



MINISTRY OF HEALTH
SINGAPORE

MH 34:24/8

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Registered allied health professionals
Allied health associations and societies

MOH CIRCULAR 170/2020

**REVISION OF CASE DEFINITION FOR CORONAVIRUS DISEASE 2019 (COVID-19)
WITH EFFECT FROM 1 JULY 2020**

MOH will be expanding the Swab-and-Send-Home (SASH) criteria to enhance active case finding to include all persons with acute respiratory infection (ARI) aged 13 and above **from 1 July 2020**. The suspect case definition has been updated accordingly.

UPDATE OF SUSPECT CASE DEFINITION

2. Please note the **update** to the suspect case criteria:

- (a) A person with clinical signs and symptoms suggestive of Community-Acquired Pneumonia¹
- (b) A person with an acute respiratory illness of any degree of severity (e.g. symptoms of cough, sore throat, runny nose, anosmia), with or without fever, who, within 14 days before onset of illness had:
 - (i) Travelled abroad (outside Singapore); OR
 - (ii) Close contact² with a case of COVID-19 infection; OR
 - (iii) Stayed in a foreign worker dormitory³; OR

¹ Excludes cases of nosocomial pneumonia and aspiration pneumonia with no links to confirmed cases.

² Close contact is defined as:

- Anyone who provided care for the patient, including a health care worker or family member, or who had other similarly close physical contact;
- Anyone who stayed (e.g. household members) at the same place as a case; or
- Anyone who had close (i.e. less than 2m) and prolonged contact (30 min or more) with a case (e.g. shared a meal).

³ Separate processes apply to foreign workers from a dormitory that has dedicated medical station/ clinic or dedicated workflow for assessment and swabbing.

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(iv) Worked in occupations or environments with higher risk of exposure to COVID-19 cases⁴

(c) Any person with prolonged febrile⁵ acute respiratory infection (PARI) symptoms of 4 days or more, and not recovering **AND who had not undergone prior swabbing for ARI symptoms in the same episode of illness (under the enhanced SASH criteria).**

3. Patients presenting with PARI, but who have already swabbed negative under the enhanced SASH criteria (i.e. ARI of any duration) but continued to be unwell (i.e. same acute episode), **would not be classified as suspect cases.**

4. MOH will continue to monitor the evolving COVID-19 situation closely and propose additional measures as proportionate to risk. Your continued vigilance against possible cases of COVID-19 is greatly appreciated.

5. For clarification on this circular, please email MOH_INFO@moh.gov.sg.



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The case definition in this circular supersedes MOH CIRCULAR 122/2020 titled “REVISION OF SUSPECT CASE DEFINITION FOR CORONAVIRUS DISEASE 2019 (COVID-19)”, dated 8 May 2020.

⁴ These include but are not limited to any staff (healthcare worker and non-healthcare worker) working in:

- Public and private healthcare settings, spanning acute care, primary care, intermediate and long-term care and community care settings
- Dormitories or involved in dormitory outbreak control operations
- Isolation / quarantine facilities
- Community care facilities (CCFs)/ community recovery facilities (CRFs)
- Ambulance and dedicated patient transport (including private hire vehicles).

⁵ Fever, of any duration, with measured or reported temperature of $\geq 37.5^{\circ}\text{C}$.



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