Naval Operational Forces Flowchart for Evaluation of a Suspected COVID-19 Patient

### Identify

If in the past 14 days since first onset of symptoms a history of either

<table>
<thead>
<tr>
<th>Travel to China, Iran, Italy, Japan or South Korea¹,²</th>
<th>OR</th>
<th>Close contact with a person known to have COVID-19 illness²</th>
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</thead>
<tbody>
<tr>
<td>AND the person reports</td>
<td></td>
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<tr>
<td>Fever and a cough and/or sore throat</td>
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<td>Fever and a cough and/or sore throat</td>
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</tbody>
</table>

¹ Does not currently apply if travel is limited to airport transit, unless local Area of Responsibility (AOR) Force Health Protection (FHP) dictates otherwise.
² For asymptomatic personnel, ensure Command clearance is obtained; see reverse for Restriction of Movement (ROM) guidance.

### If both exposure, fever, and cough and/or sore throat are present, take the following steps:

#### Isolate and Assess Clinical Status

- Place a surgical mask on the patient.
- Isolate the patient in a private room or separate area (to avoid sharing spaces, bathrooms, and sinks with other patients and staff).
- Medical staff should wear personal protective equipment (PPE): Preferably an N95 respirator (or a surgical mask if N95 is unavailable), gloves, disposable gown, and protective eyewear (e.g., face shield or goggles).
- Follow standard, contact, and droplet precautions and isolation guidance per NTRP 4-02.10 (available through Navy Warfare Development Command portal (restricted to CAC)). If available, also use airborne precautions and isolation.
- Examine patient and determine if a significant exposure history exists.

#### Is fever (measured ≥ 100°F) present? AND Is a cough and/or sore throat present?

#### Notify Higher Level Medical Authority

- Keep patient isolated and maintain precautions.
- Contact your higher level medical authority for further guidance and to determine whether the patient may meet the CDC Patient Under Investigation (PUI) criteria; if the patient is determined to be a PUI, report via Operational Commander reporting procedures.
- Notify cognizant Navy Environmental and Preventive Medicine Unit (NEPMU).

Follow these reporting requirements: COCOM directives to supporting commands, organizations, and components/subordinates in regard to reporting tasks for operations relating to novel Coronavirus; NTRP 4-02.10, paragraph 4.6 (“Notification Routing Procedure”); and GENADMIN on the 2019-nCoV (released 4 Feb 2020). All MTF PUIs are to be reported by the local Public Health Officer via the Disease Reporting System Internet (DRSI) in coordination with the Navy and Marine Corps Public Health Center (NMCPHC). See CDC websites for current information and healthcare provider guidance: [https://www.cdc.gov/coronavirus/2019-ncov/index.html](https://www.cdc.gov/coronavirus/2019-ncov/index.html) and [https://www.cdc.gov/coronavirus/2019-ncov/clinical-criteria.html](https://www.cdc.gov/coronavirus/2019-ncov/clinical-criteria.html).
Restriction of Movement (ROM) for Asymptomatic Personnel

- For active duty personnel, civilians, and contractors.
- Asymptomatic, with travel to China (includes Hong Kong and Macau), Iran, Italy, Japan, or South Korea in the past 14 days or close contact with a person known to have COVID-19 illness in the past 14 days.
- Commands may determine other service members who are at similar risk for exposure, such as those with a family member with whom they reside or have close contact, who traveled to China, Iran, Italy, Japan, or S. Korea
- Additional AOR FHP measures may be considered by Commanders in areas of increased, sustained community transmission.

Active Duty

- 14-day ROM starting from day of departure from country named above with daily assessment by cognizant medical staff.
- May return to work following medical clearance.

General Schedule (GS) and Contractors

- DoD civilian employees and contractors returning from country named above should follow existing CDC guidance. To the extent possible, remain at home or in a comparable setting. Key aspects include voluntarily: remaining at home, avoiding congregate settings, limiting close contact with people and pets/animals to the greatest extent possible, avoiding travel, self-monitoring, and seeking immediate medical care if symptoms (e.g., cough or shortness of breath) develop.
- State or local public health authority assumes responsibility for oversight of self-monitoring or establishing regular active-monitoring of potentially exposed people and to assess for the presence of fever, cough, or difficulty breathing.

References:
- OSD Memo on Force Health Protection Guidance for the Novel Coronavirus Outbreak, dated 30 Jan 2020
- OSD Memos on Force Health Protection (supplement 1 and 2), dated 7 and 25 Feb 2020
- CNO NAVADMIN 039/20 on DOD Guidance for Monitoring Personnel Returning from China During the Novel Coronavirus Outbreak, dated 11 Feb 2020