

COVID-19 criteria and case definitions

7 August 2020

This case definition document no longer defines who to test for COVID-19. The case definition document identifies those with a higher risk of having COVID-19 and outlines the reporting and self-isolation requirements for those with symptoms who meet the higher index of suspicion criteria. Please refer to the testing guidance webpage for advice on who to test to ensure that we do not have community transmission. The testing guidance will be regularly updated, however, those with symptoms who meet the higher index of suspicion criteria should always be the highest priority for testing.

The Ministry of Health has developed the following criteria and case definitions for COVID-19 based on expert advice from our Technical Advisory Group. The criteria take into account New Zealand's current COVID-19 status. We are currently in a position where people with an acute respiratory infection are not automatically considered a suspect case, so we have removed the term suspect case.

We have introduced "Higher Index of Suspicion" (HIS) criteria as, at this stage, our greatest risk of re-introduction of COVID-19 and spread is via our border. All people meeting the HIS criteria who have symptoms consistent with COVID-19 should be tested for COVID-19 and self-isolate while awaiting test results to reduce the risk to others.

Other conditions that require urgent assessment and management should always be considered alongside COVID-19.

The Ministry has also developed a Testing Strategy. The Testing Strategy outlines additional testing being undertaken to support early detection of COVID-19 at the border, and surveillance testing of people with symptoms consistent with COVID-19 who present to primary and secondary care to ensure that there is no community transmission.

Case definitions

Clinical criteria

**The following symptoms are consistent with COVID-19:
Any acute respiratory infection with at least one of the following symptoms: new or worsening cough, sore throat, shortness of breath, coryza¹, anosmia² with or without fever.**

Some people may present with symptoms such as only: fever, diarrhoea, headache, myalgia, nausea/vomiting, or confusion/irritability. If there is not another likely diagnosis, **and** they meet the HIS criteria then test.

Higher Index of Suspicion (HIS) criteria

Either, in the 14 days prior to illness onset have:

¹ Coryza – head cold e.g. runny nose, sneezing, post-nasal drip.

² Anosmia – loss of sense of smell.

- had contact³ with a confirmed or probable case
- had international travel
- had direct contact with a person⁴ who has travelled overseas (eg Customs and Immigration staff, staff at quarantine/isolation facilities)
- worked on an international aircraft or shipping vessel
- cleaned at an international airport or maritime port in areas/conveniences visited by international arrivals, or
- any other criteria requested by the local Medical Officer of Health

Case classification

Under investigation case

A case that has been notified where information is not yet available to classify it as confirmed, probable or not a case.

Probable case

- A close contact of a confirmed case that has a high exposure history, meets the clinical criteria and for whom testing cannot be performed, or
- A close contact of a confirmed case that has a high exposure history, meets the clinical criteria, and has a negative PCR result but it has been more than 7 days since symptom onset before their first negative PCR test was taken.

Confirmed case

A case that has laboratory definitive evidence. Laboratory definitive evidence requires at least one of the following:

- detection of SARS-CoV-2 from a clinical specimen using a validated NAAT (PCR)
- detection of coronavirus from a clinical specimen using pan-coronavirus NAAT (PCR) and confirmation as SARS-CoV-2 by sequencing
- significant rise in IgG antibody level to SARS-CoV-2 between paired sera (when serological testing becomes available).

Not a case

An 'under investigation' case who has a negative test and has been assessed as not a case.

Notification procedure

Laboratories must immediately notify the local medical officer of health of any confirmed cases. Attending medical practitioners must notify any confirmed (or probable cases) AND anyone who meets both the clinical and HIS criteria.

Please refer to the **Updated Advice for Health Professionals** regarding who should be tested.

³ Refer **Advice for Health Professionals** for close contact criteria (<https://www.health.govt.nz/covid19-hp-advice#advice>)

⁴ Excludes household and community contacts of aircrew