

CDC Daily Key Points
Coronavirus Disease 2019 (“COVID-19”) Outbreak
March 11, 2020 as of 9:55pm

Updated text is shown in colored text.

SNAPSHOT

- CDC has reported:
 - 938 confirmed and presumptive positive cases of COVID-19
 - 29 COVID-19 related deaths
 - 38 states and the District of Columbia.

MAIN KEY POINTS

- There is an expanding global outbreak of respiratory illness called COVID-19 caused by a novel (new) coronavirus.
- Community spread is being detected in a growing number of places, including in the states of California, Washington, and New York in the United States.
- There are 938 reported U.S. cases of COVID-19 from 38 states, New York City, and the District of Columbia. New states reporting cases since yesterday include South Dakota and Michigan.
- The potential public health threat posed by COVID-19 is high, both globally and to the United States.
- More cases of COVID-19 are expected in the United States in the coming days, including more instances of community spread.
- As the outbreak continues, at some point, widespread transmission of COVID-19 in the United States is expected occur.
- Many people will get sick, but based on what is known about this virus, most people will not develop serious illness.
- Based on data out of China, where this virus first emerged, older adults and persons of all ages who have serious long-term health problems seem to be at higher risk for more serious COVID-19 illness.
 - It’s important that people who are at higher risk of serious COVID-19 illness take special precautions to reduce their risk of getting sick.
 - CDC has [guidance for what people at higher risk](#) should do at this time.
- Public health efforts at this time are focused concurrently on containing spread of this virus and mitigating the impact of this virus.
- There is no vaccine to protect against COVID-19 and no medications approved to treat it.
- [Nonpharmaceutical interventions](#) are actions, apart from getting vaccinated and taking medicine, that people and communities can take to help slow the spread of respiratory illnesses like COVID-19.
- Currently, nonpharmaceutical interventions are the most important response strategy against COVID-19.
- All communities can [take measures to reduce the spread of COVID-19](#). Everyone has a role to play in getting ready and staying healthy.

SITUATION UPDATE

- 938 reported cases of COVID-19 have been detected in Arizona, California, Colorado, Connecticut, Florida, Georgia, Hawaii, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maryland, Massachusetts, [Michigan](#), Minnesota, Missouri, Nebraska, Nevada, New Hampshire, New Jersey, New York (and New York City), North Carolina, [Ohio](#), Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, [South Dakota](#), Tennessee, Texas, Utah, Vermont, Virginia, Washington, and Wisconsin.
 - 75 of these cases occurred through close contact with another case.
 - 92 cases occurred in persons who had traveled to international areas with sustained (ongoing) transmission and among their close contacts.
 - 771 cases are still being investigated to determine the source of exposure.
- CDC has developed a [map of the U.S.](#) that shows affected states and how many COVID-19 cases they have reported.
- Because states are reporting their results directly and publicly, sometimes in near real-time, CDC case counts may be different from what states, local authorities, or media are reporting.
 - In the event of a discrepancy between case counts reported by state or local public health officials versus CDC-reported numbers, the numbers reported by states should be considered the most up to date.
- As of the evening of March 10, 79 state and local public health labs in 50 states and the District of Columbia have verified they are successfully using COVID-19 diagnostic tests.
- CDC has developed a [map showing which states and territories have one or more laboratories that have successfully verified and are currently using COVID-19 diagnostic tests.](#)
 - This list is provided by the [Association of Public Health Laboratories \(APHL\)](#).
 - The same page includes information on the number of COVID-19 specimens tested.
- As of the evening of March 10, 2020, CDC and local and state public health laboratories had tested a total of 11,079 specimens.
- CDC is reviewing and updating [travel notices](#) almost on a daily basis.
- On March 8, CDC recommended travelers, particularly those with underlying health issues, defer all [cruise ship travel worldwide](#).
- CDC also recommends that older adults and travelers with underlying health issues avoid situations that put them at increased risk for more severe disease, including [avoiding non-essential travel on long plane trips](#).
- On March 11, WHO made the assessment that COVID-19 can be characterized as a pandemic.

NEW GUIDANCE

- On March 10, CDC posted "[Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission](#)."
- This document is a framework for actions which local and state health departments can recommend in their community to both prepare for and mitigate community transmission of COVID-19 in the United States.
- Selection and implementation of these actions should be guided by the local characteristics of disease transmission, local population demographics, and public health and healthcare system capacity.

PANDEMIC DEFINITION:

- Pandemics happen when a disease emerges to infect people easily and spreads from person to person in an efficient and sustained way globally.
- In 2009, WHO declared the outbreak of the H1N1 influenza a global pandemic.
- The federal government has been working closely with state, local, tribal, and territorial partners, as well as public health partners, to prepare for and respond to this public health threat for months.
- CDC has been implementing its pandemic preparedness and response plans, working on multiple fronts, including providing specific guidance on measures to prepare communities to respond to local spread of the virus that causes COVID-19.
- On March 10, CDC posted "[Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission](#)"

WHO KEY POINTS ON COVID-19 AS PANDEMIC:

- On March 11, WHO made the assessment that COVID-19 can be characterized as a pandemic.
 - WHO has been assessing this outbreak around the clock, since the news of this virus first emerged on December 31, 2019.
 - In the past two weeks, the number of cases of COVID-19 outside China has increased 13-fold, and the number of countries with cases has tripled.
 - There are now more than 118,000 cases in 114 countries, and 4,291 people have lost their lives.
 - The number of cases, the number of deaths, and the number of affected countries are all expected to increase.
 - WHO believes that what the world is seeing can be characterized as a pandemic.
 - All countries can still change the course of this pandemic with decisive action.
 - At this time, WHO does not have a formal process or criteria for defining an outbreak as a pandemic and this characterization does not change the scale or strategy of the WHO response.

INFECTION CONTROL/MASK GUIDANCE

- On March 10, CDC published updated Interim [Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed COVID-19 in Healthcare Settings](#).
- Respiratory protection of healthcare workers is a priority and is especially important during aerosol-generating procedures for patients.
- Healthcare facilities are increasingly unable to procure reliable and sufficient infection control supplies, including N95 respirators.
- Because of supply demands associated with the COVID-19 response, CDC is updating its interim COVID-19 infection control guidance for the healthcare setting.
 - The aim of the revised interim guidance is to prioritize the use of N95 respirators and other respiratory protection devices during high-risk procedures, while still protecting healthcare personnel with facemasks and eye protection during other routine patient care activities in the setting of temporary respirator shortages.

- This interim guidance aims to support healthcare facilities in practical decision-making at the local level.
- This guidance also outlines multiple interventions that can be used to enhance protection of healthcare personnel.
- The spread of COVID-19 can be stopped in many ways, such as prompt screening and triage, limiting personnel in the room, hand hygiene, source control, and effective environmental cleaning.
- Employers and healthcare workers should remember the hierarchy of controls.
 - PPE is only one aspect of patient and worker safety and involves a high level of worker involvement and is highly dependent on proper fit and correct use.
 - All healthcare facilities should be reviewing their infection control supply inventories and taking steps to optimize supplies. This is particularly true for facilities that perform aerosol-generating procedures, so that appropriate PPE will be available for high-risk procedures now and as potential COVID-19 cases increase.
- Healthcare administrators should continue to do everything possible to acquire the needed supplies to protect their staff and patients.
 - When the supply chain is restored, facilities with a respiratory protection program should return to use of respirators for patients with known or suspected COVID-19.
 - The anticipated timeline for return to routine levels of PPE is not known.
- CDC has posted information about [strategies to optimize the current supply of N95 respirators](#), including the use of devices that provide higher levels of respiratory protection (e.g., powered air purifying respirators [PAPRs]) when N95s are not available. CDC has also provided a [companion checklist](#) to help healthcare facilities prioritize the implementation of the strategies.
- The majority of nursing homes and outpatient clinics, including hemodialysis facilities, do not currently have respiratory protection programs or fit-tested HCP.
 - These facilities would not be able to implement all of the recommended infection control interventions in the previous version of this guidance.
 - Without respiratory protection programs and fit testing, unnecessary transfer of patients with known or suspected COVID-19 to another facility (e.g., acute care hospital) for evaluation and care may occur.
 - In areas with community transmission, acute-care facilities will be quickly overwhelmed by transfers of patients who have only mild illness and do not require hospitalization.

PEOPLE AT HIGHER RISK OF EXPOSURE/INFECTION

- Right now, some people are at higher risk of exposure/infection, including:
 - People in communities where ongoing community spread with the virus that causes COVID-19 has been reported are at elevated though still relatively low risk of exposure.
 - Healthcare workers caring for patients with COVID-19 are at elevated risk of exposure.
 - Close contacts of persons with COVID-19 also are at elevated risk of exposure.
 - Travelers returning from affected [international locations](#) where community spread is occurring also are at elevated risk of having been exposed.

PEOPLE AT HIGHER RISK OF SERIOUS COVID-19 ILLNESS

- Early information out of China, where COVID-19 first started, shows that some people are at higher risk of getting very sick from this illness.
- The people who are at greatest risk are those who are older and those who have serious long-term health conditions like diabetes, heart disease, or lung disease.
- This seems to be a disease that affects adults, and older adults, most seriously.
 - Starting at age 60, there is an increasing risk of severe disease and the risk increases with age.
 - The highest risk of serious illness and death is in people older than 80 years.
- People with serious underlying health conditions also are more likely to develop serious outcomes including death.
- Reports out of China that looked at more than 70,000 COVID-19 patients found that about 80% of illness was mild and people recovered. 15% to 20% developed serious illness.
- Of the more than 70,000 cases, only about 2% were in people younger than 19.
- These are early data and more information from countries outside of China, including experience here in the United States, will inform the public health response as time goes on. For now, data suggest that measures should be taken to protect America's oldest population, who are most vulnerable to severe COVID-19 illness.

WHAT YOU CAN DO

- Everyone can do their part to help respond to this emerging public health threat:
 - Individuals and communities should familiarize themselves with [recommendations to protect themselves and their community](#) from getting and spreading respiratory illnesses like COVID-19.
 - Older people and people with severe chronic conditions should [take special precautions](#) because they are at higher risk of developing serious COVID-19 illness.
 - If you are a healthcare provider, be on the look-out for:
 - People who recently traveled from China or another [affected area](#) and who have symptoms associated with COVID-19, and
 - People who have been in close contact with someone with COVID-19 or patients with pneumonia of unknown cause. (Consult the most recent [definition for patients under investigation \[PUIs\]](#).)
 - If you are a healthcare provider or a public health responder caring for a COVID-19 patient, please take care of yourself and follow recommended [infection control procedures](#).
 - If you are a close contact of someone with COVID-19 and develop symptoms of COVID-19, call your healthcare provider and tell them about your symptoms and your exposure. They will decide whether you need to be tested. Keep in mind that there is no treatment for COVID-19 and people who are mildly ill are able to [isolate at home](#).
 - If you are a resident in a community where there is ongoing spread of COVID-19 and you develop COVID-19 symptoms, call your healthcare provider and tell them about your symptoms. They will decide whether you need to be tested. Keep in mind that there is no treatment for COVID-19 and people who are mildly ill are able to [isolate at home](#).

- For people who are ill with COVID-19, but are not sick enough to be hospitalized, please follow [CDC guidance on how to reduce the risk of spreading your illness to others](#). People who are mildly ill with COVID-19 are able to [isolate at home during their illness](#).
- If you have been in China or another affected area or have been exposed to someone sick with COVID-19 in the last 14 days, you will face [some limitations on your movement and activity](#). [Please follow instructions during this time](#). Your cooperation is integral to the ongoing public health response to try to slow spread of this virus.

CDC ACTIONS

- The federal government is working closely with state, local, tribal, and territorial partners, as well as public health partners, to respond to this public health threat.
- The public health response is multi-layered, with the goal of detecting and minimizing introductions of this virus in the United States to reduce the spread and the impact of this virus.
- CDC is operationalizing all of its pandemic preparedness and response plans, working on multiple fronts to meet these goals, including specific measures to prepare communities to respond to local transmission of the virus that causes COVID-19.
- Pandemic guidance developed in anticipation of an influenza pandemic is being repurposed and adapted for a COVID-19 pandemic.
- Public health partners are encouraged to review their pandemic preparedness plans at this time.
- CDC is aggressively responding to the global outbreak of COVID-19 and preparing for the potential of community spread in more parts of the United States.
- [CDC's Action for Preparing Communities for Potential Spread of COVID-19](#) include:
 - Preparing first responders, healthcare providers, and health systems
 - Reinforcing state, territorial, and local public health readiness
 - Supporting communities, businesses, and schools

COMMUNITY BASED INTERVENTIONS (AKA COMMUNITY MITIGATION)

- Americans should be prepared for the possibility of a COVID-19 outbreak in their community. Everyone has a role to play.
- Currently, a vaccine is not available for COVID-19. Until a vaccine is developed, community-based interventions, such as school dismissals, event cancellations, social distancing, and plans to work remotely, can help slow the spread of coronavirus.
- Your local public health department and community partners have been preparing for an event like COVID-19 and have plans in place. Now is a good time for businesses, community and faith-based organizations, schools, and health-care systems to reexamine their preparedness plans to make sure they are ready.
- Strong community partnerships between local health departments, the health care sector, faith-based organizations, and other community partners are vital for this response, and will be necessary to prepare for and coordinate if an outbreak occurs.
 - Community-based interventions can be grouped in three categories:
 - Personal protective measures (e.g., voluntary home isolation of ill persons, voluntary home quarantine of exposed household members, covering nose/mouth when coughing or sneezing, hand hygiene, using face masks in community settings when ill)

- Community measures aimed at increasing social distancing (e.g., school dismissals, social distancing in workplaces, postponing or cancelling mass gatherings)
- Environmental measures (e.g., routine cleaning of frequently touched surfaces)
- CDC has [recommendations to protect yourself and your community](#) from getting and spreading respiratory illnesses like COVID-19.

For more information please visit the Coronavirus Disease 2019 Outbreak Page at:
www.cdc.gov/COVID19.