The Ministry of Health has confirmed imported cases of the Wuhan Coronavirus (“Wuhan virus”) infection in Singapore since 23 January 2020 and the Government has stepped up our safeguards accordingly. As the Wuhan virus situation in China continues to evolve, MOH advises travellers to defer all non-essential travel to Mainland China.

UPDATE OF SUSPECT CASE DEFINITION

2. In view of the above, we have expanded the suspect case criteria 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 14 days before onset of illness; or

   b) A person with an acute respiratory illness of any degree of severity who, within 14 days before onset of illness had:

      a. Been to Wuhan city or Hubei Province, China; OR
      b. Been to a hospital in mainland China; OR
      c. Had close contact with a case of Wuhan virus infection.

3. Please note that transit only 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. If the patient refuses referral despite your advice, please call the Surveillance Duty Officer of the Communicable Diseases Division at 9817 1463 (available 24 hours) for assistance and advice.

6. 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 Wuhan virus suspect case.

\(^1\) 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.

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MANAGEMENT OF STAFF AND VOLUNTEERS WHO HAVE RETURNED FROM MAINLAND CHINA

7. As a precautionary measure to protect the community, all staff and volunteers returning to Singapore from Mainland China should be asked to take a Leave of Absence (LOA) from work and monitored closely for any fever or respiratory symptoms for at least 14 days after returning from China. Please refer to Annex A, Frequently Asked Questions (FAQ) Q6 for more details.

8. Any staff and volunteer who fall ill should be promptly asked to see a GP for evaluation.

9. Your continued vigilance against possible cases of Wuhan virus is greatly appreciated. For clarification on this circular, please email MOH_INFO@moh.gov.sg.

A/PROF BENJAMIN ONG
DIRECTOR OF MEDICAL SERVICES
MINISTRY OF HEALTH

IMPORTANT

ANNEX A

FREQUENTLY ASKED QUESTIONS ON WUHAN VIRUS

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. 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 Wuhan virus infection?

People infected with Wuhan virus were reported to typically experience fever, cough and pneumonia.

3. Is there any vaccine or treatment for Wuhan virus infection?

No vaccine or specific treatment for Wuhan virus infection is currently available. Treatment is supportive and based on the patient’s clinical condition.

4. What advice can I give to patients who are travelling to countries where cases of Wuhan virus 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.

5. Should staff and volunteers returning from China be quarantined?

As a precautionary measure to protect the community, all staff and volunteers working in TCM and acupuncture clinics who have returned to Singapore from Mainland China should inform their institutions of their travel history and will be required to take a Leave of Absence (LOA) for 14 days upon their return. (Refer to Figure 1 for worked example.)

This applies to all staff and volunteers returning from Mainland China from 28 January 2020, as well as those who returned in the last 14 days. Employers should grant the LOA as paid leave, over and above the staff’s annual leave entitlement.

In addition, they should monitor their health closely, and see a doctor promptly if they are unwell and inform their doctor of their travel history. If they have a fever or respiratory symptoms (e.g. cough, shortness of breath), they should wear a mask and call the clinic ahead of the visit.

Staff and volunteers may return to work after they have cleared the 14 day LOA and they have not developed any symptoms.
6. **What infection control practices should I adopt?**

As part of infection control, clinics should routinely screen patients for fever and travel history. Patients with respiratory symptoms or fever should be asked to don a surgical mask. Suspect patients should be placed in a separate area where possible.

As part of routine clinical care for all other patients, TCM practitioners are advised to practice standard precautions and good hand hygiene.

Cleaning of premises should be carried out regularly:

- Use of 70% alcohol
- Do not spray cleansing agents as it may aerosolise infective agents
- Cleansing agent should be applied using a damp cloth, left for at least 10 minutes but no longer than 30 minutes, thoroughly rinsed off and the area dried

7. **What should a TCM practitioner/clinic staff do if he refers a suspect case to a General Practitioner? Does he need to quarantine himself?**

There is no need to quarantine himself/herself. MOH will initiate contact tracing if case is positive and will follow up with clinic on further measures.

8. **Can patients be encouraged to call the hotline for ambulance to fetch them to TTSH / KKWCH if they suspect they have symptoms instead of going to the GP clinics and infecting others in the process?**

Patients are advised to visit a doctor at any medical clinic to be assessed. Patients should seek medical treatment at the ED only for serious, urgent and life-threatening emergencies.

9. **Where can I get the latest information on the Wuhan virus?**

27 Jan 2020

致：中医注册执业者

MOH CIRCULAR 20/2020

修订武汉冠状病毒（武汉病毒）的疑似病例定义

卫生部已确认自2020年1月23日以来在新加坡发生的武汉冠状病毒（“武汉病毒”）感染病例，政府也相应加强防范措施。随着中国武汉病毒情况持续演变，卫生部建议国人把到中国大陆的非必要旅行推迟。

疑似案例定义的更新

2. 基于上述情况，疑似案件标准扩展到以下内容：

a）具疑似肺炎的临床体征和症状或严重呼吸道感染伴呼吸急促症状，并在发病前的14天内到过中国大陆的人士；或

b）患有任何严重程度的急性呼吸系统疾病的人士，并在发病前14天内
   a. 到过中国武汉市或湖北省；或
   b. 到过中国大陆的医院；或
   c. 与武汉病毒感染病例密切接触1。

3. 请注意：仅在中国大陆的机场过境不被视为已前往中国大陆。

1 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。
疑似病例定义的管理和通知

4. 符合以上 2 段所列条件但病情稳定的疑似病例应立即转诊至最近的全科医生（GP） 进行进一步评估。

5. 如果患者不顾您的建议仍拒绝转诊，请拨电至监视与传染病处官员 9817 1463（24 小时热线）寻求咨询与援助。

6. 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武汉病毒疑似病例。

从中国返回的工作人员和志愿工作者的管理

7. 作为保护社区的预防措施，雇主应该要求中国返回的职员和志愿工作者请假至少 14 天并密切观察是否出现任何发烧或呼吸道症状。雇主应及时嘱咐生病的职员和志愿工作者向 GP 求诊，以便进行检查。请参考附件 A 所列出常见问题（FAQ）题 6 阅读详情。

8. 非常感谢您对武汉病毒可能发生的情况保持警惕。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 23 日发出的题为“最新情况：2019 年中国新型冠状病毒”的卫生部通告 13 / 2020。
附件 A

关于武汉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明确。但是，病原体已被确定为一种新型的冠状病毒。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. 武汉病毒感染的体征与症状有哪些?
据报道，受武汉病毒感染者通常会出现发烧、咳嗽和肺炎。

3. 是否有对抗武汉病毒的疫苗或治疗方法?
目前还没有针对武汉病毒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. 对于必须前往已报告有武汉病毒病例的国家的病人，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。
5. 从中国返回新加坡的职员和志愿工作者是否应该被隔离？

作为保护社区的预防措施，所有从中国大陆返回新加坡的中医和针灸诊所的所有职员包括志愿工作者，都应该通知雇主他们的旅游记录，并在回国后必须向雇主请假 14 天。（请参阅图 1。）

从 2020 年 1 月 28 日起生效，从中国大陆返国，以及过去 14 天回国的职员，雇主应该在职员享有的年假之外，批准额外 14 天的有薪假期。

此外，他们也应该密切留意身体状况，如果身体不适，应及时向 GP 求诊，并通知医生他们的出国旅游史。如果出现发烧或呼吸道症状（如咳嗽、呼吸短促），应该先戴上口罩，再到 GP 诊所求医。

14 天的休假期后如果职员和志愿者没有出现任何症状，便可以重返工作岗位。

图 1：缺勤假的示例

<table>
<thead>
<tr>
<th>Day 0 (返回国日期)</th>
<th>Day 1</th>
<th>…</th>
<th>Day 14</th>
<th>Day 15 (重返工作岗位日期)</th>
</tr>
</thead>
<tbody>
<tr>
<td>例如： 14 Jan</td>
<td>例如：15 Jan</td>
<td>…</td>
<td>例如：28 Jan</td>
<td>例如：29 Jan</td>
</tr>
</tbody>
</table>

6. 我应该采取什么感染控制措施？

作为感染控制措施之一，诊所应例行检查病人是否发烧和他们出国旅游的记录。患有呼吸道症状或发烧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。对与其他病人的例常临床护理，中医师亦应该采取预防措施，及保持良好的手部卫生。

诊所的清洁工作应该定期进行：

- 使用 70%的酒精
- 不应喷洒洁净剂，以免感染物质气化而可能被吸入
- 通过潮湿的布料，使用洁净剂清洗界面，让洁净剂在界面留下至少 10 分钟但不超过 30 分钟，之后彻底冲洗，然后将界面晾干。

7. 中医师或诊所助理在转诊病人到全科医生后应该做什么？需要自我隔离吗？

中医师或诊所助理无需自我隔离。若疑似病人之后被确诊，卫生部将追踪曾与病人有过密切接触的人士，且通知诊所应采取的进一步措施。
8. 如果病人怀疑自己是疑似病例，与其找全科医生求诊而可能在途中传染他人，可否鼓励病人自己拨打救护车热线直接送去医院？

病人应该到全科诊所求医，以便进行评估。病人只有在发生严重、紧急和危及生命的情况下，才到急诊部求医。

9. 我可以从哪里获取有关武汉病毒的最新信息？