PUBLIC HEALTH ADVISORY
CONSIDER MERS IN RETURNING TRAVELERS FROM THE ARABIAN PENINSULA
SEPTEMBER 13, 2018

Situation Update

With the annual Hajj pilgrimage to Mecca, Saudi Arabia ending on August 24, the Department of Public Health reminds providers that Middle East Respiratory Syndrome Coronavirus (MERS-CoV or MERS) illness should be considered in returning travelers who present with symptoms consistent with lower respiratory tract infection. MERS infections, while rare, continue to be identified in the Arabian Peninsula.1 No recent MERS cases have been identified in travelers returning to the United States, but the California Department of Public Health has received several reports in the past week of patients under investigation (PUI) for MERS. In addition, there have been reports from other states of influenza A in patients with recent travel to the Hajj. If influenza A is circulating, more travelers are likely to present with lower respiratory tract symptoms.

Recommendations for Clinicians:

- Routinely ask patients with symptoms of acute, potentially infectious illness about recent travel.

- Consider MERS-CoV infection in patients (PUIs) who meet the following criteria:

  - Fever2 AND pneumonia or acute respiratory distress syndrome (based on clinical or radiologic evidence) AND EITHER:

    - History of travel from countries in or near the Arabian Peninsula1 with 14 days before symptom onset; OR

    - Close contact with a symptomatic traveler who developed fever2 and acute respiratory illness (not necessarily pneumonia) within 14 days after traveling from countries in or near the Arabian Peninsula,1

  - OR, A member of a cluster of patients with severe acute respiratory illness (e.g., fever and pneumonia requiring hospitalization) of unknown etiology in which MERS-CoV is being evaluated, in consultation with Public Health; OR:
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- Fever\(^2\) AND symptoms of respiratory illness (not necessarily pneumonia; e.g., cough, shortness of breath) AND being in a healthcare facility (as a patient, worker, or visitor) within 14 days before symptom onset in a country or territory in or near the Arabian Peninsula\(^1\) in which recent healthcare-associated cases of MERS have been identified; OR:

- Fever\(^2\) OR symptoms of respiratory illness (not necessarily pneumonia; e.g., cough, shortness of breath) AND close contact with a confirmed MERS case while the case was ill.

- **Immediately isolate suspect PUIs for MERS utilizing standard, contact and airborne precautions.** Place patient in an Airborne Infection Isolation Room and utilize personal protective equipment (PPE) upon entry into the patient room or care area, including at a minimum gloves, gowns, respiratory protection at least as protective as a fit-tested N-95 respirator, and eye protection. See [https://www.cdc.gov/coronavirus/mers/infection-prevention-control.html](https://www.cdc.gov/coronavirus/mers/infection-prevention-control.html) for more information.

- **Notify Disease Control immediately by phone at (951) 358-5107 or after hours at (951) 782-2974 of any PUIs for MERS.** The Public Health laboratory can be contacted at (951) 358-5070 for guidance on specimen collection.

- Additional information is located at: [https://www.cdc.gov/coronavirus/mers/interim-guidance.html](https://www.cdc.gov/coronavirus/mers/interim-guidance.html)

If you have any questions please contact Disease Control at the number above.

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**Footnotes:**

1. Arabian Peninsula and neighboring areas include Bahrain; Iraq; Iran; Israel, the West Bank and Gaza; Jordan; Kuwait; Lebanon; Oman; Qatar; Saudi Arabia; Syria; the United Arab Emirates (UAE); and Yemen.

2. Fever may not be present in some patients such as the very young, elderly or immunosuppressed.