

COVID-19 Symptoms and Case Definitions



Symptoms

COVID-19 can cause a variety of symptoms that may be identified when screening people. These include:

Common/Mild Symptoms		
Fever	Runny nose	Aches and pains
Cough	Fatigue	Diarrhoea
Shortness of breath	Sore throat	Nausea

Severe Symptoms	
Difficulty breathing	Pneumonia with severe acute respiratory distress

These symptoms commonly occur 5 or 6 days after exposure to the virus but can appear in as little as 2 days or as long as 14 days after exposure to the virus.

How to Respond:

- It is advised that staff or young people with mild symptoms should telephone their usual health clinic to check if they meet the current criteria for testing. If so, seek advice on how to safely organise testing
- If unable to reach the young person's usual health care provider, call the local Public Health Unit or Healthdirect on 1800 022 222
- Ensure information about the young person's recent movements/travel or contact with a known or possible case of coronavirus is on hand. If a symptomatic young person has underlying medical problems like diabetes, heart disease or lung disease, has a weakened/suppressed immune symptoms, they may be more vulnerable to the complications of COVID-19. High risk young people should be monitored closely for worsening of symptoms
- Severe symptoms require immediate medical attention and emergency services should be called
- For testing arrangements, seek the most recent guidance from NSW Health on this [website](#). Only seek testing if someone has symptoms, as they will have to isolate themselves whilst they wait for the results of the test.
- The patient must remain isolated either in a home or a healthcare setting until public health authorities advise that it is safe to return to usual activities

Duration of Self-Isolation & Recovery Criteria

The decision on the length of isolation of someone with COVID-19 will be determined by their GP in collaboration with the local PHU. In general, a suspected or confirmed case can be released from isolation when they meet all of the following criteria:

- Follow direction from the local PHU and refer to NSW Health website for further information
- If someone becomes symptomatic call their GP or if they are unavailable attend a local COVID-19 clinic

The 14-day period from infection to onset of symptoms is only relevant for asymptomatic close contacts who should self-isolate during this time.

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The advice in this fact sheet has been taken from the *Guidelines: Residential Care Settings for Young People in Out of Home Care (OOHC) and COVID-19*, prepared by the Department of Communities and Justice, in consultation with ACWA and an expert group of service providers, and the Australian Services Union (ASU).

COVID-19 Case Definitions

NSW Health has prepared the following definitions for COVID-19 case types and scenarios.

Casual Contact

A casual contact is defined as any person having less than 15 minutes face-to-face contact with a symptomatic confirmed case in any setting or sharing a closed space with a symptomatic confirmed case for less than 2 hours.

Close Contact

A close contact is defined as requiring:

- Greater than 15 minutes face-to-face contact in any setting with a confirmed or probable case in the 24-hour period extending from before onset of symptoms in the confirmed or probable case or
- Sharing a closed space with a confirmed or probable case for a prolonged period (e.g. more than 2 hours) in the period extending from 24 hours before onset of symptoms in the confirmed or probable case

Probable Case

A probable case is defined as a person, who has not been tested, with:

- fever ($\geq 38^{\circ}\text{C}$)* or history of fever (e.g. night sweats, chills) or
- acute respiratory infection (e.g. cough, shortness of breath, sore throat)

And who is a household contact of a confirmed case of COVID-19.

Suspect(ed) Case

A suspected case is defined, in the Communicable Diseases Network Australia national Guidelines for Public Health Units, as a person who meets the following epidemiological and clinical criteria:

Epidemiological criteria	Clinical criteria
Very high risk	
Close contact in the 14 days prior to illness onset with a confirmed or probable case International travel in the 14 days prior to illness onset Cruise ship passengers and crew who have travelled in the 14 days prior to illness onset	Fever ($\geq 38^{\circ}\text{C}$)* or history of fever OR acute respiratory infection (e.g. cough, shortness of breath, sore throat)
High risk setting	
1. Two or more plausibly-linked cases of illness clinically consistent with COVID19 (see clinical criteria) in the following settings: <ul style="list-style-type: none"> • Aged care and other residential care facilities** • Military—group residential and other closed settings, such as Navy ships or living in accommodation • Boarding schools • Correctional facilities • Detention centres • Aboriginal and Torres Strait Islander rural and remote communities, in consultation with the local PHU • Settings where COVID-19 outbreaks have occurred, in consultation with the local PHU 	Fever ($\geq 38^{\circ}\text{C}$)* or history of fever (e.g. night sweats, chills) OR acute respiratory infection (e.g. cough, shortness of breath, sore throat)

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Epidemiological criteria	Clinical criteria
High risk setting <i>cont...</i>	
2. People who, in the 14 days prior to illness onset lived in or travelled through a geographically localised area with elevated risk of community transmission, as defined by public health authorities	Fever ($\geq 38^{\circ}\text{C}$)* or history of fever (e.g. night sweats, chills) OR acute respiratory infection (e.g. cough, shortness of breath, sore throat)
Moderate risk	
Healthcare workers, aged or residential care workers***	Fever ($\geq 38^{\circ}\text{C}$)* or history of fever (e.g. night sweats, chills) OR acute respiratory infection (e.g. cough, shortness of breath, sore throat)
Background risk	
(No epidemiological risk factors)	Hospitalised patients with fever ($\geq 38^{\circ}\text{C}$)* AND acute respiratory symptoms (e.g. cough, shortness of breath, sore throat) of an unknown cause

*It is recommended that temperature is measured using a tympanic, oral or other thermometer proven to consistently and accurately represent core body temperature.

**Residential settings (which includes ITC services) are only classified as a high-risk environment when 2 or more people are symptomatic.

***Residential care workers include ITC care workers.

Confirmed Case

A confirmed case is defined as a person who tests positive to a validated specific SARS-CoV-2 nucleic acid test or has the virus identified by electron microscopy or viral culture, at a reference laboratory.