



**Australian Government**  
**Department of Health**  
National Incident Room

## New coronavirus 2019 (COVID-19)

### Health Situation Report

#### Report Details

<b>Date of Issue</b>	2020-03-02 1800 AEDT	<b>Version</b>	43
<b>Reference</b>	NIR #2238	<b>Next Report</b>	2020-03-03 1800 AEDT
<b>Prepared By</b>	Sophie Robinson – NIR Duty Officer	<b>Authorised By</b>	Celia Street, FAS OHP
<b>Context</b>	This report focuses on the health response by the Australian Government. States and territories have constitutional authority for health responses. The NIR is supporting the national coordination of the health sector emergency response to COVID-19 under the direction of the <u>Australian Health Protection Principal Committee (AHPPC)</u> . Changes are shown in <i>red italics</i> .		
<b>Distribution</b>	AHPPC, NHEMS, State and Territory Health Departments, CDNA Secretariat, PHLN Secretariat.		

#### Summary

<b>Situation</b>	<p>As at 17:30 hrs on 2 March 2020:</p> <ul style="list-style-type: none"> <li>There have been 33 laboratory confirmed cases of COVID-19 in Australia, including one death (the first in Australia). <ul style="list-style-type: none"> <li>Of the initial 15 cases, all had a direct or indirect <i>travel</i> link to Wuhan, China.</li> <li>Ten cases are associated with the Diamond Princess repatriation flight from Japan to the Northern Territory. The cases are residents of Western Australia (2), South Australia (1), Queensland (3) and Victoria (4). All cases have been repatriated to their home states for care and isolation. <ul style="list-style-type: none"> <li>One of the Diamond Princess repatriated cases who was being treated in WA, passed away in the early hours of 1 March 2020. This is the first reported death <i>associated with COVID-19</i> in Australia.</li> </ul> </li> <li>7 cases are reported to have had a direct or indirect travel link to Iran: <ul style="list-style-type: none"> <li>Between 28 February and 1 March, two cases with a recent travel history to Iran were reported in Queensland (1) and NSW (1).</li> <li>Since the 1 March SitRep, an additional 4 cases with a recent travel history to Iran have been reported from NSW (2), Victoria (1) and Tasmania (1). An additional case from NSW is considered to have an indirect travel link to Iran as they were a close contact of a previously reported case who had a travel history to Iran.</li> </ul> </li> <li>A further case was reported from NSW on 2 March 2020. The case is a health care worker with no history of overseas travel. Follow-up regarding the likely source of infection is pending.</li> </ul> </li> </ul>
------------------	--

	<ul style="list-style-type: none"> <li>○ <i>Of the 33 confirmed cases reported in Australia, 21 are reported to have cleared their infections.</i></li> <li>• A total of <b>88,933</b> cases of COVID-19 have been reported globally, including <b>3,052</b> deaths. <ul style="list-style-type: none"> <li>○ The majority of cases continue to be reported from mainland China, particularly Hubei Province. In recent days there have been rapid increases in cases, especially from South Korea, Italy, and Iran.</li> <li>○ <b>8,907</b> cases have been reported from <b>66</b> countries and regions outside of mainland China.</li> <li>○ Of the <b>3,052</b> confirmed deaths: <b>2,912</b> have been reported in mainland China (predominately Hubei); <b>54 have been in Iran; 34 in Italy; 31 in South Korea;</b> 6 were associated with the Diamond Princess cruise ship in Japan; <b>6 elsewhere in Japan;</b> 2 in France; 2 in Hong Kong; and 1 each in Taiwan, the Philippines, Australia, the United States of America and Thailand.</li> </ul> </li> </ul>
<b>Response</b>	<ul style="list-style-type: none"> <li>• <i>On 2 March, DFAT reissued travel advice for Indonesia. The overall level has not changed and we continue to advise Australians to exercise a high degree of caution overall in Indonesia, including Bali. While there are currently no confirmed cases in Indonesia, many countries in the region have reported cases.</i></li> <li>• <i>On 1 March, due to a heightened risk of sustained local transmission of COVID-19 in parts of northern Italy, DFAT raised the travel advice for 10 towns in the region of Lombardy and one town in the region of Veneto to 'Level 3 - Reconsider Your Need to Travel'. The overall travel advice for the rest of Italy has been raised to 'Level 2 - Exercise a High Degree of Caution'.</i></li> <li>• On 29 February, the Australian Government announced new measures in response to the coronavirus outbreak in Iran. <ul style="list-style-type: none"> <li>○ the Department of Foreign Affairs and Trade will raise the level of the travel advisory for Iran from level 3 to level 4 – do not travel.</li> <li>○ foreign nationals who are in Iran on or after 1 March 2020, will not be allowed to enter Australia for 14 days, from the time they have left or transited through Iran.</li> <li>○ Australian citizens and permanent residents will still be able to enter, as will their immediate family members (spouses, legal guardians or dependents only). They will be required to self-isolate at home for 14 days from the day they left Iran.</li> </ul> </li> <li>• On 27 February 2020, the Prime Minister announced the activation of the 'Australian Health Sector Emergency Response Plan for Novel Coronavirus (COVID-19)'.</li> <li>• On 27 February 2020, the Australian Government supported the Australian Health Protection Principal Committee (AHPCC) recommendations to maintain travel restrictions for travellers from mainland China for a further seven days, to 7 March 2020. This will be reviewed in one week.</li> <li>• On 27 February, DFAT raised the travel advice for Mongolia to 'exercise a high degree of caution' (level 2 of 4) due to the risk from the coronavirus, the poor standard of medical care and the reduction in commercial departure options.</li> <li>• On 23 February DFAT raised the travel advice level for both Japan and South Korea to 'exercise a high degree of caution' (level 2 of 4), on the advice of the Chief Medical Officer and the AHPCC.</li> <li>• On 28 February the Australian Institute of Sport announced that for the foreseeable future, it will not accept camps from overseas groups that have spent time in the preceding 14 days in any of the following countries (this list will be updated regularly on the AIS website devoted to COVID-19): China, Cambodia, Hong Kong, Indonesia, Iran, Italy, Japan, Singapore, South Korea, Thailand.</li> <li>• The AHPCC has recommended a strict framework to allow small numbers of additional people to enter Australia from China, including year 11 and year 12 students.</li> </ul>

## 1. Situation

<b>Overview</b>	<b>Domestic Situation (as at 1500 hrs, 2 March 2020)</b> <ul style="list-style-type: none"> <li>• The fourth national COVID-19 epidemiological report on cases up to 22 February 2020 was published in the Communicable Diseases Intelligence (CDI) journal on 26 February 2020. The report provides information on notified Australian cases, the international situation and the current understanding of severity, transmission and spread of the</li> </ul>
-----------------	---

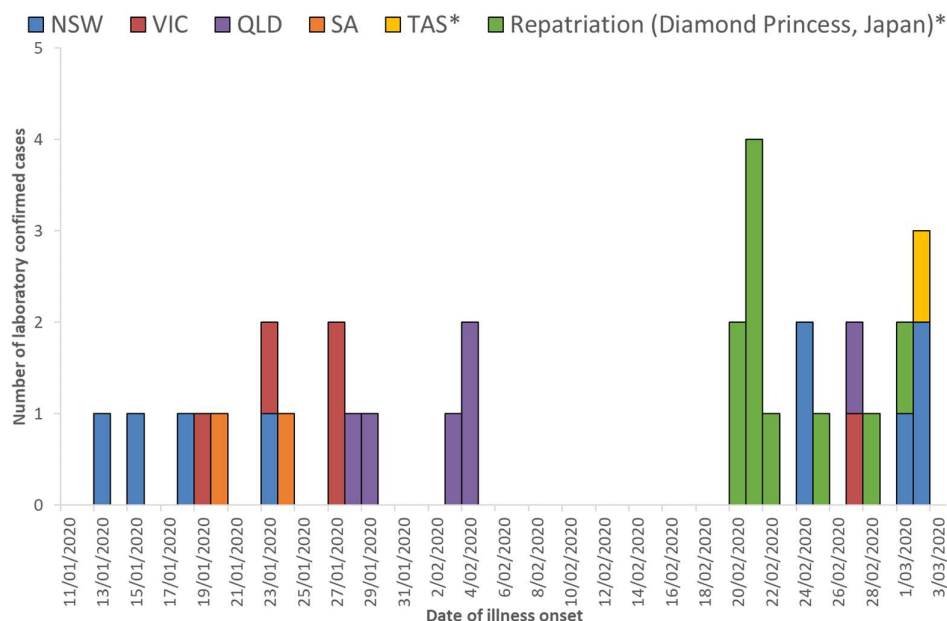
infection<sup>1</sup>.

- **33** cases of COVID-19 have been laboratory confirmed in Australia (Table 1).
  - Of the initial 15 cases:
    - All had a travel history to China and direct or indirect link to Wuhan, Hubei Province.
      - There has been a cluster involving a total of 5 cases where 3 cases had exposure to two co-primary cases that they had been travelling in Australia with. The two co-primary cases had a relevant travel history to Wuhan, Hubei Province, China.
  - 10 confirmed cases in Australia are associated with the Diamond Princess repatriation flight from Japan to Howard Springs in the Northern Territory.
    - The cases are residents of Western Australia (2), South Australia (1), Queensland (3) and Victoria (4), and have been repatriated to their home states for isolation and care.
    - One of the repatriated cases who was being treated in WA, a 78 year old male, passed away in the early hours of 1 March. This is the first death *associated with* COVID-19 in Australia.
  - *7 cases are reported have had a direct or indirect travel link to Iran:*
    - *Between 28 February and 1 March, two cases with a recent travel history to Iran were reported in Queensland (1) and NSW (1).*
    - *Since the 1 March SitRep, an additional 4 cases with a recent travel history to Iran have been reported from NSW (2), Victoria (1) and Tasmania (1). An additional case from NSW is considered to have an indirect travel link to Iran as they were a close contact of a previously reported case who had a travel history to Iran.*
  - *A further case was reported from NSW on 2 March 2020. The case is a health care worker with no history of overseas travel. Follow-up regarding the likely source of infection is pending.*
  - *Of the 33 confirmed cases reported in Australia, 21 are reported to have cleared their infections.*

**Table 1. Confirmed cases of COVID-19 by jurisdiction, Australia (as at 1500 hrs, 2 March 2020)**

Case Summary	ACT	NSW	NT	Qld	SA	Tas	Vic	WA	Repatriation (Diamond Princess)	Australia
CONFIRMED	0	9	0	6	2	1	5	0	10	33
DEATHS	0	0	0	0	0	0	0	0	1	1

**Fig 1. Epidemic curve of confirmed cases of COVID-19, as at 1500 hrs 2 March 2020 by date of onset\***



\*Date of report used for the Diamond Princess repatriated *and Tasmanian* cases.

#### International Situation (as at 1500 hrs, 2 March 2020)

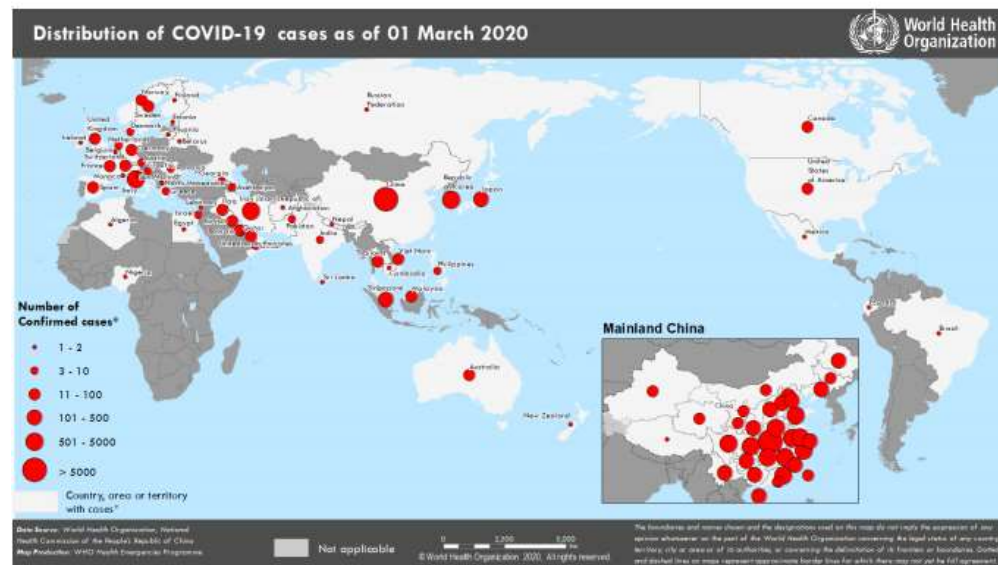
A total of **88,933** cases of COVID-19 have been reported globally, including **3,052** deaths (Table 2). The majority of cases continue to be reported from mainland China, with **8,907** cases reported from **66** countries and regions outside of mainland China.

- A total of **1,988** new cases of COVID-19 have been reported since yesterday's Situation Report, **90%** of these cases were in countries and regions outside mainland China.
  - South Korea (n=**686**) today reported the largest increase globally. Additionally, substantial increases were also reported in Italy (n=**566**) and Iran (n=**385**)
    - There are now several large clusters in South Korea. Many of these clusters are associated with church gatherings.
    - In Iran, COVID-19 is considered to be widespread in multiple cities.
    - *In Italy, almost two-thirds of cases are in Lombardia.*
    - *Dominican Republic, Czech Republic and Luxembourg* have reported their first confirmed cases of COVID-19. *The Dominican Republic case reported a history of recent travel from Italy.*
  - *Additionally, Germany has also reported a large increase in cases since yesterday.*
- The WHO has reported that several countries have not reported a case for more than two weeks: Belgium, Cambodia, India, Nepal, Philippines, the Russian Federation, Sri Lanka and Vietnam.
- Of the **3,052** confirmed deaths: **2,912 (95%)** have been reported in mainland China (predominately Hubei). There have been **140** deaths reported outside of mainland China: **54 have been in Iran; 34 in Italy; 31 in South Korea;** 6 were associated with the Diamond Princess cruise ship in Japan; **6 elsewhere in Japan;** 2 in France; 2 in Hong Kong; and 1 each in Taiwan, the Philippines, Australia, the United States of America and Thailand.
  - Based on the number of reported cases globally, the case fatality rate is approximately 3.4%.
    - The case fatality rate in countries and regions outside mainland China is **1.6%.**
    - The risk of death is reported to increase with age.

In mainland China<sup>ii</sup>:

- Of the **80,026** reported cases:
  - Approximately 84% of cases in mainland China have been from Hubei Province.
  - Of new cases reported globally since yesterday, **10%** have been from Hubei Province.
- Of the **2,912** reported deaths in mainland China, 96% have been in Hubei Province.

**Fig 2. Map of COVID-19 cases from WHO Novel Coronavirus (COVID-19) Situation Report 41 of 1 March 2020<sup>iii</sup>**



**Fig 3. Cumulative cases of COVID-19 reported worldwide, 24 January 2020 to 2 March 2020, by date of report (as at 15:00hrs 2 March 2020)**

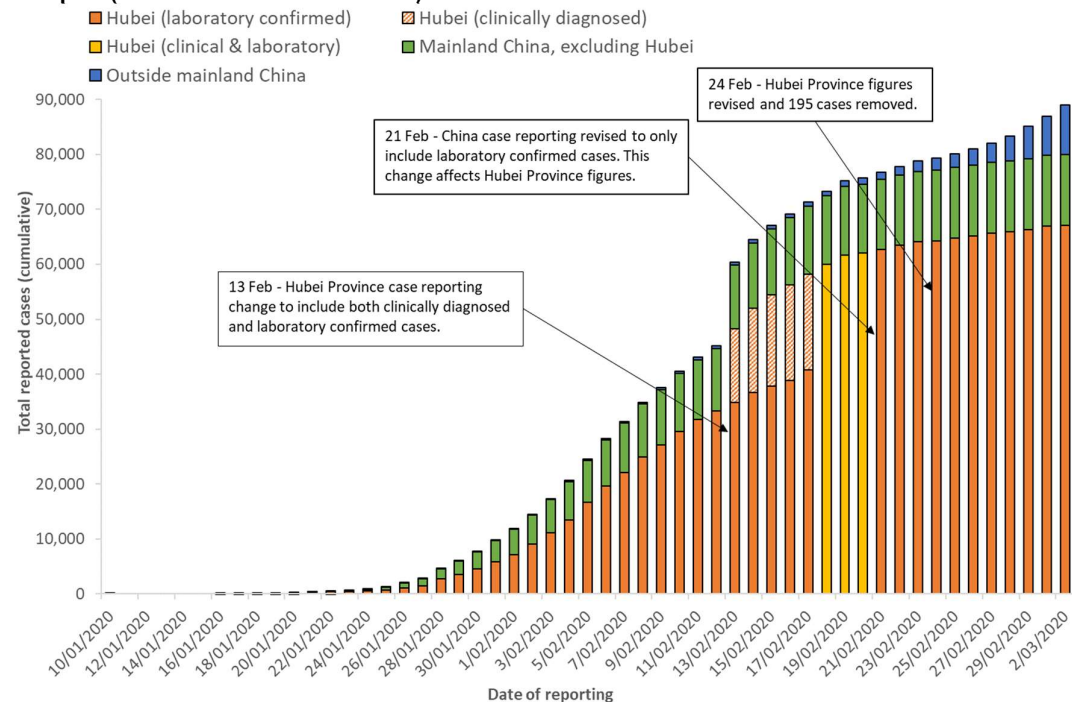


Table 2. Confirmed cases of COVID-19 by location, as at 15:00 hrs 2 March 2020

Location	Reported cases	Deaths	Case difference from last SitRep	Death difference from last SitRep
<b>Mainland China</b>	<b>80,026</b>	<b>2,912</b>	<b>202</b>	<b>42</b>
Mainland China broken down by province:				
<i>Hubei province</i>	67,103	2,803	196	42
<i>Guangdong province</i>	1,349	7	0	0
<i>Henan province</i>	1,272	22	0	0
<i>Zhejiang province</i>	1,205	1	0	0
<i>Hunan province</i>	1,018	4	0	0
<i>Anhui</i>	990	6	0	0
<i>Other provinces in mainland China</i>	7,089	69	6	0
Hong Kong SAR	98	2	3	0
Taiwan	40	1	1	0
Macau SAR	10	0	0	0
International conveyance (Japan)	706	6	1	0
Republic of Korea (South Korea)	4,212	31	686	14
Italy	1,694	34	566	5
Iran (Islamic Republic of)	978	54	385	11
Japan (excl. international conveyance)	254	6	15	1
Germany	129	0	62	0
Singapore	106	0	4	0
France	100	2	0	0
United States	69	1	0	0
Bahrain	47	0	6	0
Kuwait	46	0	1	0
Spain	46	0	0	0
Thailand	42	1	0	0
UK	35	0	12	0
Australia	33	1	6	0
Malaysia	25	0	0	0
Switzerland	24	0	6	0
United Arab Emirates	21	0	2	0
Canada	20	0	0	0
Vietnam	16	0	0	0
Norway	15	0	0	0
Iraq	13	0	5	0
Sweden	13	0	1	0
Austria	10	0	0	0
Lebanon	10	0	6	0
Croatia	7	0	1	0
Greece	7	0	3	0
Israel	7	0	0	0
Netherlands	7	0	1	0
Oman	6	0	0	0

	Finland	5	0	2	0
	Pakistan	4	0	0	0
	Azerbaijan	3	0	2	0
	Czech Republic	3	0	3	0
	Denmark	3	0	0	0
	Georgia	3	0	0	0
	India	3	0	0	0
	Mexico	3	0	0	0
	Philippines	3	1	0	0
	Qatar	3	0	2	0
	Romania	3	0	0	0
	Brazil	2	0	1	0
	Russia	2	0	0	0
	Afghanistan	1	0	0	0
	Algeria	1	0	0	0
	Armenia	1	0	0	0
	Belarus	1	0	0	0
	Belgium	1	0	0	0
	Cambodia	1	0	0	0
	Dominican Republic	1	0	1	0
	Ecuador	1	0	1	0
	Egypt	1	0	0	0
	Estonia	1	0	0	0
	Iceland	1	0	0	0
	Ireland	1	0	0	0
	Lithuania	1	0	0	0
	Luxembourg	1	0	0	0
	Monaco	1	0	1	0
	Nepal	1	0	0	0
	New Zealand	1	0	0	0
	Nigeria	1	0	0	0
	North Macedonia	1	0	0	0
	San Marino	1	0	0	0
	Sri Lanka	1	0	0	0
	<b>Total</b>	<b>88,933</b>	<b>3,052</b>	<b>1,988</b>	<b>73</b>
<b>International response measures</b>	<b>WHO</b>				
	<ul style="list-style-type: none"> <li>On 30 January 2020, the Director-General declared that the outbreak of [COVID-19] constitutes a Public Health Emergency of International Concern and issued advice as Temporary Recommendations under the International Health Regulations (2005).<sup>iv</sup></li> <li>On 28 February 2020, the Director-General advised that WHO has increased their assessment of the risk of spread and the risk of impact of COVID-19 to very high at a global level.</li> </ul> <p><b>United Nations</b></p> <ul style="list-style-type: none"> <li>On 1 March 2020, the United Nations Humanitarian Chief, Mark Lowcock, released US\$15 million from the Central Emergency Response Fund (CERF) to help fund global efforts to</li> </ul>				



*contain the COVID-19 virus. This grant will help countries with fragile health systems boost their detection and response operations.*

## 2. Health Responses by States and Territories

<b>ACT Health</b>	<ul style="list-style-type: none"> <li>Investigation of identified persons who meet the case definition is ongoing.</li> <li>The ACT Health Emergency Control Centre (HECC) is activated.</li> <li>The ACT Epidemic Infectious Diseases (EID) Annex of the Health Emergency Plan is activated.</li> <li>COVID-19 is a notifiable condition under the ACT Public Health Act 1997.</li> <li>The HECC continues to liaise with stakeholders across government and the community on preparedness for the identification and management COVID-19 cases in the ACT.</li> </ul>
<b>NSW Health</b>	<ul style="list-style-type: none"> <li>The Senior Officials' Group (all Cluster Secretaries, the Chief Health Officer, the State HSFAC, the State Emergency Operations Controller and the State Emergency Recovery Controller) met on 28 February for an update on COVID-19 preparedness and response. Ministry of Health <i>continues to engage</i> with the Department of Education and Training to determine the process to support year 11 and 12 students returning to Australia from China.</li> <li>Individual risk assessments for cruise ships continue.</li> <li><i>NSW Health is updating documents to reflect the extension of travel restrictions to include Iran.</i></li> <li><i>NSW Health is working with the communications team to source Farsi/ Persian translation services at the airport.</i></li> </ul>
<b>NT Health</b>	<ul style="list-style-type: none"> <li>Alert distributed to clinicians updating case definition, isolation and infection control advice.</li> <li>Novel coronavirus is now a Notifiable Disease in the NT.</li> </ul>
<b>QLD Health</b>	<ul style="list-style-type: none"> <li>CHO has declared a Public Health Event of State Significance and the Communicable Diseases Branch has stood up an IMT for state-wide co-ordination and reporting.</li> <li>The State Health Emergency Contact Centre (SHECC) is activated.</li> <li>COVID-19 <i>is</i> a controlled notifiable condition under the Public Health Act 2005.</li> </ul>
<b>SA Health</b>	<ul style="list-style-type: none"> <li>Novel coronavirus is now a notifiable and controlled notifiable disease in SA.</li> <li>Whole of Health briefings held weekly.</li> <li>State Control centre – Health activated 0800-1800 daily. Full recall arrangements in place.</li> <li>Full Incident management team meetings held 3 times a week.</li> <li>Whole of Health Discussion Exercise planned for 10th March 2020.</li> </ul>
<b>TAS Health</b>	<ul style="list-style-type: none"> <li>COVID-19 is now a notifiable disease under the Public Health Act 1997 (Tas).</li> <li>Incident Management Team has established a working group to coordinate strengthening testing capacity.</li> </ul>
<b>VIC Health</b>	<ul style="list-style-type: none"> <li>An incident management team is meeting daily.</li> <li>A COVID-19 specific hotline has been activated using nurse on call.</li> </ul>
<b>WA Health</b>	<ul style="list-style-type: none"> <li>The Public Health Emergency Operations Centre (PHEOC) and State Health Incident Coordination Centre (SHICC) are activated.</li> <li>The Chief Health Officer has formally escalated the Infectious Disease Emergency Management Plan to INITIAL ACTION PHASE and the State Hazard Plan Human Biosecurity has been activated to STANDBY PHASE.</li> </ul>



	<ul style="list-style-type: none"> <li>A media briefing was held by the Chief Health Officer on 1 March regarding the first coronavirus related death in WA in a 78 year old man who was a passenger on the Diamond Princess cruise ship.</li> </ul>
--	--

### 3. Planned Activities

<b>AHPPC</b>	<ul style="list-style-type: none"> <li>The AHPPC will continue to meet daily.</li> </ul>
--------------	--

### 4. Supporting Information and Background

#### General

The fourth weekly epidemiological report including data on Australian cases, the international situation and current information on the severity, transmission and spread of the COVID-19 infection has been published in the Communicable Disease Intelligence journal.

#### Clinical presentation

The most commonly reported symptoms are fever, cough, fatigue and difficulty with breathing. .

Cases are concentrated amongst those between 20–70 years (85.9%); those aged <20 years contribute just 2.1% of all cases. Overall case proportions by gender are similar (male 51.4%: female 48.6%).

#### Severity

As the outbreak continues, the confirmed case fatality rate may change. It is too early to draw conclusions as to whether there are real differences in the case fatality rate inside and outside of China, as final outcome data for the majority of cases reported from outside China are not yet known.

An overall case fatality rate (CFR) of 2.3% across China. The calculated CFR was much higher in Hubei Province (2.9%) than in all other provinces (0.4%). Based on an analysis of more than 44,000 confirmed cases of COVID-19 in China, more than 80% of cases had mild disease, with no pneumonia or mild pneumonia. Of the critical cases, 49% have died. The disease appeared to affect primarily adults, and children appeared to present with less severe disease. Critically ill patients who died have shown to be older and more likely to have chronic comorbidities such as cardiovascular disease, diabetes, hypertension and other respiratory disease. A higher case fatality rate has also been reported for males compared to females.

#### Transmission

The exact nature of transmission of SARS-CoV-2 is not well understood. Human-to-human transmission is currently suspected to be via droplets, contact and fomites.

There continues to be a large variation in the basic reproductive number (R0) calculated in various studies depending on the assumptions made and data set used. A recent review of 12 studies estimated the mean R0 to be 3.28 and median R0 to be 2.79, which exceeded the WHO preliminary R0 of 1.4–2.5 (average 1.95).

The role asymptomatic cases play in SARS-CoV-2 transmission remains unclear. There is some evidence of potential infectivity of asymptomatic cases based on viral load studies.

#### Incubation period

WHO has revised the epidemiologic parameters of COVID-19 in collaboration with an international network of statisticians and mathematical modellers. Preliminary estimates of median incubation period are 5 to 6 days.

This report is issued under the function of the Australian National Focal Point (NFP). The Australian NFP is in the Office of Health Protection at the Australian Government Department of Health and its activities are supported 24/7 by the National Incident Room (NIR). The Australian NFP is established under the *National Health Security Act 2007*.

For more information on the event(s) in this report, contact the NFP by email at [health.ops@health.gov.au](mailto:health.ops@health.gov.au) or by phone (24 hours) at +61 (0) 2 6289 3030.

---

<sup>i</sup> Coronavirus disease (COVID-19) weekly epidemiology reports, Australia, 2020

[https://www1.health.gov.au/internet/main/publishing.nsf/Content/novel\\_coronavirus\\_2019\\_ncov\\_weekly\\_epidemiology\\_reports\\_australia\\_2020.htm](https://www1.health.gov.au/internet/main/publishing.nsf/Content/novel_coronavirus_2019_ncov_weekly_epidemiology_reports_australia_2020.htm)

<sup>ii</sup> National Health Committee of the People's Republic of China - Update on the outbreak of new coronavirus pneumonia as of 24:00 on February 29

<http://www.nhc.gov.cn/yjb/s7860/202003/9d462194284840ad96ce75eb8e4c8039.shtml>

<sup>iii</sup> WHO Novel Coronavirus (2019-nCoV) Situation Report – 40

[https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200229-sitrep-40-covid-19.pdf?sfvrsn=7203e653\\_2](https://www.who.int/docs/default-source/coronaviruse/situation-reports/20200229-sitrep-40-covid-19.pdf?sfvrsn=7203e653_2)

<sup>iv</sup> Statement on the second meeting of the International Health Regulations (2005) Emergency Committee regarding the outbreak of novel coronavirus (2019-nCoV)

[https://www.who.int/news-room/detail/30-01-2020-statement-on-the-second-meeting-of-the-international-health-regulations-\(2005\)-emergency-committee-regarding-the-outbreak-of-novel-coronavirus-\(2019-nCoV\)](https://www.who.int/news-room/detail/30-01-2020-statement-on-the-second-meeting-of-the-international-health-regulations-(2005)-emergency-committee-regarding-the-outbreak-of-novel-coronavirus-(2019-nCoV))