

**From:** [EOC Operations \(MOHLTC\)](#)  
**Subject:** First presumptive confirmed case for the novel coronavirus (2019-nCoV) in Ontario  
**Date:** January 25, 2020 9:42:31 PM  
**Attachments:** [CMOH Memo - Novel Coronavirus 2020-01-10 Shared.pdf](#)  
[ACMOH letter 2020-01-23.pdf](#)  
[Case Definition 2019-nCoV. 2020-01-23docx.pdf](#)  
[Situation Report #1 2019-nCoV \(Novel Coronavirus\) .msg](#)

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**Sent of behalf of Dr. Barbara Yaffe, Office of the Chief Medical Officer of Health,**

I am writing to let you know that today we identified our first presumptive confirmed case for the novel coronavirus (2019-nCoV) in Ontario.

A presumptive confirmed case is one that has been confirmed by our PHOL, but not yet by the National Microbiology Laboratory (NML). The sample is now on its way to the NML in Winnipeg for final confirmation.

The ministry is actively coordinating efforts with the Sunnybrook Health Sciences Centre, Toronto Public Health, Public Health Ontario and other partners regarding clinical care and case and contact management and will share further information when available. We are also working closely with the Public Health Agency of Canada.

We will be scheduling a teleconference on Monday, January 27 at 9am to share more information with you.

If you have any questions or concerns, please contact the Health Care Provider Hotline at 1-866-212-2272.

Qs and As for your reference.

**Should I be concerned that there is a presumptive confirmed case in Ontario?**

It is not unexpected that we have found a presumptive confirmed case in Ontario as many other contrived have done so including France, the US and Australia. This does not change the overall risk to Ontario – which is still considered low.

We anticipate in the coming weeks there may be more cases identified in Ontario, other parts of Canada or other countries who have individuals with travel history to the impacted area or other significant epidemiologic links.

**As a health care worker, what should I do to keep myself safe at work?**

All health care workers should continue their usual activities, processes and protocols and follow recommendations as provided by their manager/ supervisor. This will ensure a consistent approach to recommendations for management of patients presenting with symptoms compatible with 2019-nCoV (case definition of Person Under Investigation (PUI) below).

It is expected that PUIs will be promptly triaged through the Emergency Department and immediately put into droplet/contact/airborne precautions for assessment by the appropriate clinicians, in consultation with Infectious Diseases and Infection Prevention and Control.

For health care workers working in community or other settings who suspect a patient meets the definition of a PUI, arrangements should be made with a receiving Emergency Department for transfer where appropriate.

Health care workers providing care to PUIs in a hospital setting (or in their environment) should use Routine Practices and Additional Precautions (Contact, Droplet and Airborne). These precautions include:

- hand hygiene;
- use of airborne infection isolation rooms when possible;
- masking the patient with a surgical mask when outside of an airborne infection isolation room;
- use of gloves, gowns, fit-tested, seal-checked N95 respirators and eye protection by health care workers when entering the same room as the patient or when transporting or caring for the patient.

The use of Airborne Precautions is a higher level of precaution than is being recommended by PHAC or the WHO, or that is normally recommended for coronavirus. The ministry is recommending that health care workers apply Airborne Precautions based on a precautionary basis to this novel virus for which little information about transmission and clinical severity is available.

### **As a health care worker what should I do if I see a patient who I think might have this virus?**

Health care workers should refer to the case definition for PUI.

If health workers are outside of a hospital setting, they should refer any possible PUIs to hospital for assessment and testing. Health workers in community settings should call the hospital to notify them that a possible PUI will be coming for assessment.

If health workers are in a hospital setting, all possible PUIs should be referred to the emergency room for assessment and possible testing.

The case definition for a Person Under Investigation for 2019-nCov is:

A person with fever and acute respiratory illness, or pneumonia,

AND any of the following:

- Travel to Wuhan, China in the 14 days before onset of illness

OR

- Close contact with a confirmed or probable case of 2019-nCoV

OR

- Close contact with a person with acute respiratory illness who has been to Wuhan, China within 14 days prior to their illness onset

EOC Operations  
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Health Care Provider Hotline: 1-866-212-2272

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**From:** EOC Operations (MOHLTC)  
**Sent:** January-23-20 4:43 PM  
**Subject:** Novel Coronavirus in China: January 23, 2020

Please see the attached from Dr. Barbara Yaffe, Office of the Chief Medical Officer of Health regarding Novel Coronavirus in China. This email is being shared with health system partners including associations, unions, regulatory colleges, and Ontario Health. Please share with your members and stakeholders as appropriate.

EOC Operations  
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**From:** EOC Operations (MOHLTC)  
**Sent:** January-10-20 3:50 PM  
**Subject:** Novel Coronavirus in China

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