



STATE OF HAWAII  
DEPARTMENT OF HEALTH  
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In reply, please refer to:  
File:

April 8, 2020

**MEDICAL ADVISORY: UPDATE #9—CORONAVIRUS DISEASE 2019 (COVID-19)**

Dear Healthcare Provider:

The Hawaii Department of Health (HDOH) is providing the following COVID-19 updates:

**ASYMPTOMATIC/PRE-SYMPTOMATIC INFECTION AND TRANSMISSION:**

Studies of documented SARS-CoV-2 transmission during the pre-symptomatic incubation period have been published recently, and asymptomatic transmission has been suggested in other reports.<sup>1</sup> The exact degree of SARS-CoV-2 viral RNA shedding that confers risk of transmission is not yet clear. Risk of transmission is thought to be greatest when patients are symptomatic since viral shedding is greatest at the time of symptom onset and declines over the course of several days to weeks. However, the proportion of SARS-CoV-2 transmission in the population caused by asymptomatic or pre-symptomatic infection compared with symptomatic infection is unclear.

Although asymptomatic/pre-symptomatic infection and transmission may occur, in general HDOH recommends testing only symptomatic persons for the following reasons:

- Laboratories are facing ongoing shortages of kits and consumable supplies
- Personal protective equipment (PPE) required to collect specimens and to perform testing are in critically short supply. Indiscriminate use of PPE will exacerbate shortages placing healthcare and laboratory personnel at risk for infection.
- All close contacts of COVID-19 patients should be in 14 days of quarantine from the last point of exposure to a confirmed case or, if exposure is ongoing, from the point of time when the case is released from isolation. Contacts who strictly adhere to quarantine will effectively minimize their risk to others. Testing asymptomatic contacts will not change or shorten their quarantine requirement.
- Testing of asymptomatic persons should be reserved for selected situations as guided by specific public health or infection control objectives (e.g., to implement cohorting during a nursing home outbreak).

**ISOLATION AND QUARANTINE FOR HEALTHCARE PERSONNEL (HCP):**

For **asymptomatic** healthcare personnel with medium or high-risk exposures<sup>2</sup> to patients with COVID-19 or their secretions/excretions, the Centers for Disease Control and Prevention (CDC) recommends exclusion from work for 14 days after their last exposure.

<sup>1</sup> See "Asymptomatic and Pre-Symptomatic Transmission" at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html>

<sup>2</sup> <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

**\*\* This message contains privileged communication between the Department of Health and clinicians and should not be shared with or forwarded to those not included among the original recipients. \*\***

Facilities may *consider* allowing asymptomatic HCP who have had an exposure to a COVID-19 patient to continue to work after options to improve staffing have been exhausted and in consultation with their infection control/occupational health programs. These HCP should:

- Report temperature and absence of symptoms each day prior to starting work
- Wear a facemask while at work for the 14 days after the exposure event, assuming a sufficient supply of facemasks

If HCP develop even mild symptoms consistent with COVID-19, they must:

- Cease patient care activities
- Don a facemask (if not already wearing)
- Notify their supervisor or occupational health services before they leave work.

### **OBSTETRIC CARE FOR COVID-19 POSITIVE MOTHERS:**

Healthcare facilities providing obstetric care for pregnant patients with confirmed COVID-19 or pregnant persons under investigation (PUI) should follow appropriate isolation of patients and conduct training for all HCP in maternity and newborn care units on adherence to infection control practices and PPE use to prevent transmission of the SARS-CoV-2 virus.

Infants born to mothers with confirmed COVID-19 should be considered PUIs and should be isolated according to CDC guidance.<sup>3</sup> Transmission after birth via contact with infectious respiratory secretions is a concern. To reduce the risk of transmission from mother to newborn, facilities should consider temporarily separating the mother with confirmed COVID-19 or is a PUI from her baby until mother's transmission-based precautions are discontinued.<sup>4</sup>

For further information, see [“Interim Considerations for Infection Prevention and Control of COVID-19 in Inpatient Obstetric Healthcare Settings”](#).

In addition, the American Academy of Pediatrics recently published [“Initial Guidance: Management of Infants Born to Mothers with COVID-19”](#) addressing the care of infants whose mothers have suspected or confirmed COVID-19, including interim guidance on breast feeding, alternative well newborn care, newborn viral testing, and hospital discharge.

### **RESOURCES FOR PATIENTS AND PROVIDERS:**

Information for patients to assist in maintaining home isolation may be found at HDOH's COVID-19 website “If You Become Sick”:

<https://health.hawaii.gov/coronavirusdisease2019/what-you-can-do/if-you-become-sick/>

Detailed information for providers (e.g., evaluation and testing, infection control, sentinel surveillance, optimizing PPE supply, etc.) may be found at the following websites:

- HDOH's COVID-19 website “For Clinicians”:  
<https://health.hawaii.gov/coronavirusdisease2019/for-clinicians/>

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<sup>3</sup> [https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Finfection-control%2Fcontrol-recommendations.html)

<sup>4</sup> <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html>

- CDC’s COVID-19 website “For Healthcare Professionals”:  
<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html>

**This is a rapidly evolving situation.** To ensure you are accessing the latest information, please visit HDOH’s COVID-19 webpage at: <https://health.hawaii.gov/coronavirusdisease2019/> or CDC’s COVID-19 website at: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

**WHEN TO NOTIFY DOH OF A CONFIRMED OR SUSPECTED COVID-19 CASE**

**Please notify infection control personnel (as appropriate) and DOCD immediately if:**

- You have received positive COVID-19 test results for a patient tested at clinical laboratories
- You suspect a cluster of acute respiratory illness, especially in a congregate setting

**Notification for these scenarios should occur regardless of whether testing is requested from HDOH or clinical laboratories. Suspected COVID-19 is considered an URGENTLY REPORTABLE condition.**

If you have any questions or need to report a patient with suspected COVID-19, please contact us at one of the numbers below.

Oahu (Disease Reporting Line).....	(808) 586-4586
Maui District Health Office.....	(808) 984-8213
Kauai District Health Office.....	(808) 241-3563
Big Island District Health Office (Hilo).....	(808) 933-0912
Big Island District Health Office (Kona).....	(808) 322-4877
After hours on Oahu.....	(808) 600-3625
After hours on neighbor islands.....	(800) 360-2575 (toll free)

We appreciate your continued assistance in protecting our community.

Sincerely,



Sarah Y. Park, MD, FAAP  
State Epidemiologist