



COVID-19 Situation Report

25 Feb 2020, 18:00

Sitrep #09

1. Situation Update

Highlights

- A total of **230 high-risk travelers** have completed their 14 day follow-up
- Need Chinese translators to support the follow-up team

Summary statistics as of 25th February 2020 at 1800hrs

Total number of high-risk travelers identified	631
Ugandans	143
Chinese	450
Other nationals	38
Number of high-risk travelers listed in the last 24 hours (new)	25
Number of high-risk travelers followed up in the last 24 hours	361
Total number of high-risk travelers under self-isolation	401
Total number of high-risk travelers that completed 14 days follow up	230#
Total number of high-risk travelers that completed follow-up today	20
Total number of high-risk travelers lost to follow-up	11*
Cumulative alerts	13
New alerts today	03
Cumulative cases (suspected and confirmed) identified	09
Suspected cases	09
Confirmed cases	00
Cumulative specimens collected and sent to UVRI	09
Number tested positive	00
Number tested negative	09
Specimens collected and sent to the laboratory (today)	03

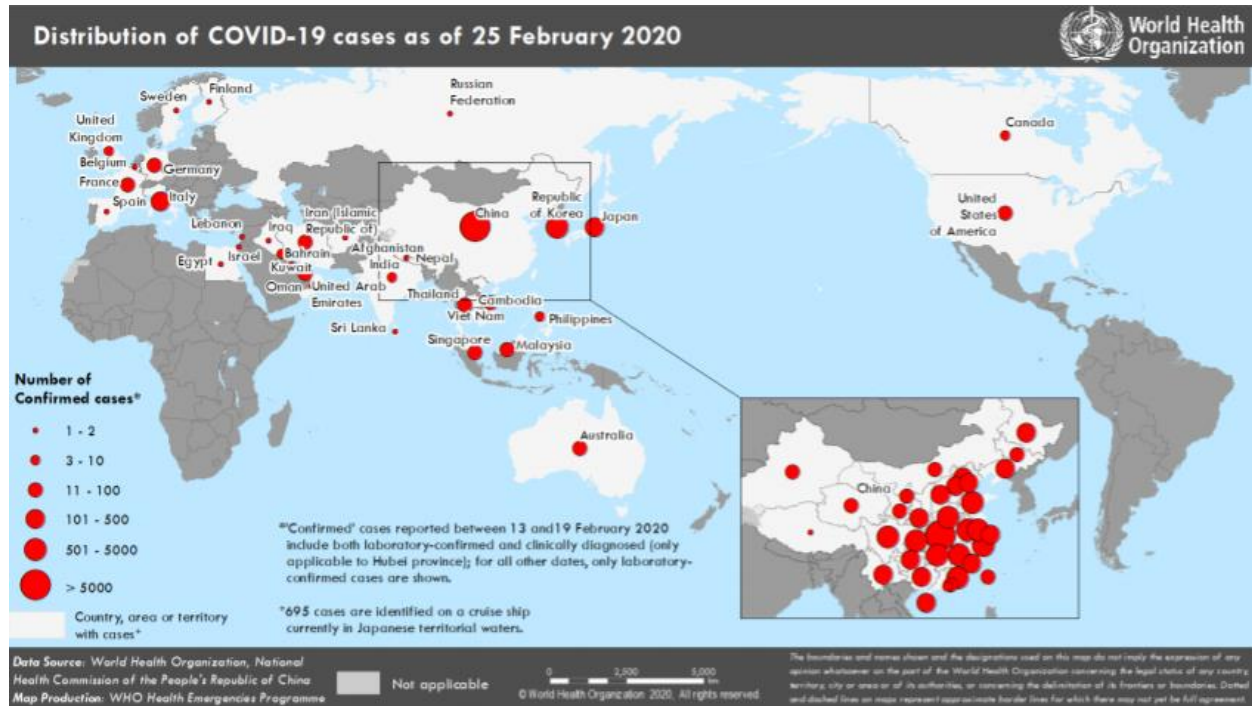
* These travelers had phone contacts that were either out of reach or had been recorded wrongly

Percentage that completed follow-up by nationality: 61% Chinese, 36% Ugandans and 4% Others

Background

On 31st December 2019 the World Health Organisation (WHO) was notified of a cluster of cases presenting with symptoms of “pneumonia-like illness of unknown cause” linked to the Huanan Seafood Wholesale Market, Wuhan, Hubei province. On 7th January 2020, the cause of the pneumonia was identified as a novel (new) Corona Virus named as COVID-19. To date, cases have been detected in 33 countries including; Thailand, Japan, South Korea, Taiwan and the United

States, United Kingdom, Hong Kong and Macau, Singapore, France, Nepal and Vietnam, Australia and Malaysia, Canada, Cambodia, Finland, Sri Lanka, the United Arab Emirates, India, Germany, France, Russia, Finland, Sweden, Italy, Spain, Philippines, Egypt, Islamic Republic of Iran, Kuwait, Afghanistan, Bahrain, Iraq and Oman. On 30th January 2020, the WHO declared this outbreak a Public Health Emergency of International Concern (PHEIC). As of 25th February 2020, a total of 80,239 (908 new) laboratory and clinically confirmed cases and 2,700 fatalities have been reported globally. (<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>).



The government of Uganda declared the COVID-19 a national emergency. The National Task Force (NTF) activated the COVID-19 Incident Management System with an Incident Manager to coordinate the implementation of various preparedness activities

2. Public Health Actions

Coordination

- The Incident management team has finalized the revised 6 month preparedness and response plan
- Presented the second cabinet information paper on COVID-19 country preparedness and readiness
- Coordination of prepared and response activities ongoing

Surveillance and Laboratory

- Ninety one (91%) of the identified high-risk travelers have been followed today and all found in good health
- A total of 230 high-risk travelers have completed their 14 day follow-up
- Sixty one (61%) Chinese, 36% Ugandans and 4% high-risk travelers of others nationalities have completed follow-up

- Processing of funds to support teams conducting screening at POEs is on going
- The NRRT has activated all targeted POEs and screening of incoming travellers has begun i.e. Entebbe, Malaba, Busia, Cyanika and Elegu
- Received three alerts at the PHEOC today

Alert 1: The MoH received an alert from International Hospital Kampala (IHK) of KS, a 28 year old Kenyan with a history of travel to Austria, Poland and Germany. He reported cough while in Poland and was started on medication. He later travelled to Germany and finally Uganda, arriving on 10/02/2020. He reported having a sore throat, cough, flu, diarrhea, fever and general body weakness. He was isolated at IHK, a sample collected and sent to UVRI. **He tested negative for COVID-19**

Alert 2: RN, a female adult Uganda who presented with flu-like symptoms and a fever. A sample was taken and sent to UVRI. **She tested negative for COVID-19**

Alert 3: A male adult who presented with a running nose, sneezing, a sore throat and shortness of breath following his daily workout. He reported a history of travel from Freetown, Sierra Leone to Uganda via Nairobi on 21/02/2020. He reported sitting next to a passenger with a terrible cough on his flight from Nairobi. A sample was collected and sent to UVRI. **He tested negative for COVID-19**

Planned Activities

- Expanding the NRRT to respond to the increasing number of COVID-19 alerts
- Orientation of district surveillance systems to enable early detection and follow-up of increasing number of COVID-19 alerts
- Orientation of laboratory surge capacity for collection of COVID-19 samples

Risk Communication and Community Engagement

- Lobbying UNICEF and other partners to fund the mass printing of IEC materials

Case Management

- Mobilizing central human resources to orient case management teams at all Regional Referral Hospitals (RRHs) on management COVID-19 cases
- Held a meeting with Entebbe Hospital Management to initiate the training of the case management team and orientation of all staff at the hospital

Logistics

- Logistics have been delivered to all POEs targeted for activation of screening of high-risk travelers
- Quantification of supplies and commodities for COVID-19 at RRHs
- Medicines and other logistics have been received by the screening team at Elegu border

3. Conclusion

As a country, the Ministry of Health has established a strong response system to be able to prevent, detect and respond to suspected cases of COVID-19 in collaboration with other relevant ministries, agencies and departments of Government.