



## SEVERE ACUTE RESPIRATORY SYNDROME

# NOTICE

Since 2004, there have not been any known cases of SARS reported anywhere in the world. The content in this PDF was developed for the 2003 SARS epidemic. But, some guidelines are still being used. Any new SARS updates will be posted on this Web site.



# SEVERE ACUTE RESPIRATORY SYNDROME

Public Health Guidance for Community-Level Preparedness and Response to Severe Acute Respiratory Syndrome (SARS) Version 2

## Core Document

### II. Overview of the Guidance Document

#### A. *Purpose and Scope*

This document presents a strategic framework for communities and healthcare facilities to plan and prepare for the recurrence of SARS-CoV transmission and respond to a SARS outbreak. Directed to state and local health departments, healthcare facilities, and healthcare personnel, the document addresses both the rationale and the strategies for SARS preparedness and response and provides a foundation for the development of more detailed operational plans and procedures for responding to SARS at the local level. Suggested activities include those needed to prepare for an introduction of SARS-CoV, to quickly detect possible SARS cases and clusters, and to prevent and contain SARS-CoV transmission.

This document includes suggested activities to be conducted both in the absence of SARS-CoV transmission in the world and in the context of a recurrence of person-to-person transmission. A companion document, *In the Absence of SARS-CoV Transmission Worldwide: Guidance for Surveillance, Clinical and Laboratory Evaluation, and Reporting* ([www.cdc.gov/ncidod/sars/absenceofsars.htm](http://www.cdc.gov/ncidod/sars/absenceofsars.htm)), consolidates the recommended activities for the setting of no person-to-person transmission. If SARS-CoV transmission is documented anywhere in the world, CDC will promptly review all available information and provide additional guidance as indicated via the Health Alert Network (HAN), Epi-X, and partner organizations. Current information will also be posted on CDC's SARS website: [www.cdc.gov/sars](http://www.cdc.gov/sars).

*Public Health Guidance for Community-Level Preparedness and Response to Severe Acute Respiratory Syndrome (SARS)* has its basis in the *United States Government Interagency SARS Concept of Operations Plan (CONPLAN)*, which outlines the Federal government's strategy for a coordinated national response to an outbreak of SARS. The CONPLAN provides planning guidance for a timely, coordinated response by federal agencies to a SARS emergency and serves as a foundation for the development of operational plans and procedures at the national, state, and local levels. Whereas the focus of the CONPLAN is interagency and intergovernmental coordination, CDC's *Public Health Guidance for Community-Level Preparedness and Response to Severe Acute Respiratory Syndrome (SARS)* provides planning guidance, strategies, and tools for the local public health and healthcare officials who provide the first line of readiness and action in detecting and containing a SARS outbreak.

Many of the approaches and activities for preparedness and response to SARS are similar or identical to those involved in combating other infectious diseases, such as pandemic influenza and intentionally spread smallpox or plague. Therefore, topics covered in this document may be relevant to or already addressed in other local emergency preparedness plans.

#### B. *Development Process*

The document was prepared by CDC's SARS Preparedness Committee, which was assembled to prepare for the possibility of future SARS outbreaks. The Committee includes eight working groups, each of which addressed a component of SARS preparedness and response: Surveillance, Clinical Management, Preparedness in Healthcare Facilities, Community Response, Laboratory Diagnostics, Information Technology, Communication and Education, and Special Studies. The working groups derived the guidance document from lessons learned during the 2003 epidemic, other CDC preparedness and

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## **Overview of the Guidance Document**

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response plans, and the advice, suggestions, and comments of state and local health officials and representatives of professional organizations, convened by means of teleconferences and meetings. Meetings were held on August 12-13, 2003 (public health preparedness and response), September 12, 2003 (preparedness in healthcare facilities), and September 18, 2003 (laboratory diagnostics).

### ***C. Objectives***

The strategies, guidelines, and tools included in this document are designed to enable states and communities to achieve the following objectives:

- Rapidly and efficiently identify cases of SARS-CoV disease and their exposed contacts
- Ensure rapid information exchange among clinicians, public health officials, and administrators of healthcare facilities about potential SARS cases
- Rapidly and effectively implement measures to prevent the transmission of SARS-CoV
- Continuously monitor the course and characteristics of a SARS outbreak and promptly revise control strategies as needed
- Implement effective communication and education strategies for the public, the media, community officials, healthcare communities, and public health communities to ensure an appropriate response to SARS
- Coordinate and integrate SARS preparedness and response planning efforts with other preparedness plans and systems

For more information, visit [www.cdc.gov/ncidod/sars](http://www.cdc.gov/ncidod/sars) or call the CDC public response hotline at (888) 246-2675 (English), (888) 246-2857 (Español), or (866) 874-2646 (TTY)