



23 Jan 2020

All registered TCM practitioners

SITUATION UPDATE: 2019 NOVEL CORONAVIRUS IN CHINA

The Ministry of Health (MOH) is closely monitoring the situation in China. A novel coronavirus, the 2019 novel coronavirus (2019-nCoV), has been determined to be the etiological agent of the pneumonia outbreak in Wuhan city. As of 20 January, 198 laboratory-confirmed cases including four deaths have been reported from Wuhan city. In addition, 25 laboratory-confirmed cases have been reported outside of Wuhan city, in Guangdong (14), Beijing (5), Shanghai (2), Thailand (2), Japan (1) and South Korea (1). There had been a cluster involving 15 healthcare workers in Wuhan, which indicates the presence of human-to-human transmission.

NOTIFICATION OF SUSPECT CASES

2. In view of the above developments, the **suspect case criteria** have been **expanded** to the following:

- a) A person with clinical signs and symptoms suggestive of pneumonia or severe respiratory infection with breathlessness **AND** travel to mainland China within the last 14 days; or
- b) A person with an acute respiratory illness of any degree of severity who, within 14 days before onset of illness, had been to a hospital in mainland China or had close contact¹ with a case of 2019 novel coronavirus infection.

¹ Close contact is defined as:

- Anyone who provided care for the patient, including a health care worker or family member, or who had other similarly close physical contact;
- Anyone who stayed (e.g. lived with, visited) at the same place as a case.

3. Please note that **transit** in an airport located in mainland China is **not** considered as having travelled to mainland China.
4. **Suspect cases whose conditions are medically stable** should be referred to the **nearest General Practitioner (GP)** for further evaluation immediately:
5. Please call the SCDF (995) ambulance if the patient is **medically unstable** (i.e. hypotensive or breathless). Please inform the ambulance operator that you are referring a **suspect case of 2019-nCoV**.
6. Patients with mild respiratory symptoms who do not meet the criteria for referral in paragraph 2 should be clinically managed as per usual practice. Physicians should advise family members and other close contacts of suspect cases to be vigilant for symptoms of fever or respiratory symptoms, and to seek medical attention as soon as possible if unwell.

INFECTION CONTROL

7. TCM clinics are reminded to routinely screen patients for fever and travel history. Patients with fever or respiratory symptoms should be asked to don a surgical mask. Febrile patients should be placed in a separate area from non-febrile patients, where possible.
8. TCM practitioners are also advised to practice standard precautions including donning surgical masks and practicing good hand hygiene during routine clinical care. Environmental cleaning should be carried out regularly.
9. For clarification on this circular, please email MOH_INFO@moh.gov.sg.



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IMPORTANT

This circular supersedes MOH CIRCULAR 09/2020 titled, "VIRAL PNEUMONIA OF UNKNOWN CAUSE IN WUHAN CITY, CHINA" dated 16 January 2020.

ANNEX A

FREQUENTLY ASKED QUESTIONS ON 2019 NOVEL CORONAVIRUS

1. What is the cause of the pneumonia cluster in Wuhan city?

To date, the source of infection, and mode of transmission remain uncertain. However, the etiological agent has been determined to be a novel coronavirus (2019-nCoV). Coronaviruses are a large family of viruses that can cause illnesses ranging from the common cold to Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). The source of infection and mode of transmission remains unknown although there has been human-to-human transmission, including a cluster involving healthcare workers.

2. What are the signs and symptoms of 2019-nCoV infection?

People infected with 2019-nCoV were reported to typically experience fever, cough and pneumonia.

3. Is there any vaccine or treatment for 2019-nCoV infection?

No vaccine or specific treatment for 2019-nCoV infection is currently available. Treatment is supportive and based on the patient's clinical condition.

4. What Personal Protective Equipment (PPE) should I wear when treating patients who may be suspect cases of 2019-nCoV?

Standard infection control and droplet precautions are recommended when attending to a suspect 2019-nCoV patient (i.e. don an N95 mask when performing the medical examination, and give the patient a surgical mask to wear if he or she has respiratory symptoms).

5. What advice can I give to patients who are travelling to countries where cases of 2019-nCoV are being reported?

You should advise patients to:

- Avoid contact with live animals including poultry and birds, and consumption of raw and undercooked meats;
- Avoid close contact with people who are unwell or showing symptoms of illness;
- Observe good personal hygiene;
- Practise frequent hand washing with soap (e.g. before handling food or eating, after going to toilet, or when hands are dirtied by respiratory secretions after coughing or sneezing);
- Wear a mask if experiencing respiratory symptoms such as a cough or runny nose;
- Cover his/her mouth with a tissue paper when coughing or sneezing, and dispose the soiled tissue paper in the rubbish bin immediately; and
- Seek medical attention promptly if feeling unwell.

6. What should I do if a patient who fits the suspect case definition for 2019-nCoV refuses to be referred to the GP clinic for further evaluation?

Advise the patient/guardian that it is in their own, as well as their families' interest to undergo further evaluation at a GP clinic. If the patient continues to refuse referral, please call the Surveillance Duty Officer of the Communicable Diseases Division at 9817 1463 (available 24 hours) for assistance and advice. A legal order to compel the patient to be evaluated in a hospital may be served, if necessary

7. Should staff returning from China be quarantined?

Staff returning from China do not have to be routinely quarantined. However, they should be monitored closely for any fever or respiratory symptoms for at least 14 days after returning from China. Any staff who fall ill should be promptly referred for evaluation.



23 Jan 2020

致：中医注册执业者

最新情况：2019 年中国新型冠状病毒

新加坡卫生部（MOH）正密切关注中国的情况。一种新型冠状病毒，即 2019 年-新型冠状病毒（2019-nCoV），已被确定为武汉市肺炎爆发的病原体。截至 1 月 20 日，武汉市已经发现 198 起实验室确诊病例，其中 4 人死亡。此外，武汉市以外地区也实验室确诊 25 起病例：广东（14 例）、北京（5 例）、上海（2 例）、泰国（2 例）、日本（1 例）和韩国（1 例）。武汉市也发现一个由 15 名医护人员组成的集群，显示病毒有人传人的现象。

疑似案件的通知

2. 基于以上的发展，疑似案件的标准已扩大到以下几个方面：
 - c) 在过去 14 天内出现疑似肺炎或严重呼吸道感染伴呼吸急促症状，并在过去 14 天内到过中国大陆的人士；或
 - d) 患有任何严重程度的急性呼吸系统疾病，并在患病前的 14 天内曾经到过中国内地的医院或曾于患有 2019-nCoV 的病人有过密切接触²的人士。
3. 请注意：在中国大陆的机场过境不被视为曾经到过中国大陆。
4. 符合第 2 段落所列条件但病情稳定的疑似病例应立即转介至最近的私人西医诊疗所，以便立即作进一步管理。
5. 如果病人病情不稳定（即低血压或呼吸急促），请拨电 995 呼叫民防部队救护车，并通知救护车操作员病人是 2019-nCoV 疑似病例。

² 密切接触的定义是：

- 为病人提供护理的人士，包括医护人员或家属，或有其他类似的密切身体接触者；
- 在同一个地点住（例如住过、探访过）的人士。

6. 有轻微呼吸道症状且不符合第 2 段落所列条件的病人应该按照惯例进行临床管理。中医师应提醒家属及其他与患者有密切接的人提高警惕发烧或呼吸短促的症状，若有任何身体不适，尽快求医。

感染控制

7. 中医诊所应该例行检查病人是否发烧和他们出国旅游的记录。患有发烧或呼吸道症状的病人必须戴上手术口罩。诊所应该尽可能把发烧的病人与非发烧的病人进行隔离。

8. 中医师也应采取标准防范措施，包括戴上手术口罩和在日常临床护理时保持良好的手部卫生习惯。环境清洁工作应该定期进行。

9. 若对此通告有疑问，请发送电邮至 MOH_INFO@moh.gov.sg.



卫生部医药总监
王建忠副教授

以上文件以英语原文为准

重要提示

本通告取代卫生部于 2020 年 1 月 16 日发出的题为"中国武汉市不明原因的病毒性肺炎"的卫生部通告 09 / 2020。

附件 A

关于 2019 新型冠状病毒的常见问题解答

1. 武汉市肺炎疫区的起因是什么？

到目前为止，感染源头和传播方式仍不确定。但是，病原体已被确定为一种新型的冠状病毒 (2019-nCoV)。冠状病毒是一种大型病毒家族，它可以导致普通感冒、严重急性呼吸道综合征 (SARS) 和中东呼吸综合征 (MERS) 等疾病。尽管已经出现了包括医护人员集群在内的人传人的现象，传染病的来源和传播方式仍不明确。

2. 2019-nCoV 感染的体征与症状有哪些？

据报道，受 2019-nCoV 感染者通常会出现发烧、咳嗽和肺炎。

3. 2019-nCoV 是否有疫苗或治疗方法？

目前还没有针对 2019-nCoV 的疫苗或特别的治疗方法。现有治疗以支持性治疗为主，并以病人的临床情况而定。

4. 在治疗 2019-nCoV 疑似病患时，应该穿戴什么个人防护装备？

在接触疑似 2019-nCoV 病人时，建议采取标准感染控制及飞沫传播防护措施（例如在为病人做检查时穿戴 N95 口罩，若病人有呼吸道症状，应让病人戴上手术口罩）。

5. 对于必须前往已报告有 2019-nCoV 病例的国家的病人，我可以给予什么建议？

您应该建议病人：

- 避免接触活生动物，包括家禽和禽鸟，以及避免服食生肉或未煮熟的肉类；
- 避免近距离接触身体不适或出现疾病症状的人士；
- 保持良好的个人卫生习惯；
- 经常用肥皂洗手（例如在处理食物或饮食前、上厕所后，或当手部在咳嗽或打喷嚏时被呼吸道分泌物弄脏后）；
- 如果出现咳嗽或流鼻涕等呼吸道症状，应戴上口罩；
- 在咳嗽或打喷嚏时，用纸巾捂住嘴巴，并立即把脏纸丢弃在垃圾桶内；以及
- 如果感到不适，应及时求医。

6. 如果符合 2019-nCoV 疑似病例定义的病人拒绝转介到指定西医诊所接受进一步检查，我该怎么办？

告知病人或监护人，此举是出于他们个人和家人的利益着想。若病人继续拒绝转介，请拨电至 9817 1463（24 小时热线）寻求咨询与援助。如果有需要，当局可发出法令，强制病人到医院接受检查。

7. 从中国返回新加坡的员工是否应该被隔离？

从中国返回的员工不必例行被隔离。但是，他们应该在中国返回后的至少 14 天内密切观察是否出现任何发烧或呼吸道症状。任何生病的员工应该及时转接，以便进行检查。