
U.S. MARINE CORPS DISEASE CONTAINMENT PREPAREDNESS PLANNING GUIDANCE FOR 2019 NOVEL CORONAVIRUS

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SUBJ/U.S. MARINE CORPS DISEASE CONTAINMENT PREPAREDNESS PLANNING
GUIDANCE FOR 2019 NOVEL CORONAVIRUS (2019 nCoV)//

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NARR/REF A IS THE U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES' NATIONAL HEALTH SECURITY STRATEGY 2019-2022 WHICH DISCUSSES STRATEGY TO PREVENT, DETECT, ASSESS, PREPARE FOR, MITIGATE, RESPOND TO, AND RECOVER FROM HEALTH SECURITY THREATS. REF B IS DOD INSTRUCTION 6200.03 PUBLIC HEALTH EMERGENCY MANAGEMENT WITHIN THE DOD, WHICH PROVIDES DIRECTION TO ENSURE MISSION ASSURANCE AND READINESS FOR PUBLIC HEALTH EMERGENCIES. REF C IS TITLE 42, U.S.C. SECTIONS 243,

249 AND 264, 265, AND 271. REF D IS TITLE 42, CFR PART 70 AND 71. REFS C AND D CONTAIN REGULATIONS FOR COOPERATION AND PREVENTING THE INTRODUCTION, TRANSMISSION AND SPREAD OF COMMUNICABLE DISEASES AND/OR OTHER HAZARDOUS SUBSTANCES FROM FOREIGN COUNTRIES INTO THE UNITED STATES. REF E IS UNDERSECRETARY OF DEFENSE MEMORANDUM; FORCE HEALTH PROTECTION SUPPLEMENT 1 - DOD GUIDANCE FOR MONITORING PERSONNEL RETURNING FROM CHINA DURING THE NOVEL CORONAVIRUS OUTBREAK, WHICH PROVIDES DISEASE CONTAINMENT RESTRICTION OF MOVEMENT GUIDANCE FOR ALL SERVICE MEMBERS RETURNING FROM MAINLAND CHINA. REF F IS MCO 6220.2 DISEASE CONTAINMENT PLANNING WHICH PROVIDES GUIDANCE TO RESPOND TO AND MITIGATE BIOLOGICAL EVENTS WITH PUBLIC HEALTH EMERGENCY IMPLICATIONS AND ALIGNS ORGANIZATIONAL ROLES AND RESPONSIBILITIES WITHIN THE MARINE CORPS FOR DISEASE CONTAINMENT PLANNING (DCP) ACTIVITIES. REF G IS DOD INSTRUCTION 6055.17 DEPARTMENT OF DEFENSE EMERGENCY MANAGEMENT PROGRAM, WHICH OUTLINES REQUIREMENTS TO MANAGE PUBLIC HEALTH EMERGENCIES IAW THE PROVISIONS OF THE INSTRUCTION. REF H IS OFFICE OF THE SECRETARY OF DEFENSE GUIDANCE WHICH CONTAINS OVERARCHING INFORMATION ON THE NOVEL CORONAVIRUS. REF I IS GLOBAL CAMPAIGN PLAN 3551, WHICH DIRECTS USNORTHCOM TO EXECUTE ITS PANDEMIC PLAN AND SUPPORTING GEOGRAPHIC COMBATANT COMMANDS TO EXECUTE THEIR PANDEMIC PLANS IN RESPONSE TO THE NCOV OUTBREAK. REF J IS MCO 3440.8A, INSTALLATION CHEMICAL, BIOLOGICAL, RADIOLOGICAL, NUCLEAR AND HIGH YIELD EXPLOSIVE (CBRNE) PREPAREDNESS, WHICH PROVIDES ADDITIONAL GUIDANCE ON THE PLANNING AND MANAGEMENT OF BIOLOGICAL THREATS. REF K IS HQMC RESPONSE TO NOVEL CORONAVIRUS OUTBREAK EXORD WHICH PROVIDES AMPLIFYING COORDINATION INFORMATION. REF L IS MCO 3504.2A, OPERATIONS EVENT INCIDENT REPORT (OPREP-3) REPORTING. POC/CHRISTOPHER BURCH/CIV/UNIT: PP&O PS PSP IP/TEL: (703) 692-4491/NIPR E-MAIL: CHRISTOPHER.BURCH1@USMC.MIL// GENTEXT/REMARKS/1. Situation.

1.A. General.

1.A.1. Commanders will take specific actions to review and validate Disease Containment Plans to prepare for and respond to a potential occurrence of the 2019 Novel (New) Coronavirus (2019-nCoV).

1.A.2. The current threat of the 2019 Novel Coronavirus has raised concern that this virus could result in a pandemic disease. In such a scenario, nCoV could spread, infecting U.S. personnel, and threaten the operational readiness of the U.S. Marine Corps.

1.A.3. The Marine Corps' response to a pandemic outbreak focuses on five major areas: 1) Force Health Protection (FHP); 2) Disease

Containment Planning (DCP) and Readiness; 3) Continuity of Operations (COOP); 4) Defense Support of Civilian Authorities (DSCA); and 5) Support to U.S. Government response efforts.

1.B. Background.

1.B.1. An outbreak of a new (novel) coronavirus is rapidly evolving, but currently poses a LOW RISK to personnel located in CONUS. The 2019-nCoV is a viral respiratory disease related to Middle-East Respiratory Syndrome (MERS-CoV) and Severe Acute Respiratory Syndrome (SARS). Symptoms of 2019-nCoV may include fever, cough, and shortness of breath.

1.B.2. Chinese health authorities identified 2019-nCoV as the cause of the pneumonia outbreak in Wuhan, China. There are confirmed cases in over 20 countries, including the United States, with validated cases in Arizona, California, Illinois, Massachusetts, Washington State, and Wisconsin, with one reported death of an American citizen in China.

1.B.3. The U.S. State Department issued a LEVEL 4 DO NOT TRAVEL advisory to China on 30 January 2020. The World Health Organization (WHO) has categorized risk as VERY HIGH for China, and HIGH globally, and declared that nCoV constitutes a Public Health Emergency of International Concern (PHEIC).

1.B.4. Although the United States Government, in conjunction with private industry, is conducting research to identify protocols that may treat the 2019-nCoV disease, there are no U.S. Food and Drug Administration-approved treatments at this time. Standard treatment for 2019-nCoV includes prompt implementation of recommended infection prevention and control measures and supportive management of complications. Per the Centers for Disease Control and Prevention (CDC), a person under investigation for 2019-nCoV infection should be isolated, and healthcare professionals, and local or state health departments, should be notified immediately.

1.B.5. Presently, the U.S. Marine Corps is planning, conducting routine surveillance, and commencing engagement activities, to assure and solidify collaborative relationships, and inform all personnel, to be prepared for disease containment operations and support.

1.B.6. This MARADMIN aligns with validating Disease Containment and Installation CBRNE Protection Plans IAW references F and J.

2. Mission. The U.S. Marine Corps will prepare for potential outbreaks of 2019-nCoV. If an outbreak occurs, the Marine Corps

mitigates, responds, and recovers from the effects in order to maintain force readiness.

3. Execution.

3.A. Commander's Intent.

3.A.1. Method.

3.A.1.A. Plan, and take preparatory and precautionary actions to ensure that an outbreak of 2019-nCoV does not incapacitate Marine Corps forces, installations, and facilities. If 2019-nCoV is introduced on USMC installations and facilities, or within the Fleet Marine Force (FMF), execute plans and procedures to improve Force Health Protection (FHP) and readiness.

3.A.1.B. Planning will address protection of all Marines, government civilian, contract workforce personnel, and military family members.

3.A.1.C. Planning will address FHP, both in garrison and during deployment. Per reference E, the following prescriptive measures must be adhered to:

3.A.1.C.1. Identify all Marines returning from mainland China after 2 February 2020 and place service members under a 14-day restriction of movement (ROM).

3.A.1.C.2. During the 14-day ROM:

3.A.1.C.2.A. Restrict Marines to their residence for a 14-day ROM period, starting from the day of departure from mainland China.

3.A.1.C.2.B. Marines will be assessed by cognizant medical staff (by phone consultation or in person), as soon as possible, within the first 24 hours of arrival to home station or their final destination, for the development of fever or symptoms of 2019-nCoV.

3.A.1.C.2.C. Marines living in open-bay settings, or rooms with shared bathrooms and/or kitchen facilities, will be placed in separate lodging to span the 14-day ROM period. The command to which the Marine is assigned will arrange for the separate lodging.

3.A.1.C.2.D. Marines will be assessed daily for fever and symptoms by cognizant medical staff (by phone consultation or in person).

For all in-person assessments of members, (including those which are asymptomatic), medical personnel should wear appropriate PPE.

3.A.1.C.2.E. Marines will separate themselves from other people in the home/dwelling if residing with roommates/family members to avoid sharing personal items, to the extent possible pursuant to existing guidance.

3.A.1.C.2.F. Marines may not travel, visit public/crowded areas, or

use public transportation and should avoid interaction with pets or other animals, to the greatest extent possible.

3.A.1.C.2.G. Medical evaluation and care will be immediately arranged if the Marine displays fever and symptoms consistent with the 2019-nCoV, as per CDC guidance.

3.A.1.C.2.G.1. The Marine will call ahead before going to a medical treatment facility (MTF), informing the MTF of his/her symptoms and travel history.

3.A.1.C.2.G.2. MTF staff should follow CDC guidance when assessing Marines who display fever and symptoms consistent with 2019-nCoV.

3.A.1.C.2.G.3. If a Marine or Sailor is identified as a patient, per previously published guidance, appropriate reporting will be initiated.

3.A.1.C.3. Until further notice, it is recommended that civilian employees and contractor personnel, and family members returning from China follow existing CDC guidance. Key aspects include voluntarily: remaining at home, avoiding congregate settings, limiting close contact with people and pets/other animals to the greatest extent possible, avoiding travel, self-monitoring, and seeking immediate medical care if symptoms develop.

3.A.1.C.4. Potentially affected personnel will be identified in coordination with Federal, State, and local medical planners, healthcare providers, and Public Health Emergency Officers (PHEOs). Actions will mitigate the spread of 2019-nCoV to unaffected personnel.

3.B. End State. The U.S. Marine Corps is postured to mitigate, contain, respond to, and recover from the effects of a public health crisis, and is capable of conducting assigned missions in a pandemic environment.

3.C. Concept of Operations. The concept of operations in response to a viral disease crisis retains the phased approach structure outlined in NORTHCOM CONPLAN 3551, IAW reference I.

3.D. Tasks.

3.D.1. Commanders will:

3.D.1.A. Review, update, and validate existing disease containment plans and policies in order to implement procedures for response, isolation, quarantine, restriction of movement, and community-based intervention.

3.D.1.B. Restrict travel and movement of personnel to areas experiencing 2019-nCoV outbreaks. Provide appropriate medical and

non-medical screening of, and protection for, personnel returning from affected areas. Monitoring and screening of individuals potentially exposed to 2019-nCoV should be based on the guidance set forth in reference E.

3.D.1.C. Develop measures to contain and treat U.S. service members DOD employees, contract employees, and family members exposed to, or possibly exposed to 2019-nCoV.

3.D.1.D. Interim guidance and recommendations for reporting, testing and specimen collection can be found at the CDC website: <https://www.cdc.gov/coronavirus/2019-ncov/HCP/clinical-criteria.html>.

3.D.1.E. IAW reference K, report suspected cases of Marines and Sailors meeting the CDC's definition of a patient or confirmed cases of 2019-nCoV through service and combatant command reporting channels, and to COMMARFORNORTH for tracking and reporting to CDRUSNORTHCOM. OPREP-3 and/or SIR formatting guidance is contained in reference L.

3.D.1.F. Ensure DCP is incorporated into COOP plans, including continuity of essential services.

3.D.1.G. Coordinate with MTFs in development and execution of DCP responses.

3.D.1.H. Commanders will protect personally identifiable information and protected health information, as applicable, in accordance with U.S Law and DoD regulations and policies.

3.D.1.I. Coordinate with Navy Regional Medical Command to request PHEO support.

3.D.1.J. Become familiar with authority to declare a public health emergency, restrict movement, quarantine and isolate. Coordinate with Federal, State, local, and military treatment facilities and public health emergency officials outlined in Section 3 of reference B.

3.D.1.K. Validate Public Health Emergency Preparedness and Disease Containment Response Plans for 2019-nCoV that incorporate the requirements of this MARADMIN.

3.D.2. Coordinating Instructions.

3.D.2.A. The U.S. Marine Corps will follow CDC guidance for healthcare providers at: <https://www.cdc.gov/coronavirus/2019-ncov/clinical-criteria.html>. Additional reference material for protective equipment that may go beyond current CDC guidelines are available at: <https://health.mil/Reference->

Center/Policies/2018/09/25/Personal-Protective-Equipment-Policy-Guidance. Due to the dynamic nature of this outbreak, individuals should frequently check the CDC 2019-nCoV website for additional updates at: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>.

4. Administration and Logistics. This MARADMIN has been coordinated with HQMC Operations Division, HQMC, Health Services - Preventive Medicine, and HQMC Judge Advocate.

5. Command and Signal. A. Command. This MARADMIN applies to the Total Force. B. Signal. This MARADMIN is effective immediately.

6. Release authorized by SES Randy R. Smith, Assistant Deputy Commandant, Plans, Policies and Operations (Security).//