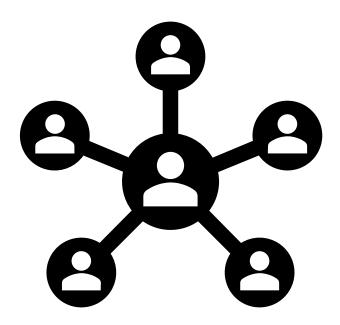
Contact Tracing

Contact Tracing

- What is contact tracing?
 - Contact tracing is identifying persons who may have come into contact with someone who has an infectious disease.
 - These people are referred to as "contacts".
 - Contact tracing is one tool that can be used to contain an outbreak.



Contact Tracing

- Why does public health conduct contact tracing?
 - People in close contact with someone infected with an infectious disease, such as COVID-19, are at higher risk of becoming infected.
 - Contacts could potentially infect others and further the spread of disease.
 - Monitoring these contacts after exposure will help contacts to get care and treatment and will prevent further transmission of the infection.
 - Public health routinely conducts contact tracing for diseases such as tuberculosis and measles, as well as for certain sexually transmitted diseases.

Basic Steps of Contact tracing: 1. Contact Identification

- Once someone is confirmed as infected with a virus, contacts are identified by asking about the person's activities and the activities and roles of the people around them <u>since onset of illness</u>.
- Contacts can be anyone who has been in contact with an infected person during the infectious period: this could be family members, work colleagues, friends, or health care providers.
- Close contact for COVID-19 is defined as the following:
 - a) Being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time while the person was symptomatic; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case

OR

b) Having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on)

If such contact occurs while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection), criteria for being a contact are met.

Basic Steps of Contact tracing: 2. Contact Listing

- All persons considered to have close contact with the infected person should be listed as contacts.
- Efforts should be made to identify every listed contact and to inform them of their contact status, what it means, the actions that will follow, and the importance of receiving early care if they develop symptoms.
- Contacts should also be provided with information about prevention of the disease.

Basic Steps of Contact tracing: 2. Contact Listing, cont.

- Contact of COVID-19 confirmed cases and COVID-19 Patients Under Investigation (PUIs) should be entered into the Outbreak Management System (OMS) and managed by the local health departments
- The following information should be collected:
 - Contact information (e.g., name, address, phone number, date of birth, e-mail)
 - When the exposure occurred
 - Description/conditions of the exposure
 - Duration of the exposure
- Contacts should be asked to self-quarantine for 14 days after the last potential exposure to the COVID-19 case
- Contacts to should be informed they will have to monitor their temperatures and symptoms daily during the 14-day incubation period

Basic Steps of Contact tracing: 3. Contact Follow-up

- Regular follow-up should be conducted with all contacts to monitor for symptoms and detect signs of infection.
- Contact follow-up for COVID-19
 - Monitoring is required to be at least once daily by the Local Health Jurisdiction for 14 days after the last exposure to the COVID-19 case.
 - Initial communication with the contact should do at least the following:
 - Establish rapport,
 - Assess compliance,
 - Set the follow-up schedule, and
 - Establish preferred communication mechanism for daily contact.
 - All monitoring data should be entered into OMS within one business day of each monitoring contact/outreach (same day is preferable).

Basic Steps of Contact tracing: 3. Contact Follow-up, cont.

- Lab testing will NOT be performed on asymptomatic contacts to a confirmed case.
- Lab testing should only be considered for contacts who develop COVID-19 consistent symptoms
- The Michigan State and Local Public Health COVID-19 Standard Operating Procedures should be referenced for details on monitoring contacts and instructions on if the contact becomes symptomatic.

Resources

 Michigan State and Local Public Health COVID-19 Standard Operating Procedures and Traveler Evaluation and Monitoring (TEAM) Protocol COVID-19

https://www.michigan.gov/documents/mdhhs/nCoV SOP TEAM 68 0994 7.pdf

Use of OMS for Monitoring Travelers and Contacts with Potential COVID-19 exposure

Receiving a Referral for a Traveler

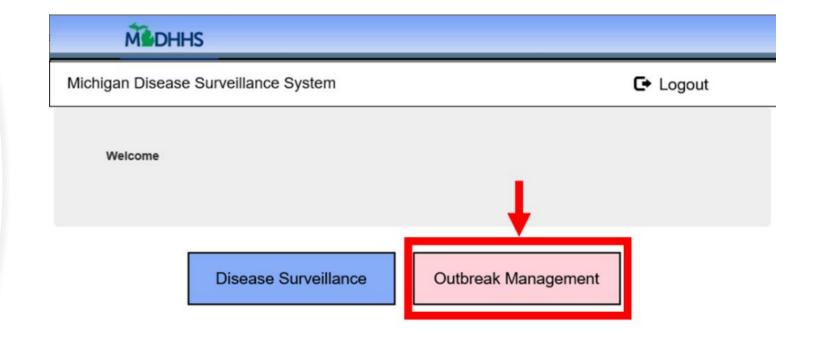
- Traveler referrals are sent via Epi-X from CDC to MDHHS.
- 2. MDHHS enters all available traveler information into OMS and notifies LHDs via the MIHAN.
- 3. The LHD establishes contact with the traveler and monitors health status for 14 days since last exposure; LHD enters information in OMS.
- 4. If a monitored traveler becomes ill with respiratory symptoms/fever, this person should be referred for care and should contact the healthcare facility prior to arrival about their travel/ 2019-nCoV exposure history. Follow suspect PUI procedures.
- If a traveler remains asymptomatic, home-quarantine can be lifted upon completion of the monitoring period.

Receiving a Referral for a Contact to a COVID-19 Case or PUI

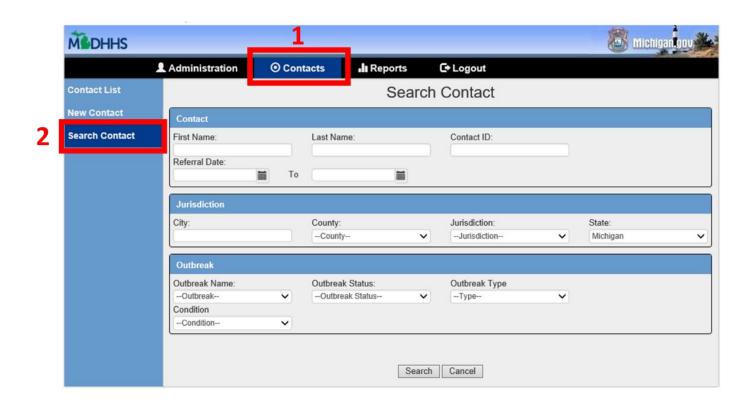
- 1. The LHD enters all available information into the OMS for all contacts of COVID-19 cases and PUIs identified from contact tracing.
- 2. The LHD establishes communication with the contact and monitors health status for 14 days since last exposure; LHD enters information in OMS.
- 3. If the PUI tests negative for COVID-19, home-isolation can be lifted and close contact monitoring ends.
- 4. If a PUI tests positive and is confirmed as a case of COVID-19 contact monitoring continues until 14 days from the last exposure
- 5. If a monitored contact becomes ill with respiratory symptoms/fever, this person should be referred for care and should contact the healthcare facility prior to arrival about their travel/ 2019-nCoV exposure history. Follow suspect PUI procedures.
- 6. If a traveler remains asymptomatic, home-quarantine can be lifted upon completion of the monitoring period.

How to Access OMS

- Log into MiLogin and select Michigan Disease Surveillance System.
- Select 'Outbreak
 Management'. If you do not
 see that button, contact your
 Regional Epidemiologist for
 access.



How to Search for a Contact



- Click on the Contacts Tab (top menu). Some users will be on the Contacts Tab upon accessing OMS.
- 2. Click on Search Contact (left menu).
- 3. Search by name and/or contact ID. Contacts can also be searched for by jurisdiction and/or outbreak.

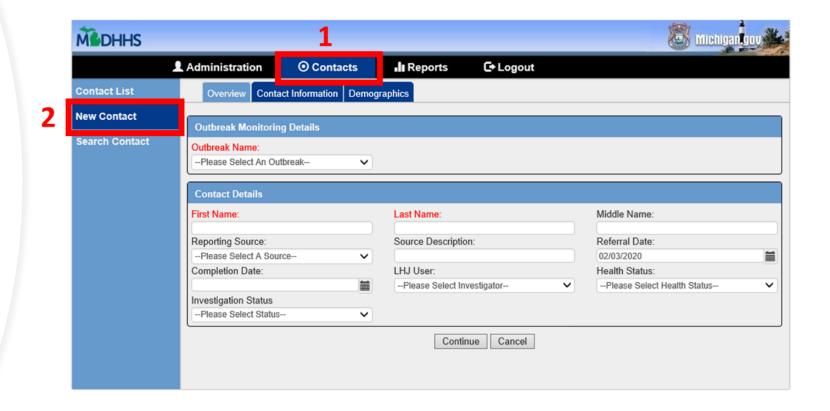
Alternative method to Search for a Contact: Filter Contacts in a specific Jurisdiction

- Click on the Contacts Tab (top menu). Some users will be on the Contacts Tab upon accessing OMS.
- Under Filter By choose the Investigation Jurisdiction and the Outbreak "2019-NCOV-2020-STATEWIDE".
- 3. Click Filter.



How to Enter a New Contact

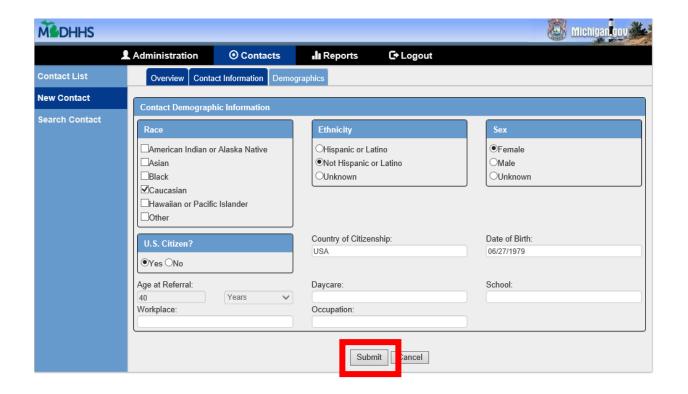
- Click on the Contacts Tab (top menu). Some users will be on the Contacts Tab upon accessing OMS.
- 2. Click on New Contact (left menu).



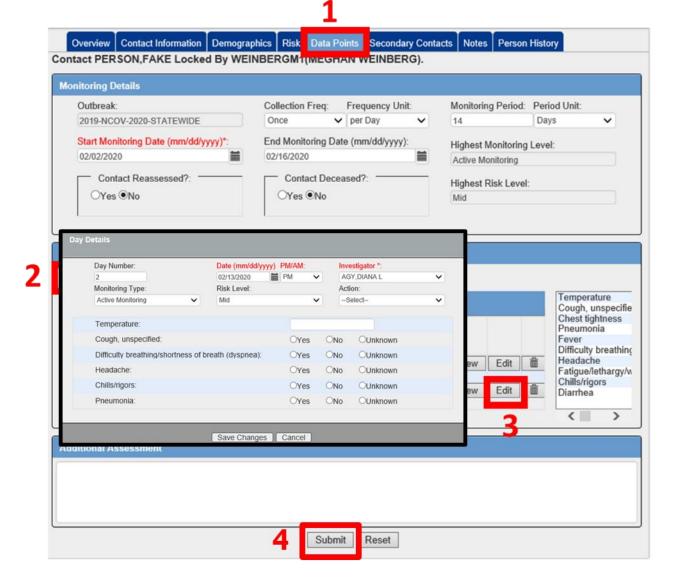
How to Enter a New Contact, cont.

- 3. Enter the contact data. Select the outbreak named "2019-NCOV-2020-STATEWIDE". Required fields are highlighted red. Note: this is just the initial contact entry page; you will not be able to enter monitoring data at this point.
- 4. Click 'submit' to create the contact and the contact will be added to the list of contacts.

See how to search for a contact to find the new contact you entered.



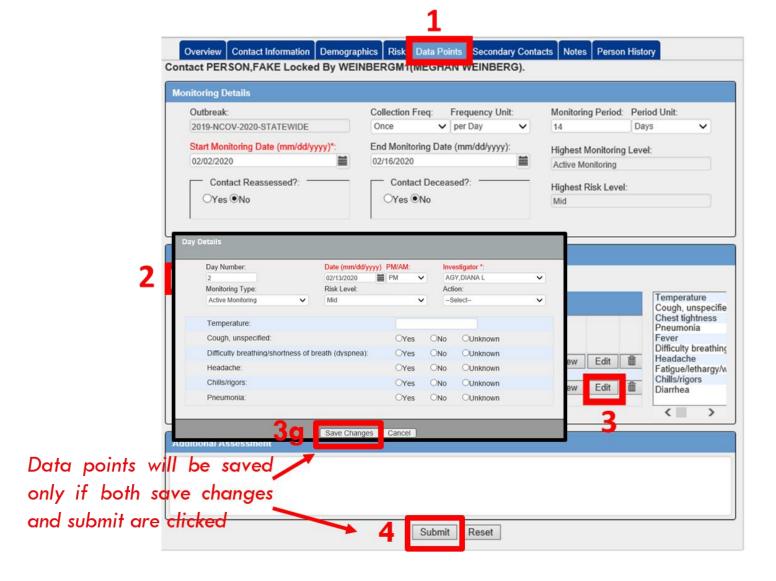
How to Add Monitoring Data to a Contact



After searching for a contact click "Edit" on the contact

- 1. Within the contact, click on the 'Data Points' tab.
- 2. Click "Add a day" to add a monitoring line to the list.

How to Add Monitoring Data to a Contact



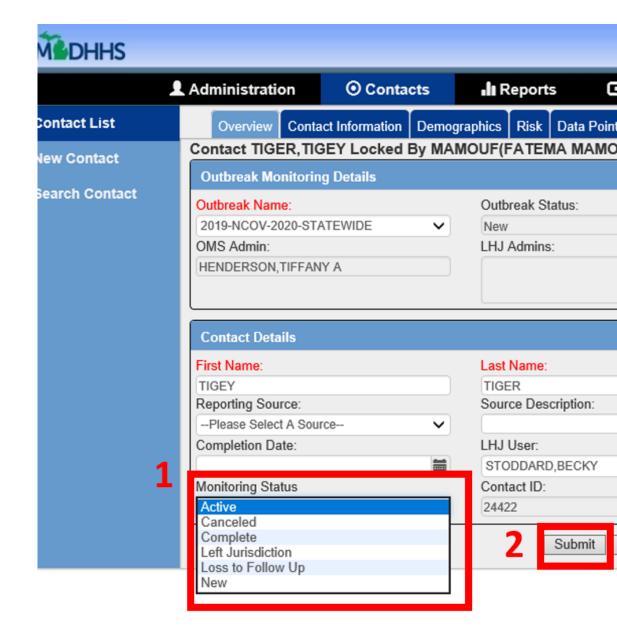
- 3. Click 'Edit' next to the timepoint. A pop-up box will appear.
 - a. Date: enter the date of contact
 - b. Monitoring Status: Active Monitoring
 - c. Risk Level: Choose the appropriate option; For those at Medium Risk, please use "mid" risk level.
 - d. Action: Choose the appropriate option
 - e. OMS Investigator: select the person who contacted the client
 - f. Document the responses; contact your regional epidemiologist if a contact has not been reachable in greater than 24 hours
 - g. Click Save Changes in the pop-up box
- 4. Click Submit to save.

How to Close Out a Contact

- 1. Click on Overview tab in the contact.
 - a. For individuals that have completed their monitoring, enter Completion Date and change Monitoring Status to Complete.
 - b. For individuals that transfer to a different state/country, enter Completion Date and change Monitoring Status to Left Jurisdiction.
 - c. For individuals that cannot be reached, enter Completion Date and change Monitoring Status to Loss to Follow Up.
 - d. For individuals that were:
 - i. incorrectly referred to Michigan OR
 - ii. individuals that should actually be assessed as Low or No Identifiable Risk OR
 - iii. individuals referred to OMS as a potential PUI (or contacts of a potential PUI), and the individual does not meet PUI criteria,

Enter Completion Date and change Monitoring Status to Canceled.

2. Click Submit to save changes.



OMS Support Contacts Regional Epidemiologists

Region	Name	Phone/Cell	E-Mail	Counties
1	Meghan Weinberg	517.887.4615 (Ingham) 517.552.6878 (Livingston)	WeinbergM1@michigan.gov	Clinton, Eaton, Gratiot, Hillsdale, Ingham, Jackson, Lenawee, Livingston, Shiawassee
2N	Nicole Parker- Strobe	248.452.9936 517.930.6906 (Cell)	ParkerStrobeN@michigan.gov	Macomb, Oakland, St. Clair
2S	Joyce Lai	734.727.7204 517.930.6958 (Cell)	LaiJ@michigan.gov	Detroit City, Monroe, Washtenaw, Wayne
3	Melanie Perry	989.832.6690 517.582.0737 (Cell)	PerryM12@michigan.gov	Alcona, Arenac, Bay, Genesee, Gladwin, Huron, Iosco, Lapeer, Midland, Ogemaw, Saginaw, Sanilac, Tuscola
5	Bethany Reimink	269.373.5293 517.719.0407 (Cell)	ReiminkB@michigan.gov	Allegan, Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, Van Buren
6	Fatema Mamou	616.632.7245 517.204.6086 (Cell)	MamouF@michigan.gov	Clare, Ionia, Isabella, Kent, Lake Mason, Mecosta, Montcalm, Muskegon, Newaygo, Oceana, Osceola, Ottawa
7	Roger Racine	231.995.6106 517.930.6914 (Cell)	RacineR@michigan.gov	Alpena, Antrim, Benzie, Charlevoix, Cheboygan, Crawford, Emmet, Grand Traverse, Kalkaska, Leelanau, Manistee, Missaukee, Montmorency, Oscoda, Otsego, Presque Isle, Roscommon, Wexford
8	Scott Schreiber	906.643.1100x108 517.930.3089 (Cell)	SchreiberS@michigan.gov	Alger, Baraga, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Luce, Mackinac, Marquette, Menominee, Ontonagon, Schoolcraft

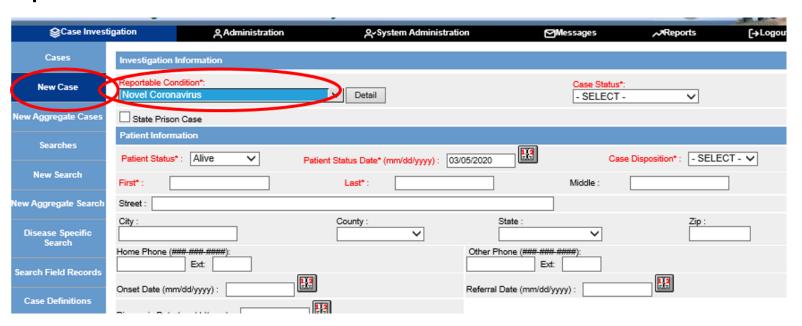
Receiving calls about suspect Persons Under Investigation (PUI)

1. Assess suspect PUI with Provider

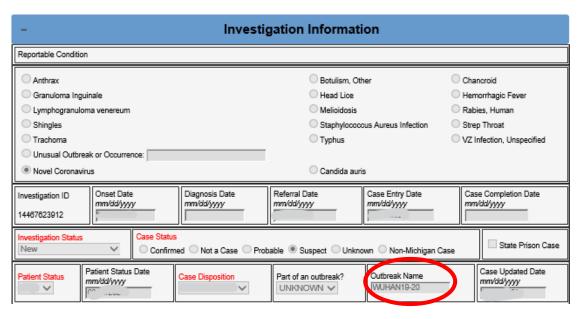
- Does patient have signs and symptoms compatible with COVID-19?
 - Fever and/or symptoms of acute respiratory illness (e.g. cough, difficulty breathing)
- Does patient have epidemiological factors?
 - Any persons, including healthcare workers, who have had close contact with lab-confirmed COVID-19 patient with 14 days of symptom onset
 - Person with a history of travel from affected geographic areas within 14 days of symptoms onset
 - https://www.cdc.gov/coronavirus/2019-ncov/travelers/after-travel-precautions.html
- If not already done, encourage provider to test for other causes of respiratory illness, including infections such as influenza

2. If the patients meets PUI criteria, direct providers to complete the Michigan Interim 2019 Novel Coronavirus (COVID-19) Person Under Investigation (PUI)/Case Report Form

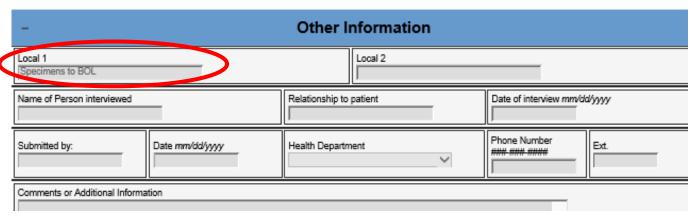
3. Enter patient information into MDSS as "Novel Coronavirus"



4. Enter "WUHAN19-20" in the outbreak field of the case report form



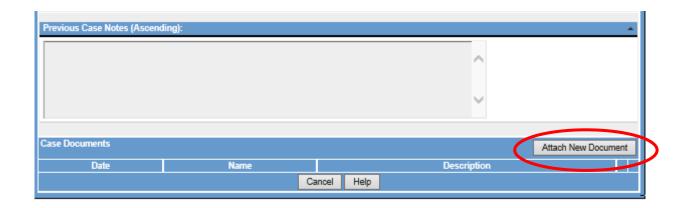
5. Enter "Specimens to BOL" in the **Local 1 field** of the case report form



6. The nCoV ID is the MDSS investigation ID, proceeded by MI [example: MI-1234567]

Note: Specimens cannot be submitted from a healthcare provider until the nCoV ID is assigned and testing is approved

7. Attach the PUI form to the notes tab in MDSS



8. The PUI should remain in isolation at the healthcare facility or at home, depending upon health status. Information should be collected on close contacts and their health should be monitored for 14 days from last exposure; maintain formation in OMS.

Resources

- Information for Laboratories
 - Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens
- Information for Healthcare Providers
 - Healthcare Infection Control Guidance