



Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

February 7, 2020

**DEPARTMENT CIRCULAR**

No. 2020 - 0044

**TO: GENERAL PUBLIC AND ALL OTHERS CONCERNED**

**SUBJECT: Public Advisory Nos. 1 - 6 on Novel Coronavirus Acute Respiratory Disease (2019-nCoV ARD)**

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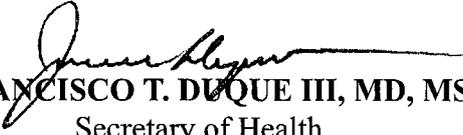
After a cluster of pneumonia cases of unknown etiology was reported in Wuhan City, Hubei Province of China last December 31, 2019, Chinese health authorities preliminarily identified the cause of this viral pneumonia as a new or novel type of coronavirus (2019-nCoV).

With an increasing number of cases spreading to various territories and confirmed human-to-human transmission, the World Health Organization declared the outbreak as a Public Health Emergency of International Concern (PHEIC) last January 30, 2020.

The Department of Health hereby issues the following advisories to prevent, contain, and mitigate the possible transmission of 2019-nCoV ARD:

1. Public Advisory No. 1 on Novel Coronavirus (2019-nCoV) Health Event dated January 29, 2020 (*Annex A*)
2. Public Advisory No. 2 on the Decision Tool for 2019-Novel Coronavirus Acute Respiratory Disease (2019-nCoV ARD) Health Event as of January 30, 2020 dated January 30, 2020 (*Annex B*)
3. Public Advisory No. 3 on the Assessment of Patients in response to 2019-Novel Coronavirus Acute Respiratory Disease (2019-nCoV ARD) Health Event (*Annex C*)
4. Public Advisory No. 4 on the Reiteration of Memorandum Circular No. 2020-006 entitled "Providing for the Reporting and Information Dissemination Protocol in Response to the Novel Coronavirus (2019-nCoV) Health Event" dated February 4, 2020 (*Annex D*)
5. Public Advisory No. 5 on the Reiteration of Department Memorandum No. 2020-0035 entitled "Strengthening of Hospital Prevention Control Measures dated February 4, 2020 (*Annex E*)
6. Public Advisory No. 6 on the Reiteration of Department Circular No. 2020-0014 entitled "Directive to Attend to All Suspected nCoV Patients Seeking Consultations/Treatment at the Hospitals" dated February 4, 2020 (*Annex F*)

Dissemination of the information to all concerned is requested

  
**FRANCISCO T. DUQUE III, MD, MSc**  
Secretary of Health



Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

29 January 2020

**ADVISORY No. 1**  
*Novel Coronavirus (2019-nCoV) Health Event*

Last 31 December 2019, a clustering of pneumonia cases of unknown etiology was reported in Wuhan, China. The outbreak was later determined to be caused by a novel coronavirus (2019-nCoV), a new coronavirus strain that has not been previously identified in humans.

As of 28 January 2020, 4,537 novel coronavirus cases are confirmed, with 106 deaths reported globally. Out of these cases, 56 novel coronavirus cases are from countries other than China. There is no confirmed 2019-nCoV case in the Philippines.

Last 28 January 2020, the Department of Health convened the first Interagency Task Force on Emerging Infectious Diseases (EID) meeting. The Task Force is chaired by the Department of Health, and members are composed of representatives from the Departments of Foreign Affairs (DFA), Local and Interior Government (DILG), Justice (DOJ), Labor and Employment (DOLE), Tourism (DOT), Transportation (DOTr), and Information and Communications Technology (DICT).

This advisory is issued to inform national agencies, Centers for Health Development and Local Government Units on the Resolution agreed upon and approved during the first Task Force meeting. Anchored on public health principles, the following are their recommendations:

1. Ensure continuous support to Filipinos in China by providing accurate and timely health information, and other necessary support services;
2. Ensure comprehensive transportation and quarantine plans for Filipinos from Hubei Province who opt to voluntarily return. All returning Filipinos shall be quarantined for 14 days;
3. Propose temporary restriction on issuance of visas for travelers coming from Hubei Province of China; and
4. Issue travel advisories temporarily discouraging non-essential travel of Filipinos to China.

For your information and guidance.

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Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

January 30, 2020

**ADVISORY NO. 2**

**Decision Tool for 2019-Novel Coronavirus Acute Respiratory Disease  
(2019-nCoV ARD) Health Event as of January 30, 2020**

While the current understanding of the disease caused by the novel coronavirus remains limited, the number of cases being reported in China and in other parts of the world is deeply concerning.

This advisory is issued to inform all Undersecretaries and Assistant Secretaries of Health, Centers for Health Development and Bureau Directors, Minister of Health – Bangsamoro Autonomous Region in Muslim Mindanao, Special and Specialty Hospital Directors, Chiefs of Medical Centers, Hospitals and Sanitaria, and other concerned of the revised the decision tool as of January 30, 2020 for the management of 2019-nCoV ARD health events.

The Department of Health will continue to update the decision tool as new information about 2019-nCoV ARD becomes available.

For your information and guidance.



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**Decision Tool for Novel Coronavirus Assessment for Bureau of Quarantine and Hospitals**  
(Version as of January 30, 2020)

| Fever<br>≥38°C (current fever or with history of fever) | Respiratory Infection (cough AND/OR colds) | Travel History for the past 14 days in China | History of Exposure <sup>1</sup> | Case Category/ Intervention  |
|---|--|--|----------------------------------|--|
| +   | +  | +  | +                                | <p><b>Category: Patient Under Investigation (PUI)</b></p> <p><b>Bureau of Quarantine (BoQ)</b></p> <ul style="list-style-type: none"> <li>• Gives mask and isolate PUI</li> <li>• Collects and evaluates the BoQ Health Declaration Card</li> <li>• Endorses patient for admission in a hospital.</li> <li>• Arranges transportation of PUI to hospital</li> </ul> <p><b>Hospitals</b></p> <ul style="list-style-type: none"> <li>• Completes the case investigation form (CIF)</li> <li>• Trained hospital staff collects specimens (nasopharyngeal swab [NPS] and oral pharyngeal swab [OPS]) and sends to RITM. (NPS/OPS must be collected upon admission and after 24 to 48 hours)</li> <li>• Coordinates with RESU for reporting and transport of specimens</li> <li>• Manages PUI accordingly</li> </ul>   |
| +   | +  | +  | -                                |  |
| +   | +  | -  | +                                |  |
| +   | -  | +  | +                                |  |
| -   | +  | +  | +                                |  |
| +   | -  | +  | -                                |  |
| -   | +  | +  | -                                |  |
| +   | -  | -  | +                                |  |
| -   | +  | -  | +                                |  |
| -   | -  | +  | +                                | <p><b>Category: Person under Monitoring*</b></p> <p><b>Bureau of Quarantine</b></p> <ul style="list-style-type: none"> <li>• Collects and evaluates the BoQ Health Declaration Card</li> <li>• Advises person to go on self-quarantine for 14 days, monitor body temperature daily, and observe any signs and symptoms of respiratory infection</li> <li>• If symptoms worsen, immediately notify the nearest hospital for consultation and provide travel history</li> </ul> <p><b>Centers for Health Development</b></p> <ul style="list-style-type: none"> <li>• Monitor strictly those who are self-quarantined</li> </ul> <p><small>*Anyone who came from other parts of the world with confirmed 2019-nCoV ARD infection except China, has no history of exposure, but with fever and/or cough, is considered <b>Person under Monitoring</b> and is advised to go on self-quarantine for 14 days</small></p> |
| -   | -  | +  | -                                |  |
| -   | -  | -  | +                                |  |

<sup>1</sup> History of exposure include:

- a. close contact who took care, handled specimens and/or lived with a confirmed case of 2019-nCoV infection; or
  - Close contact is defined as:
    - Health care associated exposure, including providing direct care for nCoV patients, working with health care workers infected with novel coronavirus, visiting patients or staying in the same close environment as a nCoV patient
    - Working together in close proximity or sharing the same classroom environment with a nCoV patient
    - Traveling together with a nCoV patient in any kind of conveyance
    - Living in the same household as a nCoV patient
- b. visiting/working in a live animal market in China
- c. direct contact with animals in China with circulating 2019-nCoV in human and animals<sup>2</sup> NPS,



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February 2, 2020

**ADVISORY NO. 3**

**Assessment of Patients in response to 2019-Novel Coronavirus Acute Respiratory Disease (2019-nCoV ARD) Health Event**

This advisory is issued to inform all Undersecretaries and Assistant Secretaries of Health, Centers for Health Development and Bureau Directors, Minister of Health – Bangsamoro Autonomous Region in Muslim Mindanao, Special and Specialty Hospital Directors, Chiefs of Medical Centers, Hospitals and Sanitaria, and other concerned, on the assessment of patients in any health facility in response 2019-nCoV ARD health events.

Any patient who consults in any health facility with fever and/or cough and colds shall be asked for history of travel to any part of China in the past 14 days prior to onset of symptoms. They shall also be inquired of their history of exposure to confirmed 2019-nCoV ARD patient or persons under investigation for 2019-nCoV ARD infection in the past 14 days prior to onset of symptoms. History of exposure may include the following:

- Providing care for and/or handling specimens of confirmed 2019-nCoV ARD patient or persons under investigation for 2019-nCoV ARD infection
- Staying in the same close environment as confirmed 2019-nCoV ARD patient or persons under investigation for 2019-nCoV ARD infection
- Travelling together with confirmed 2019-nCoV ARD patient or persons under investigation for 2019-nCoV ARD infection in any kind of conveyance
- Living in the same household as confirmed 2019-nCoV ARD patient or persons under investigation for 2019-nCoV ARD infection

They shall be managed accordingly based on the latest decision tool (see attached) issued by the Department of Health. Appropriate infection prevention and control measures shall also be strictly initiated and implemented by the health facility at the point of entry of patients with history of travel to China and history of exposure, as stated above.

For your information and guidance.



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Department of Health  
**OFFICE OF THE SECRETARY**

**Decision Tool for Novel Coronavirus Assessment for Bureau of Quarantine and Hospitals  
(Version as of January 30, 2020)**

| Fever<br>≥38°C (current<br>fever or with<br>history of<br>fever) | Respiratory<br>Infection<br>(cough<br>AND/OR<br>colds) | Travel<br>History for<br>the past 14<br>days in<br>China | History of<br>Exposure <sup>1</sup> | Case Category/ Intervention  |
|--|--|--|-------------------------------------|--|
| +  | +  | +  | +                                   | <p><b>Category: Patient Under Investigation (PUI)</b></p> <p><b>Bureau of Quarantine (BoQ)</b></p> <ul style="list-style-type: none"> <li>• Gives mask and isolate PUI</li> <li>• Collects and evaluates the BoQ Health Declaration Card</li> <li>• Endorses patient for admission in a hospital.</li> <li>• Arranges transportation of PUI to hospital</li> </ul> <p><b>Hospitals</b></p> <ul style="list-style-type: none"> <li>• Completes the case investigation form (CIF)</li> <li>• Trained hospital staff collects specimens (nasopharyngeal swab [NPS] and oral pharyngeal swab [OPS]) and sends to RITM. (NPS/OPS must be collected upon admission and after 24 to 48 hours)</li> <li>• Coordinates with RESU for reporting and transport of specimens</li> <li>• Manages PUI accordingly</li> </ul>   |
| +  | +  | +  | -                                   |  |
| +  | +  | -  | +                                   |  |
| +  | -  | +  | +                                   |  |
| -  | +  | +  | +                                   |  |
| +  | -  | +  | -                                   |  |
| -  | +  | +  | -                                   |  |
| +  | -  | -  | +                                   |  |
| -  | +  | -  | +                                   |  |
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| -  | -  | +  | -                                   |  |
| -  | -  | -  | +                                   |  |

<sup>1</sup> History of exposure Include:

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  - Close contact is defined as:
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Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

January 30, 2020

**MEMORANDUM CIRCULAR**

No. 2020- 0006

**FOR :** ALL UNDERSECRETARIES; ASSISTANT SECRETARIES; DIRECTORS OF BUREAUS, SERVICES AND CENTERS FOR HEALTH DEVELOPMENT; EXECUTIVE DIRECTORS OF SPECIALTY HOSPITALS; CHIEFS OF MEDICAL CENTERS, HOSPITALS, SANITARIA AND INSTITUTES; PRESIDENT OF THE PHILIPPINE HEALTH INSURANCE CORPORATION; DIRECTORS OF TREATMENT AND REHABILITATION CENTERS; ATTACHED AGENCIES AND OTHERS CONCERNED

**SUBJECT :** PROVIDING FOR THE REPORTING AND INFORMATION DISSEMINATION PROTOCOL IN RESPONSE TO THE NOVEL CORONAVIRUS (2019-nCoV) HEALTH EVENT

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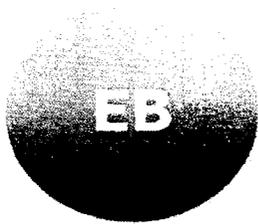
The events and circumstances surrounding the Novel Corona (2019-nCoV) Health Event has brought about much panic and confusion to the public mostly due to conflicting, inaccurate and unverified reports circulating around several media outlets and social media platforms.

In order to combat misinformation and allay the fear of the public, it is imperative that rapid, reliable and accurate information be provided in order to update the public about current information on 2019-nCoV; to encourage the public to take actions to prevent the spread of the disease; to inform stakeholders on the government's actions to protect the health of the public and concerned individuals; and to correct misconceptions. It is in this light that the attached Reporting and Information Dissemination Protocol, as prepared by the Health Promotion and Communication Service, is circularized.

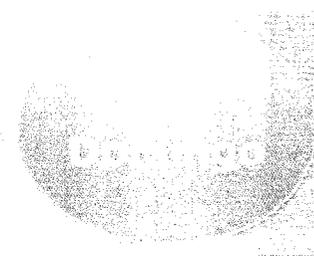
All employees and officials of the Department of Health is enjoined to assist the Department in ensuring that only official and verified information is disseminated to the public and refrain from contributing to the hysteria by sharing unverified, unofficial, false, and misleading information.

  
**FRANCISCO T. DUQUE III, MSc**  
Secretary of Health

# Reporting and Info Dissemination Protocol



**Send surveillance reports to Usec Cabotaje and Usec Domingo (cc: HPCS/ MRU)**



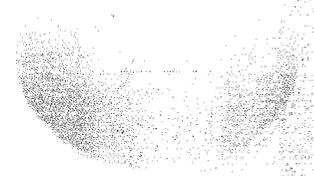
**Informs Secretary Duque**



**Drafts the press release / statement**



**Send laboratory results to Secretary Duque**



**Disseminates the report to concerned offices**



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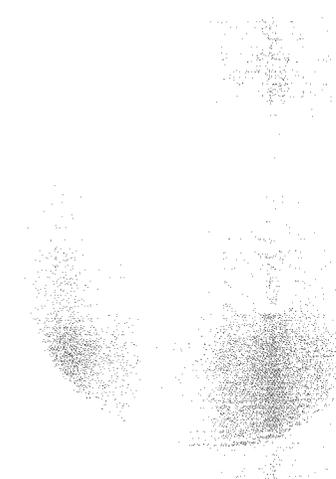


# Reporting and Info Dissemination Protocol



**Secretary  
Duque**

**Announces the updates to the public through a daily press briefing / conference**



**Sends a copy of the daily press release & reports to the Regional Directors; posts on official DOH website and social media platforms (once the Secretary has made the pronouncement)**



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# Reporting and Info Dissemination Protocol



**Holds a press briefing or conference to regional media practitioners (if necessary)**



**Forwards the PR and/or reports to the Governors (cc: Provincial Health Officer)**



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**DEPARTMENT OF HEALTH**



# Reporting and Info Dissemination Protocol



**Informs  
mayors and  
Rural  
Health  
Units**

**With the governor, hospital  
directors and the Regional  
Director, may hold a press  
briefing with the local media  
to showcase the local  
government response**



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# Reporting and Info Dissemination Protocol

1. The DOH Central Office shall always make the first announcement on confirmed cases, Persons Under Investigations (PUIs), and Persons for Monitoring (PMs) to the press;
2. All information/data to be disseminated for the day shall be based on the final information/data submitted prior to the cut-off time (12 noon);
3. All information/data reported after the cut-off time shall be included in the next day's briefing;
4. Daily DOH Central Office Press Conference/Briefing shall be every 1 PM;
5. Daily Centers for Health Development (CHD) Press Conference/Briefing shall be every 3 PM;



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# Reporting and Info Dissemination Protocol

6. Health Promotion and Communication Service (HPCS) and/or Media Relations Unit (MRU) shall translate the report/data into messages through the development of releases and various IEC materials in different platforms (to be vetted by Asec Vergeire, Usec Cabotaje and Usec Domingo);
7. HPCS and MRU shall ensure timely and correct dissemination of key messages and information;
8. HPCS and MRU shall ensure the drafting and approval of press releases/statements. Press releases/statements shall be shared to ExeCom, Directors, RDs and HEPOs after the Secretary announced it;



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# Reporting and Info Dissemination Protocol

9. CHDs shall adopt the key messages of the DOH CO. CHDs and hospitals shall coordinate with the Central Office to verify reports prior to any media appearances, to ensure uniformity of messaging;
10. CHDs shall remind hospitals to remind/enhance precautions to all health and non-health workers in hospitals; and to remind them to avoid proliferation /leaking of information.
11. Regional Directors are mandated to join all press conferences hosted by the Local Government Units regarding this health event. If so, CHD Directors, Chiefs of Hospitals and LGU may have joint press conference on nCoV status;



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# Reporting and Info Dissemination Protocol

12. HPCS shall send/disseminate prototypes of materials to CHDs and regional HEPOs, partners and stakeholders;
13. Regional HEPOS to share the materials to their local counterparts and partners; and
14. Local counterparts shall disseminate the information to communities.



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# Reports

| <b>DAILY REPORTS</b>     | <b>Time of Release</b>                        |
|--------------------------|---|
| Daily Case Tracker       | 1PM   |
| Daily Situational Report | After every daily press briefing / conference |
| Press Release            | After every after press conference            |

**<https://www.doh.gov.ph/2019-nCoV>**

**or access the DOH official social media platforms and website**



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**DEPARTMENT OF HEALTH**





Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

January 22, 2020

**DEPARTMENT MEMORANDUM**

No. 2020 - 0035

**TO: ALL MEDICAL CENTER CHIEFS, CHIEFS OF HOSPITALS, SANITARIA, AND EXECUTIVE DIRECTORS OF SPECIALTY HOSPITALS**

**SUBJECT: Strengthening of Hospital Infection Prevention and Control Measures to Prevent Spread of Novel Coronavirus**

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In the midst of close monitoring for the possible entry of novel Coronavirus (nCoV) in our country, all DOH Hospital officials and staff are hereby reminded to remain vigilant in strengthening the implementation of infection prevention and control measures.

It is essential that the following are included in the preparation and surveillance of the health facility on the novel Coronavirus:

1. Ensure that all resources and contingencies needed for the implementation of infection prevention and control measures are adequately available.
2. Active monitoring by the Infection Prevention and Control Committee and Team of patients seeking health care from their hospitals through coordination with other departments within the health facility.
3. Ensure all hospital personnel is familiar with the infection and prevention policies, guidelines and procedures of the hospital and is responsible for its adherence.
4. Emphasize the importance of hand hygiene and availability of alcohol-based hand rubs at point-of-care and other areas of the facility.
5. Ascertain that appropriate personal protective equipment (PPE) is available and appropriately used by patients (when necessary) and the hospital personnel.
6. Strictly adhere to appropriate isolation precautions and cohorting principles to prevent spread of infectious agents.
7. Appropriate disinfection and terminal cleaning of medical equipment and patient room after use.

8. Observance of housekeeping procedures and healthcare waste management.
9. Educate patients, relatives/carers and visitors about the importance of Respiratory Hygiene/Cough Etiquette through display of educational materials and through forums.

You may access all educational materials on nCoV at this link: <https://bit.ly/3au3oN4>

For guidance and strict compliance.

By Authority of the Secretary of Health:



**LILIBETH C. DAVID, MD, MPH, MPM, CESO I**  
Undersecretary  
Health Facilities Infrastructure and Development Team

"ANNEX F"



Republic of the Philippines  
Department of Health  
**OFFICE OF THE SECRETARY**

January 29, 2020

**DEPARTMENT CIRCULAR**  
No. 2020 - 0023

**TO: ALL DIRECTORS OF CENTERS FOR HEALTH DEVELOPMENT (CHDs), MINISTER OF HEALTH-BANGSAMORO AUTONOMOUS REGION IN MUSLIM MINDANAO (MOH-BARMM), MEDICAL CENTER CHIEFS/ CHIEF OF HOSPITALS/ MEDICAL DIRECTORS OF LEVEL 2 AND 3 HOSPITALS**

**SUBJECT: Reiteration of DC No. 2020-0014 entitled "Directive to attend to all suspected nCoV patients seeking consultations/treatment at the hospitals"**

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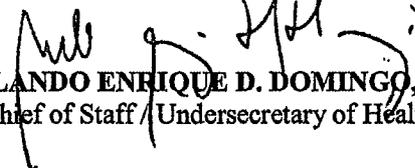
Licensed Level 2 and 3 Hospitals are equipped with isolation rooms at the Emergency and In-patient Departments as well as the capability to manage infectious cases.

As such, all level 2 and level 3 hospitals are hereby directed to attend to all patients including those suspected to have the 2019 nCoV (Novel Corona Virus) who are seeking consultations/treatment in these hospitals.

Appropriate infection prevention and control measures should be strictly implemented. For any concerns, please coordinate with the Emerging and Re-emerging Infectious Disease Program (8651-7800 local 2352) of the Disease Prevention and Control Bureau of the Department of Health.

All Centers for Health Development (CHDs) are hereby directed to disseminate this information for their strict compliance.

By Authority of the Secretary of Health

  
**ROLANDO ENRIQUE D. DOMINGO, MD**  
Chief of Staff / Undersecretary of Health