

Expanding symptom screening criteria can up COVID-19 detection

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(HealthDay)—Expanding COVID-19 symptom screening criteria to

include myalgias and chills could identify more health care personnel (HCP) with the illness, according to a research letter published online April 17 in the *Journal of the American Medical Association*.

Eric J. Chow, M.D., M.P.H., from the U.S. Centers for Disease Control and Prevention in Atlanta, and colleagues assessed the spectrum of symptoms at onset of COVID-19 among 48 HCP with laboratory-confirmed severe acute respiratory syndrome coronavirus 2 who resided in King County, Washington. The authors also evaluated current screening criteria for identifying COVID-19 cases early in the illness course.

The researchers found that the most common initial symptoms were cough, fever, and myalgias (50.0, 41.7, and 35.4 percent, respectively). Eight of the HCP did not report fever, cough, shortness of breath, or [sore throat](#) at onset of symptoms; chills, myalgia, coryza, and malaise were the most [common symptoms](#) among this group. One HCP only reported coryza and headache and did not have fever, cough, shortness of breath, or sore throat at any time during illness. Case detection among HCP increased from 40 to 43 cases (83.3 to 89.6 percent) when myalgia and chills were included in screening criteria at illness onset. Overall, 64.6 percent of HCP interviewed reported working a median of two days while exhibiting any symptoms.

"Interventions to prevent transmission from HCP include expanding symptoms-based screening criteria, furloughing symptomatic HCP, facilitating testing of symptomatic HCP, and creating sick leave policies that are nonpunitive, flexible, and consistent with public health guidance," the authors write.

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