MERS-CoV Case Algorithm

Investigation and public health management of possible cases of severe acute respiratory illness associated with Middle East respiratory syndrome coronavirus (MERS-CoV)

POSSIBLE CASE
Any person with severe acute respiratory infection requiring admission to hospital:
- with symptoms of fever (≥ 38°C) or history of fever, and cough AND
- with evidence of pulmonary parenchymal disease (eg clinical or radiological evidence of pneumonia or acute respiratory distress syndrome (ARDS)) AND
- not explained by any other infection or aetiology
AND AT LEAST ONE OF
- history of travel to, or residence in an area where infection with MERS-CoV could have been acquired in the 14 days before symptom onset OR
- close contact 4 during the 14 days before onset of illness with a confirmed case of MERS-CoV infection while the case was symptomatic OR
- healthcare worker based in ICU caring for patients with severe acute respiratory infection, regardless of history of travel or use of PPE OR
- part of a cluster of two or more epidemiologically linked cases within a two-week period requiring ICU admission, regardless of history of travel

Meets possible case definition

- Local clinician /microbiologist - clinical risk assessment to be undertaken in conjunction with health protection team and duty microbiologist/virologist at local PHE public health laboratory - ensure full PPE is worn (see infection control advice) - notify local PHE health protection team (HPT) and local PHE laboratory - ensure appropriate samples are collected and sent to both the designated PHE MERS-CoV testing lab and local PHE lab – contact local lab for advice - if a cluster is suspected, establish if there is an epidemiological link between cases - inform PHE Colindale by email (respiratory.lead@phe.gov.uk), or contact the duty doctor if out of hours and enter case details on HPZone (Infection and specific context: MERS-CoV - collect possible case dataset (Form 1) – email to PHE Colindale

PHE testing laboratory result Negative for MERS-CoV

DISCARD

PHE testing laboratory result positive for MERS-CoV (presumptive positive)

Reference laboratory result Negative for MERS-CoV

DISCARD

Reference laboratory result positive for MERS-CoV = confirmed case

BASELINE
- Clinician/microbiologist - collect appropriate baseline samples and send to PHE reference laboratory (RVU) – see laboratory guidance
- PHE HPT

ADDITIONALLY FOLLOW PHE MERS-CoV CLOSE CONTACT ALGORITHM

FOLLOW UP
- Clinician/ microbiologist (RVU) - ensure appropriate sequential follow-up samples are taken after discussion with the PHE Colindale incident control team, and sent to PHE reference laboratory. See laboratory guidance
- PHE HPT - complete confirmed case follow-up Form 1b 14-21 days since Form 1a completed – email to PHE Colindale

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