

## ICWUC Center's COVID-19 Outbreak Bulletin

### Protecting Workers - February 28, 2020

The COVID-19 outbreak has continued to expand and grow. Currently, confirmed cases are in every province in China, across Europe, and the United States. We are preparing guidance and training materials for potentially at-risk workers in the USA. Healthcare workers are among the thousands infected and dying in China. For now, the US appears poised to control the threat—major airports are screening visitors, the Centers for Disease Control and Prevention, along with public health departments, have implemented plans to test suspected and isolate confirmed cases. They continue to perform thorough contact tracing investigations.

Protective protocols developed during the Ebola, MERS, SARS, and H1N1 crises for potentially exposed workers are critical to containing this illness including consistent implementation of infection and exposure control plans, worker training, engineering controls, and maintaining supplies of personal protective equipment.

(2/28/2020)	Globally	China	South Korea	Italy	Iran	Diamond Princess	Japan	United States
Cases	83,867	78,824	2,337	655	388	705	228	60*
Deaths	2,867	2,788	13	17	34	5	4	0

**\*Note that officials confirmed case in the United States without direct ties to travel related transmission.**

#### What we know:

- COVID-19 is the latest coronavirus to emerge over the last decade. It joins two other coronaviruses -SARS (Severe Acute Respiratory) Syndrome and MERS (Middle Eastern Respiratory Syndrome), both linked to large outbreaks. In the early outbreak stages, the COVID-19 doesn't appear to be as severe as SARS, which also caused respiratory symptoms and originated in China, killing approximately ten percent of the people infected worldwide. COVID-19 has the potential to mutate and could cause more virulent disease as the current outbreak progresses.
- The novel COVID-19 appears to have leaped from animals to humans in the fall of 2019. The first illnesses were identified in meat and fish markets in Wuhan China in November 2019. Officials identified human to human transmission in December 2019.
- Most people with COVID-19 symptoms are not specific and include a fever and a dry cough. About 30% report shortness of breath.
- China reports that most patients are between 49-56 years, and few are children. The elderly and those with preexisting conditions seem to be particularly vulnerable.
- The virus appears to be easily transmissible through airborne droplets and likely aerosols created from sneezes and coughs.

#### What we don't know:

- The incubation period: The symptoms may appear 2-14 days after exposure.
- When infected, individuals can spread the virus. For instance, we don't know if infected individuals with little or no symptoms (asymptomatic) can transmit the virus. If the new illness is like SARS, the transmission will occur when people have apparent symptoms, but we don't know if this is true for COVID-19.
- If cases outside China will continue to be mild or whether the disease will become more virulent.
- How the US will handle the threat if the virus begins to spread rapidly is not clear. At present, travelers from China are under quarantine for 14 days upon arrival into the US. Some of these people are being released.

## Worker Protections:

Workers need guidance and training to assess their risk of exposure. Those working as frontline healthcare (nurses, physicians, aides, etc.) may be at risk, especially those who conduct triage of patients seeking treatment. Other workers in laboratories, environmental services, and respiratory therapy may also have substantial exposure risk. Any work that requires significant and uncontrolled contact with the public should evaluate their potential exposure. The list is long: EMS, firefighters, police, TSA, airplane cleaners, flight attendants, school employees, homeless shelter workers, social workers, corrections officers, and home healthcare workers are just a few.

Now is the time for workers at high risk of exposure to review their infectious disease exposure control plans to ensure their exposure to COVID-19 and other droplet/airborne diseases is minimal. Ideally, most of those exposure control plans remained operational after the Ebola, H1N1, and MERS crises. But, those plans should expand as the threat of COVID-19 grows. Elements of those plans should include:

- Training and updates about the COVID-19 outbreak in China must be provided, including in cases in the USA. The training should consist of the essentials on this new coronavirus – transmission, symptoms, potential work-related exposure, protective measures to reduce or eliminate worker exposure, and opportunities to practice donning and doffing of personal protective equipment.
- Engineering and administrative controls should be in place to protect workers. Also, there must be a guarantee of adequate supplies of PPE (especially N-95s) and fit testing for workers using respirators.
- Employers must ensure proper record-keeping of workers who suspect work-related exposure and infection, sick leave, treatment, and vaccination if one becomes available.
- Staffing must remain at adequate levels to handle the demand if a large scale outbreak occurs in the US .
- Adherence to all relevant OSHA standards such as Hazard Communication, Personal Protective Equipment, Blood-borne pathogens, record keeping, and in California, their Aerosol Transmissible Diseases Standard gives protective actions guidance. The ICWUC consortium can provide training and detailed information for specific groups. To request more information, contact your union, and consult the ICWUC website, <https://hsed.icwuc.org/> for updates and resources on this fast-moving viral spread.

### Myths - Do not believe these statements

- The COVID-19 epidemic is a government conspiracy.
- Some ethnic/racial group carry the virus.
- The flu and pneumonia vaccines protect you from the coronaviruses.
- It is not safe to receive packages from China.
- Pets spread COVID-19.
- Garlic and sesame oil will prevent COVID-19 infections.
- Antibiotics will prevent or treat COVID-19.

### Reliable resources

- [2019-nCoV Overview for EMS Agencies](#) (National Highway Traffic Safety Administration)
- [2019-nCoV Situation Overview](#) (CDC)
- [Interim Guidance for Healthcare Providers](#) (CDC)
- [Preparedness Checklist for 2019-nCoV](#) (CDC)
- [Infection Control for Suspected 2019-nCoV Patients](#) (WHO)
- [Frequently Asked Questions: 2019 Novel Coronavirus](#) (CDC)

ICWUC Center for Worker Health and Safety Education  
329 Race Street, Cincinnati, Ohio 45202  
513.621.8222 [www.hsed.icwuc.org](http://www.hsed.icwuc.org)