



# CORONAVIRUS: THE FACTS FEDHEALTH WANTS YOU TO KNOW

Dear Member

With the widespread media coverage of the Coronavirus (COVID-19), the increase of cases around the world, and the first cases confirmed in South Africa, it's only understandable that you might be concerned or even panicking about what this means for you and your family.

**Fedhealth understands your concern, but armed with the right facts, the right behaviours and the support of your Scheme, there is no reason for panic. All hospitals have confirmed readiness and know the protocol that they must follow.**

**Please take the time to read through the information below from the National Institute for Communicable Diseases (NICD) that we've shared with you:**

## BACKGROUND

On 31 December 2019, the World Health Organization (WHO) China country office reported a cluster of pneumonia cases in Wuhan City, Hubei Province of China. Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) has been confirmed as the causative virus of Coronavirus disease 2019 (COVID-19). Several provinces in China and other countries have also reported cases. Most cases to date have links to China and person-to-person spread has been confirmed.

## HERE IN SOUTH AFRICA

The first case of Coronavirus in South Africa was confirmed on Thursday 5 March 2020. The patient had returned from a trip to Italy and, together with his doctor and the doctor's family, has been placed under quarantine since diagnosis.

## PREVENTION

The NICD encourages the public to continue **practising hand hygiene** and **cough etiquette**, and adhering to the following:



Avoid close contact with people suffering from acute respiratory infections.



Wash your hands frequently with soap and water, especially after direct contact with ill people or their environment.



Don't visit markets where live animals are sold.



Travellers with symptoms of acute respiratory infection should practice cough etiquette (maintain distance, cover coughs and sneezes with disposable tissues or clothing and wash hands).



Health practitioners should provide travellers with information to reduce the general risk of acute respiratory infections, via travel health clinics, travel agencies, conveyance operators and at points of entry. Travellers should self-report if they feel ill.

## WHEN SHOULD YOU CALL YOUR GP?

Currently, the NICD lab is the only one testing for Coronavirus. If you, or a loved one, meet the following criteria, **please call your GP** (don't visit their rooms in case you might risk infecting others):

### Criteria for Person Under Investigation (PUI)

Persons with **acute respiratory illness** with sudden onset of at least one of the following: **cough, sore throat, shortness of breath or fever** [ $\geq 38^{\circ}\text{C}$  (measured) or **history of fever** (subjective)] irrespective of admission status.

### AND

In the 14 days prior to onset of symptoms, met at least one of the following epidemiological criteria:

Were in close contact<sup>1</sup> with a confirmed<sup>2</sup> or probable<sup>3</sup> case of SARS-CoV-2 infection;

### OR

Had a history of travel to areas with presumed ongoing community transmission of SARS-CoV-2; i.e., Mainland China, South Korea, Singapore, Japan, Iran, Hong Kong, Italy, Vietnam and Taiwan

### OR

Worked in, or attended a healthcare facility where patients with SARS-CoV-2 infections were being treated

### OR

Admitted with severe pneumonia of unknown aetiology.

## HOW FEDHEALTH WILL COVER CORONAVIRUS

Because COVID-19 came as an outbreak and is a notifiable condition, the costs for any positive-testing admissions and testing will be carried by Fedhealth, according to our Scheme Rules.

Finally, it's important to note that, **if you haven't been travelling or haven't had contact with people with known infection, your risk for contracting Coronavirus is VERY LOW.**

We will keep you updated should the situation change, so in the meantime let's keep practising good hand and cough hygiene and look out for one another.

**Best wishes,  
Fedhealth**

<sup>1</sup>**Close contact:** A person having had face-to-face contact or was in a closed environment with a COVID-19 case; this includes, amongst others, all persons living in the same household as a COVID-19 case and, people working closely in the same environment as a case. A healthcare worker or other person providing direct care for a COVID-19 case, while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection). A contact in an aircraft sitting within two seats (in any direction) of the COVID-19 case, travel companions or persons providing care, and crew members serving in the section of the aircraft where the index case was seated.

<sup>2</sup>**Confirmed case:** A person with laboratory confirmation of SARS-CoV-2 infection, irrespective of clinical signs and symptoms.

<sup>3</sup>**Probable case:** A PUI for whom testing for SARS-CoV-2 is inconclusive (the result of the test reported by the laboratory) or for whom testing was positive on a pan-coronavirus assay.