



Report No. 6_2020

Situation Report: Confirmed COVID 19	Location: Liberia
Date of Report: 21 March 2020	Investigation Start Date: 16 March 2020
Prepared by:	National Public Health Institute of Liberia

Date of onset of outbreak: 16 March 2020

Data Source: County Incident Management & National Reference Laboratory

I. HIGHLIGHTS

- No new confirmed case reported as of March 21, 2020
- A total of three confirmed cases are currently in isolation
 - The index case was an imported case from Switzerland
 - Secondary case was a contact to index case
 - The third case has no link with the index case
- Since March 16, 2020 to date, a total of three confirmed cases have been recorded
- Two hundred and seventy-five (275) contacts have been listed as of March 21, 2020
 - 49 high risk and 168 low risk, 58 pending classification
- Declaration of National Public Health Emergency by the President on March 16, 2020

II. Epidemiological Situation

Case one (Index case)

The case-patient is a 46-year-old Liberian male, a resident of Cabral Estate, Central Monrovia District, Montserrado County. On March 9, 2020, case travelled to Switzerland on official duty. He returned to Liberia on 13th March 2020 via SN Brussels airlines flight 241 at about 6p.m. Onset of symptoms (fever and unproductive cough) was 14th March and sought over-the-counter medication on 15th March from Lucky Pharmacy, 23rd Street, Sinkor, Monrovia.

The case-patient self-reported to the National Public Health Institute of Liberia (NPHIL) on the 15th March at about 10:43a.m; sample was collected and sent to the National Public Health Reference Laboratory. The sample was tested positive by RT-PCR and the result was released at 3am on 16th March 2020. Within 12hours, the case-patient was detected, isolated, contacts identification, listing and monitoring commenced, and National Public Health Emergency declared and WHO notified

Case two

The second confirmed case, a 57-year-old male and resident of the Congo Town community. He was a high-risk contact and domestic staff (cook) to the index case. He was tested positive on March 17, 2020. A total of eight (8) contacts were generated and line listed.

Case three

The third confirmed case, a 63-year-old Liberian female and a resident of Sinkor, Monrovia. The Case-patient presented at the J.F.K Memorial Hospital on 19 March, 2020 with fever, cough, weakness vomiting, diarrhea and loss of appetite that started 12 March 2020.

Preliminary investigation showed that she attended a beach party hosted by a friend on March 8, 2020 and had contact with a traveler from Italy. Medical history further revealed that she consulted Aspen Medical Clinic and Clinic Laboratory (13 & 17 March respectively) but no improvement. As condition persisted, she revisited Aspen Medical Clinic on 19 March, 2020 but was referred to J.F.K Memorial Hospital for advance care. With high index of suspicion for COVID-19, sample was collected on 19 March and tested positive on 20 March 2020. This case has no link with the first two confirmed cases. Seventy (70) initial contacts have been identified. Further epidemiological investigation is ongoing and findings will be shared when available.

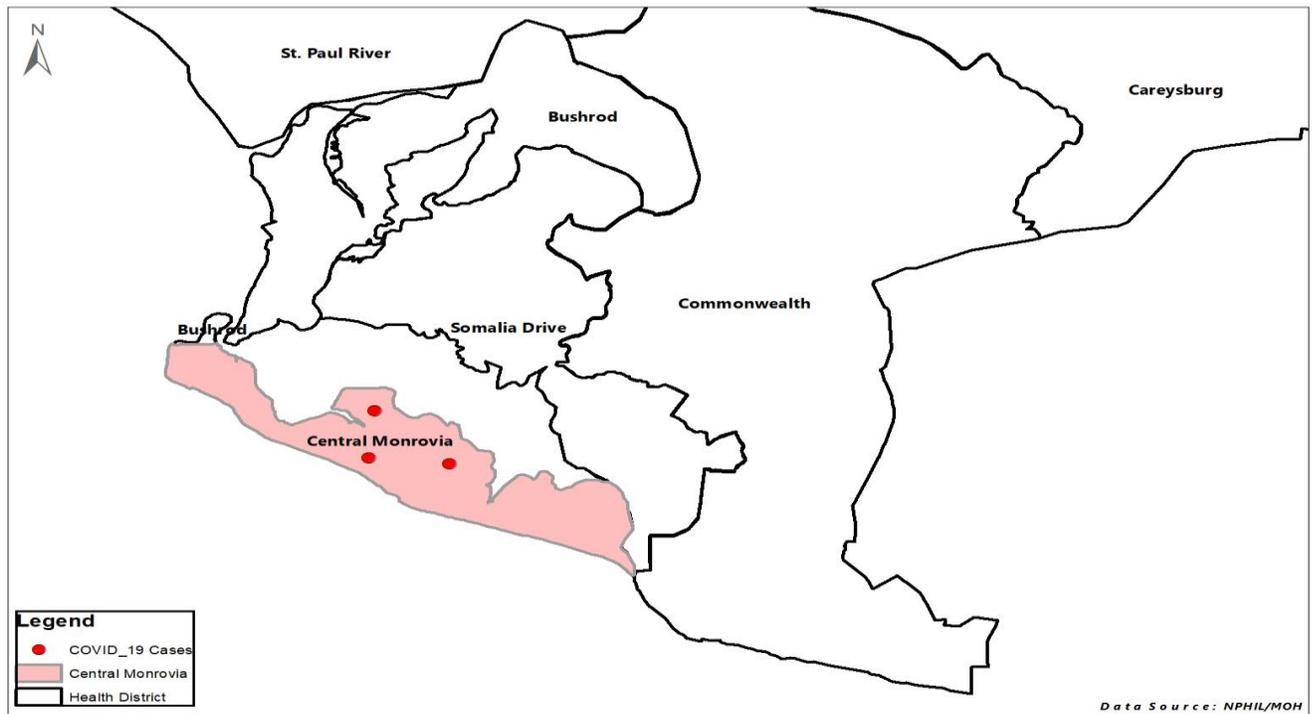


Figure 1: Geographical Distribution of Confirmed Cases by Health Districts, Montserratado County

Table 1: COVID-19 Summary, March 16-21, 2020	
Number of new confirmed case on the 21 March, 2020	0
Total Number of confirmed cases	3
Total Number of Counties with Confirmed case/s	1
Total number of Health Districts with Confirmed Case/s	1
Total in Admission/Isolation	3
Total suspected cases	0
Number of new contacts on 21 March, 2020	63
Total Contacts under follow up	275
Number of high-risk contacts in quarantine	21
Total Number of High-risk contacts	49
Number of Lab. Samples collected on the 21 March, 2020	7
Cumulative number of samples collected	31
Number of samples tested	6
Number of sample/s result pending	1
Number of deaths in confirmed	0

III. Public Health Actions initiated following confirmation

1. Coordination:

- Public Health Emergency Management System/ Public Health Emergency Operation Center activated to level 1 at National and County level (Montserrado County)
- The President of the Republic of Liberia, His Excellency Dr. George Manneh Weah, declared the outbreak as National Public Health Emergency on 16 March 2020
- Joint press conference was held by the Ministry of Health, National Public Health Institute of Liberia and partners on 16 March 2020
- Coordination meeting held daily

2. Epidemiology and Surveillance:

- Deployed surveillance surge team to commence active case search and contact tracing
- Updated standard operating procedure
- Identified and documented 275 contacts
 - 49 high risk
 - 168 low risk
 - 53 pending classification
- Developed and disseminated outbreak case definition (see below)

Suspected case:

Any person with

- History of travel to any affected country within 14 days OR
- Close contact with a confirmed case of COVID-19 infection within 14 days OR
- Exposure to healthcare facility in a country where hospital associated COVID-19 infections have been reported with or without fever, cough, difficulty breathing

Community Case Definition:

- Any person with hot skin, cough, not breathing well, and who has travelled outside Liberia recently OR who has taken care of sick person in Liberia

Probable case:

- A suspected case for whom testing for COVID-19 is inconclusive or for whom testing was positive on a pan-coronavirus assay

Confirmed case:

Any person with laboratory confirmation of COVID-19 infection with or without signs and symptoms

2. Case Management & IPC:

- The three cases are in isolation and clinically stable
- Monitoring travelers in precautionary observation centers (POCs)
- Disinfected index case-patient home
- Commenced quarantine of high-risk contacts
- Ongoing hand washing promotion in public places

3. Risk communication:

- Updated IEC materials (jingles, etc.)

Table 2: Distribution of travellers in POCs, March 20, 2020

Precautionary Observation Center	Completed 14days in POC	Under Observation	Total
POC 1	95	18	113
POC 2	47	18	65
POC 3	43	21	64
POC 4	13	18	31
POC 5	18	0	18
POC 6	0	10	10
POC 7	0	49	49
POC 8	0	28	28
POC 9	0	4	4
Total	216	166	382

IV Next Steps/Recommendations:

- Continue contact tracing and active case finding
- Monitoring low and high-risk contacts
- Exploring possibility of additional sample collection kits, PPEs other operational logistics

V Travel Advisory

11. Travelers at POCs who are citizens of a foreign country will have their passports turned over to representatives of their embassies either at the RIA or at their vetted POCs and will retain a copy for themselves.
12. The source of information on the number of confirmed cases will be the World Health Organization (WHO) website.
Geographically large countries like Brazil, India, USA with 200 or more cases, the decision to take a person for PO will be based on 50 or more cases in any of their states, regions or provinces. The airlines will announce to all passengers before boarding that NPHIL will require proof of their full flight itinerary including flight origin. Without this information they will automatically be taken to a POC. Pre-approved official website for the source of cases for the state, region or province will be circulated.
13. Visitors who have been in countries with 50 to 199 confirmed cases (with infections that are widespread) in the last 14 days, will be evaluated based on the specific geographical areas they visited. PO will be instituted if they are from a region or state of the country with 100 or more confirmed cases.
14. Visitors from countries with 15 to 50 cases will be documented and asked to do self-monitoring and report immediately to NPHIL's emergency phone number (4455), if they experience any one of these symptoms: fever, cough and respiratory distress.
15. All persons who arrive with a laissez-passer (the exemption is the UN and EU laissez-passer) will be immediately taken to the POC for secondary screening. If there is suspicion of illegal attempts to circumvent the process, such a visitor will be kept in the POC for 14 days.
16. Travelers who transited within airports of countries with 200 or more cases will not undergo PO unless they went outside of the airport during their transit.
17. A health alert will be provided to all travelers at the RIA to explain the process of PO to reduce any anxiety among the travelling public.
18. A port health form will be provided either through the airline or at RIA upon arrival to be filled by all travelers from the countries of interest.
19. Key contact persons for assistance under the different conditions are as follows:
 - a. Vetting of POC..... Dr. Jerry Brown (0881466111)
 - b. Vetting of POC..... Mr. Philip Bemah (0886535185)
 - b. IPC standards.....Dr. Ngombu Ballah (0886521869)
 - c. Port Health Screening at RIA.....Mr. Benjamin Soko (0886520911)

Signed 
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Approved  3/11/20
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For comments or questions, please contact

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