

NH Health Officers,

In order to support your role in responding to community concerns with the novel coronavirus (COVID-19), the NH DPHS has developed the following guidance.

If your community members have general questions or concerns, please direct them first to the CDC or NH DPHS websites to read the most recent information, as our phone lines are very busy with clinical issues. General information and specific guidance can be found on these sites.

CDC: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

NH DPHS: <https://www.dhhs.nh.gov/dphs/cdcs/2019-ncov.htm>

The NH DPHS is always available to support health officers in their response needs. If you need to report a symptomatic or asymptomatic person with a connection to COVID-19, please follow these steps:

1. Review guidance on infectious disease response in the NH Health Officers Manual at this link: <https://www.dhhs.nh.gov/dphs/holu/documents/hom-commndisease.pdf>
2. If someone in your community brings a concern to you about a specific person associated with a COVID-19 case, exposure, or travel - please contact the NH DPHS, **Bureau of Infectious Disease Control (BIDC)**:
 - a. Call **603-271-4496** (from 8 AM to 4 PM) or **603-271-5300** at any time of day (24 hours)
 - b. If you reach a live operator, please provide the following information
 - Your name and title
 - Town or city you represent
 - The best phone number to reach you. (Preferably a mobile phone).
 - The reason you are calling, or a brief situation report.

Example of a situation report: “Hi, this is _____ (your name, title, town, phone) and I’m calling because there was a report of a suspect _____ (case, exposure, travel, etc.). How would you like me to proceed?”

c. If you reach a voice mail when you call NH DPHS, please leave a message with your own contact information and a brief situation report. Do not leave any personal information for the suspect person. Please protect all personal information regarding any COVID-19 exposures or concerns within your community.

Thank you.

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