<table>
<thead>
<tr>
<th>Fever and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)</th>
<th>AND</th>
<th>Any person, including health care workers, who has had close contact with a laboratory-confirmed 2019-nCoV patient within 14 days of symptom onset</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fever and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath)</td>
<td>AND</td>
<td>A history of travel from Hubei Province, China within 14 days of symptom onset</td>
</tr>
<tr>
<td>Fever and signs/symptoms of a lower respiratory illness (e.g., cough or shortness of breath) requiring hospitalization</td>
<td>AND</td>
<td>A history of travel from mainland China within 14 days of symptom onset</td>
</tr>
</tbody>
</table>

The criteria are intended to serve as guidance for evaluation. Patients should be evaluated and discussed with public health departments on a case-by-case basis if their clinical presentation or exposure history is equivocal (e.g., uncertain travel or exposure).

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**Notify medical/nursing staff of potential NCoV patient.**

**Institute Contact and Respiratory Precautions when providing care for patient.**

Precautions should include:

- NIOSH approved N-95 face mask
- Gown
- Gloves
- Face shield or goggles

**DO NOT** go directly to CDC – they will refer you back to local public health.

**Place facemask on patient and place in isolation room or private room with door closed.**

If no rooms available, place patient in secluded waiting area away from other patients. May cohort patients with similar symptoms AND travel/risk history.

**Attempt to limit movement of patient throughout department/hospital. If movement is needed, always keep a face mask on patient.**

**Notify your local public health for assistance in determining need for testing.**