain ☐ other
7. Are there any complications? $\ \square$ YES $\ \square$ No
If yes, please select (multiple choices): $\square$ meningitis $\square$ encephalitis $\square$ bacteremia/sepsis
$\square$ myocarditis $\square$ acute lung injury /ARDS $\square$ acute kidney injury $\square$ epilepsy
$\square$ secondary bacterial pneumonia $\square$ Other
8. Chest x-ray test or CT taken showing pneumonia imaging features:
□Not taken □ No □ Yes
If yes, test time:
9. Date of discharge:



#### Form for Case investigation of COVID-19 (3)

PARSE CUM:	
III. Risk factors and exposure history	
10. Does the patient come from a specific professional group: $\Box$ No $\Box$ medical staff	
$\square$ pathogenic microorganism detection staff $\square$ personnel with wildlife contact	
$\square$ poultry and livestock farming staff $\square$ other $\_\_\_$ $\square$ nonspecific professional group	
For medical staff, please select the specific nature of work:	
$\square$ Doctor $\square$ Nurse $\square$ CDC staff $\square$ Laboratory testing staff $\square$ Others	
11.Whether the patient is pregnant: $\square$ Yes, gestational weeks: $\square$ No	
12. Past medical history and basic conditions (multiple choices): ☐ No ☐ hypertension ☐ diabetes ☐ cardiovascular and cerebrovascular diseases ☐ asthma ☐ chronic lung	Have you had the following exposure history within 14 days before the onset of illness or being tested positive:
disease ( ☐ chronic obstructive pulmonary disease, ☐ other) ☐ tumor (☐ lung cancer ☐ others) ☐ chronic kidney disease £ chronic liver disease	13. Is there a history of travel or residence in Wuhan and surrounding areas, or other
□immunodeficiency diseases □ postpartum (within 6 weeks) □ other	communities with reported case:
	☐ travel history ☐ residential History ☐ No  If yes, please fill in:ProvinceCityCounty (district)
	14. Is there a history of travel or residence in a country or region with a severe
	epidemic abroad: ☐ Travel history ☐ Residential history ☐ No
	If yes, please fill in the country or region:
	15. Have you come in contact with a person who has fever or respiratory symptoms
	from Wuhan and surrounding areas, or from a community with a reported case/cased
	: ☐ Yes ☐ No ☐ Unclear
	16. Have you come in contact with a person who has fever or respiratory symptoms
	from country or region with a severe epidemic abroad :   Yes  No  Unclear
	17. Is there a history of exposure to confirmed cases or asymptomatic infections:
	☐ Yes ☐ No ☐ Unclear
	18.Does the patient have a cluster outbreak in the same family, workplace,
All the second of the second o	kindergarten or nursery or school? ☐Yes ☐ No ☐ Unclear



# Form for Case investigation of COVID-19 (4)

IV. Laboratory testing

30. Specimen collection and detection of new coronavirus

Every sample collection and new coronavirus test (including negative and positive test results for each sample) during the period from the first sampling of the case to the isolation after discharge

Specimen type	Sampling tim	ne	Test results				
	(month day	year)	(Positive / negative / to be tested)				
Throat swab							
Nasal swab							
Nasopharyngeal swab							
Sputum							
Tracheal secretions							
Tracheal aspirate							
Alveolar lavage fluid							
Urine							
Feces / anal swabs							
Blood specimen (nucleic acid test)							
Blood specimen (lgM)							
Blood specimen (lgG)							
Blood specimen (IgM + IgG)							
* Blood specimen IgG increased times or more (sampling during recovery period)							
Other (fill in specimen name)							
Not collected (do not fill in the sampling time or results)							







## Investigation and Analysis Methods for Cluster Outbreak

- Methods: case investigation, Chinese disease control and prevention information system, case epidemiological investigation report
- Investigation contents: cases and close contacts; places where cases are exposed; sampling and testing
- Analysis content: transmission chain; case generation; incubation period; infectivity during the incubation period; infectivity of asymptomatic infection; ; transmission route.

# Investigation and Analysis Methods for Cluster Outbreak

Cluster outbreak informatio n	Familial aggregation					Meals spread			Other types of transmission (please specify)			transmissi on during												
	Number of susceptible persons exposed Number of cases			Attack rate (%)	Number of susceptible persons exposed				Number of esusceptibl e persons exposed	Number of		Incubation	Asym	Asymptomatic infectior Transmission (1 yes 2 no										
				ı																				
Case number		Name															Date of			 e previous (	<u> </u> generation	of cases②		
	Generation number①		Age	Gender	Identity number	Date of onset	Date of admission	isolation	first		first		Contact place ③	Contact type4	Travel history ⑤	Contact history of other cases 6								

Instructions for filling in the form: ① Intergenerational number: 1 for the first generation of cases, 2 for the second generation of cases, and so on; if there are 2 or more cases in the second generation according to the order of incidence, such as 2–1, 2–2, etc.; fill in "unknown" for cases that cannot be determined between generations; ② contact history of the previous generation of cases: fill in the contact with the previous generation of cases. The first-generation cases and cases of unknown generations may not be filled in. ③ Contact places: please fill in the number 1-home, 2-restaurant, 3-transport, 4-collective unit, 5-public places (such as shopping malls, supermarkets, hotels Etc.), 6-hospital, 7-other (please specify); ④ Type of contact: please fill in the number, 1-family, 2-neighbor, 3-colleague, 4-friend, 5-other (please specify). ⑤ Travel history: Refers to the travel history of Wuhan and its surrounding areas, other communities with case reports in China, or countries or regions with severe epidemics abroad within 14 days before the onset of illness, please fill in the number, 1-yes, 2-no. ⑥ Contact history of other cases: refers to the contact status except for the previous generation of cases, please fill in the number, 1-yes, 2-no.

### TECHINICAL TIPS

With increasing awareness of the COVID-19 and progress been made in epidemic prevention and control, the guidelines will be continuously adjusted and improved to better protect the lives and health of the general public.