



Public Health
England

Protecting and improving the nation's health

MERS-CoV Close Contact Algorithm

Public health investigation and management of close contacts of
Middle East Respiratory Syndrome Coronavirus (MERS-CoV) cases
(v17 29 January 2019)

CLOSE CONTACT¹ of a confirmed MERS-CoV case as advised by PHE Incident Management Team (IMT)

- HPTs to collect baseline data on close contacts¹ (**Form 2a²**) – email to NIS Colindale (respiratory.lead@phe.gov.uk)

Initial assessment

Is the contact ILL with any of these symptoms which developed in the last 14 days since exposure to the confirmed case?

- Acute respiratory symptoms (cough/sore throat/coryza/shortness of breath)
- AND / OR Fever ($\geq 38^{\circ}\text{C}$)

YES

CONTACT CURRENTLY ILL (Possible case)

- Inform national IMT and implement infection control procedures
- Ensure patient isolates
- Inform national IMT (or NIS Colindale duty doctor if out-of-hours)
- Health Protection Teams (HPTs) to collect baseline data (**Form 2a²**) and email to NIS Colindale (respiratory.lead@phe.gov.uk)
- Ensure appropriate samples³ are collected using full PPE⁴ (infection control advice [here](#)) and sent to the designated PHE MERS-CoV testing lab (see lab guidance [here](#))

NO

Was the contact ILL at anytime with any of the symptoms mentioned above in the last 14 days but has since recovered?

- National IMT to advise if laboratory sampling required

YES

NO

Is the contact within 14 days since last exposure and still asymptomatic?

- National IMT to advise if laboratory sampling required

YES

NO
No symptoms developed during the whole of the 14-day period

14 days FOLLOW-UP complete

- Complete contact follow-up form (**Form 2b²**) – email to NIS Colindale

FOLLOW-UP until 14 day period complete

- Complete contact follow-up form (**Form 2b²**) – email to NIS Colindale
- National IMT to advise if laboratory sampling required

Negative lab test for MERS CoV

Positive lab test for MERS CoV

Patient becomes a presumptive positive case
- follow MERS-CoV Possible Case Algorithm

Important notes

1. Close contact is defined as (from date of illness onset in index case and throughout their symptomatic period)
 - any person who had prolonged face-to-face contact (>15 minutes) with a symptomatic confirmed case of MERS-CoV in a household or other closed setting
 - health or social care worker who provided direct clinical or personal care or examination of a symptomatic confirmed case of MERS-CoV, or was within 2m of a symptomatic case or had direct contacts with body fluids from a symptomatic case, for any length of time
2. Forms 2a and 2b mentioned in the algorithm are provided on request by PHE Colindale to HPTs or are available [online](#).
3. If there is no possibility of laboratory confirmation because the patient or samples are not available and the symptoms are not already explained by any other infection or aetiology, the symptomatic contact becomes a probable case (see [WHO interim recommendations](#) for further details).
4. Full PPE include correctly fitted high filtration respirator (FFP3), gown, gloves and eye protection as a minimum (refer [here](#) for full details).