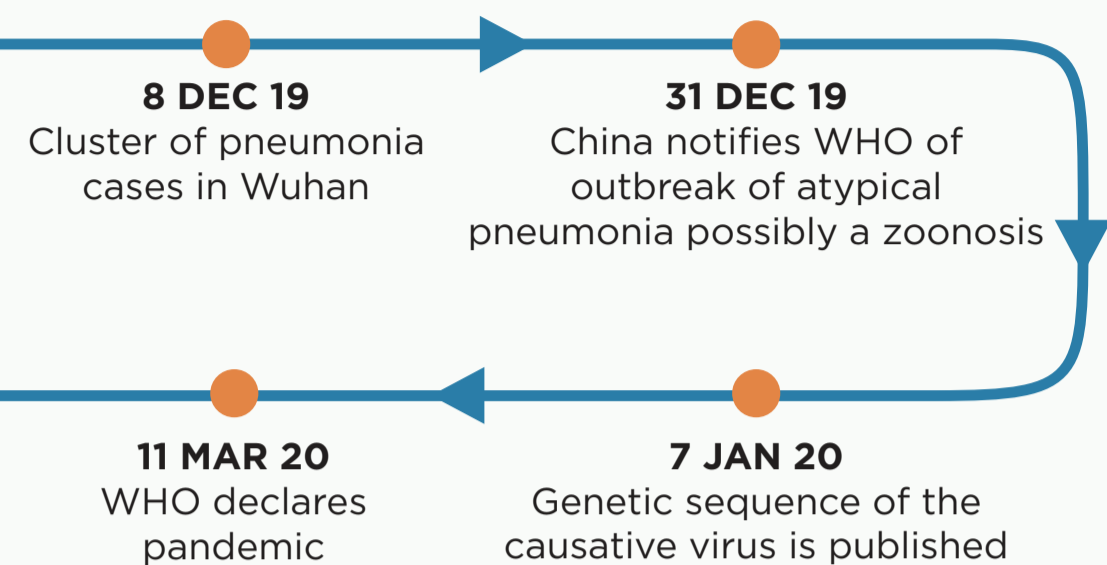


# FACTSHEET COVID-19

## TIMELINE



## EPIDEMIOLOGY

### COVID-19 CAUSED BY SARS-CoV-2

**Incubation period:** 2-14 days (median 4 days)

**Transmission:** Respiratory droplets or direct contact with fomites. Asymptomatic people have been shown to shed virus but are not main drivers of the epidemic.

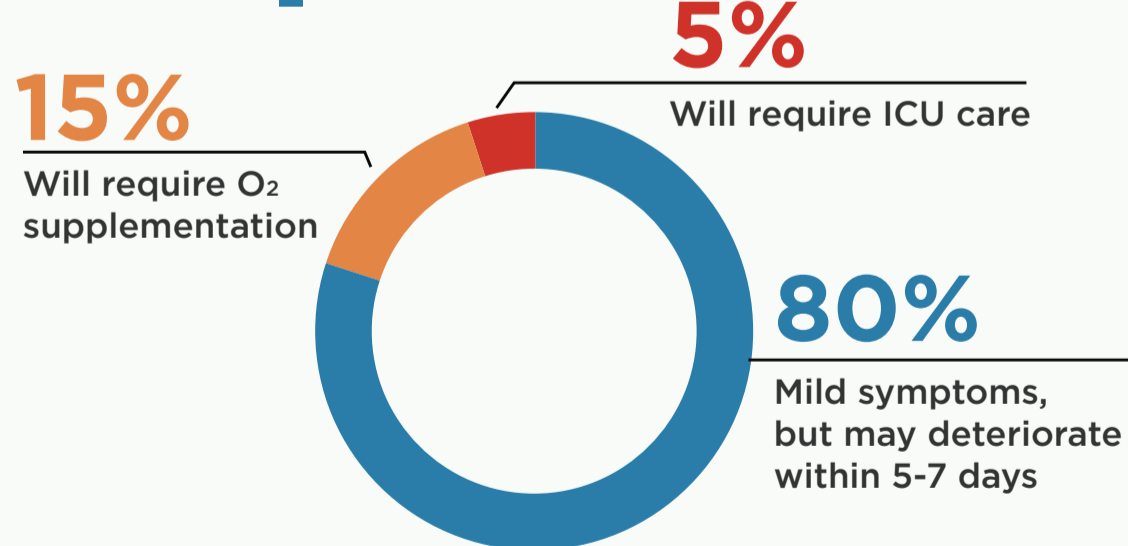
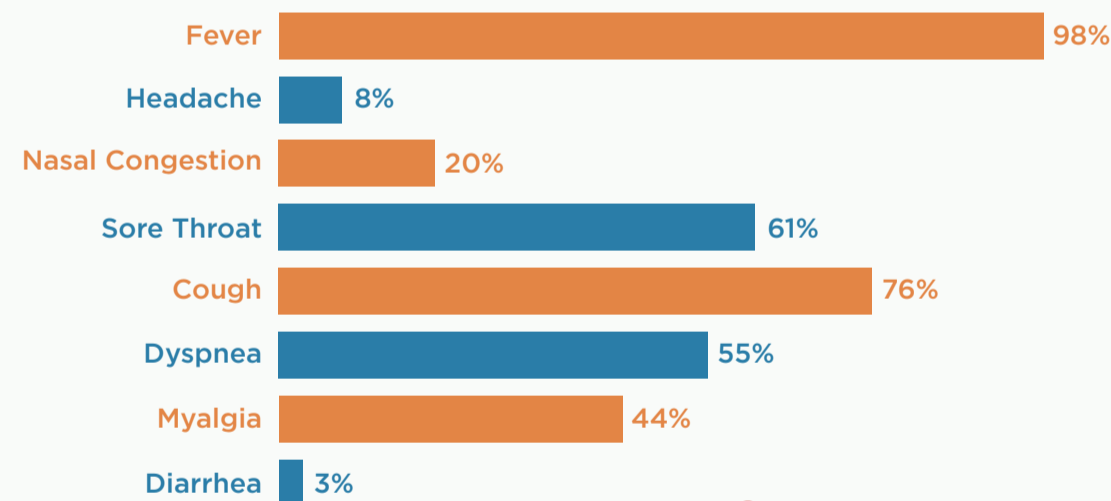
**Ro** (secondary infections from index): 2.2

**Case Fatality Rate (CFR)** (intact health systems): 0.8 - 1%

**CFR** (health system overwhelmed): 2.1 - 7.3%

## CLINICAL SYMPTOMS

### COVID-19 COMMON SYMPTOMS



### WHAT TO WATCH OUT FOR?

#### HIGH RISK FEATURES

- > 60 years old
- Comorbidities

#### RED HERRINGS

- False positive Dengue IgM with COVID-19 infections

## DIAGNOSTIC INVESTIGATIONS

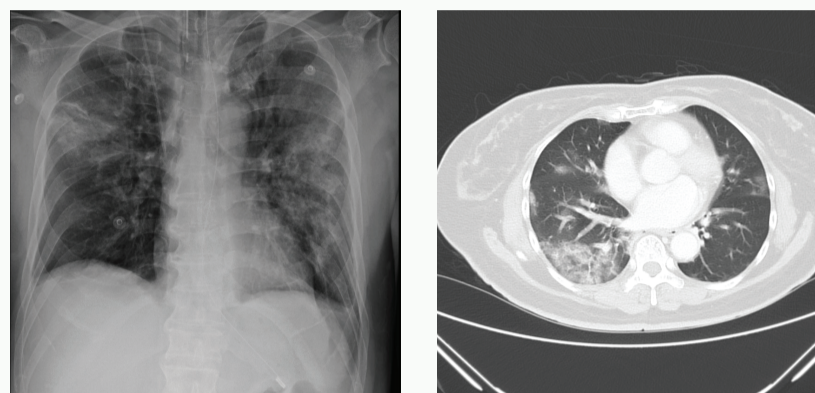
### HOW DO I TEST FOR IT?

- COVID-19 RNA PCR (Nasopharyngeal/ throat swab / sputum preferable) in universal transport medium 2 x 24 hours apart
- Turn around time= 6 hours
- PCR may be negative early in disease. If clinically suspicious, keep patient isolated and may require > 2 tests
- PCR may fluctuate (positive → negative → positive)
- PCR may represent viral shedding in asymptomatic patients

### OTHER FEATURES:

↓ Platelets & Lymphocytes, ↑ LDH ↑↑ CRP portends worse prognosis

**Chest Imaging:** bilateral infiltrates, peripheral opacities and consolidations

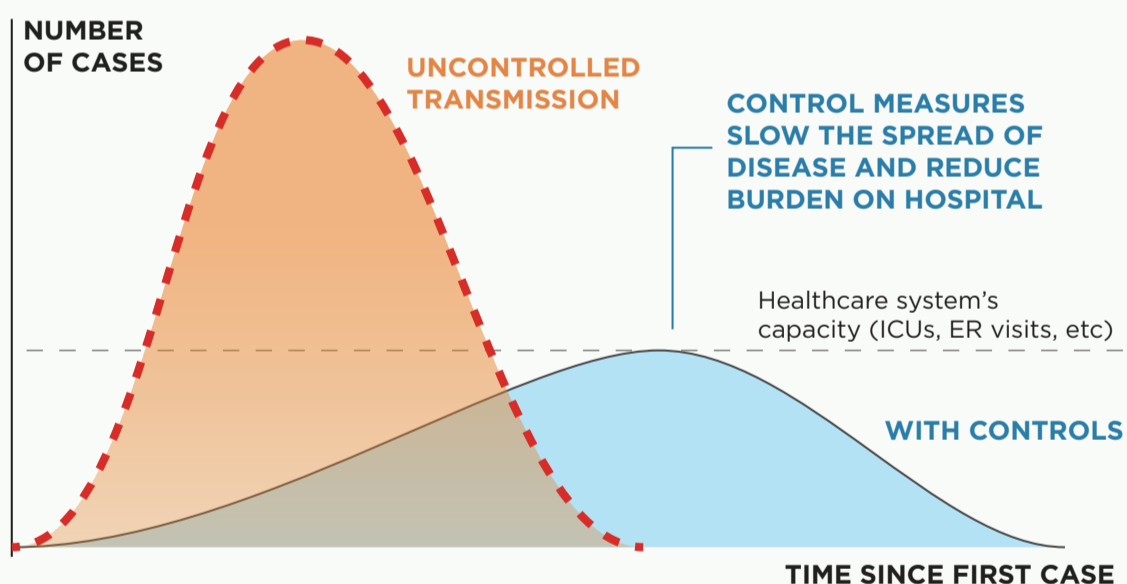


## MANAGEMENT

- Dedicated teams in Designated Pandemic Wards
- Supportive treatment
- Treat co-infections
- No specific anti-SARS-CoV-2 has been proven effective at this time.
  - Repurposed Protease inhibitors: Lopinavir and Darunavir
  - RNA polymerase inhibitor: Remdesivir
  - Hydroxychloroquine
  - Interferon beta-1b
  - Convalescent serum
- Intubate electively in a controlled setting if respiratory failure anticipated

## PREVENTIVE MEASURES

### CONTROL STRATEGIES TO FLATTEN THE EPIDEMIC CURVE



- + IDENTIFICATION OF CASES
- + ISOLATION WITH NEGATIVE PRESSURE/CONTACT PRECAUTIONS FOR ALL POSITIVE COVID-19 CASES

#### + INTERVENTIONS:

- Full PPE (N95, eye protection, gown and gloves)
- PAPR may be used if trained and available for the following aerosol generating procedures: bronchoscopy, tracheostomy, non-invasive ventilation, suctioning, intubation
- Hand hygiene and surgical masks in all clinical areas
- Universal transport medium of suspect/positive cases should be hand carried to the lab (double bagged and in cryo-box)
- Enhanced environmental cleaning
- Contact tracing and screening
- Limit large gatherings, minimize overseas travel, social distancing
- Stay home if not feeling well
- If you have an unprotected exposure, inform your reporting officer and Occupational Health Clinic

## USEFUL LINKS

**Workflows:** <http://nuhs-portal/clinical-matters/update-on-wuhan-virus.html>

**Singapore:** [www.moh.gov.sg/covid-19](http://www.moh.gov.sg/covid-19)

**Regional:** <https://infographics.channelnewsasia.com/covid-19/map.html>

**Global:** <https://systems.jhu.edu/research/public-health/ncov/>