12 October 2020

Weekly Updates on the Global Outbreak of COVID-19

PHASE 2



COVID-19 Stats	Confirmed Cases	Recovered	Critical and Serious	Death Cases	Mortality Rate
Singapore	57,876	57,705 (99.7%)	0	27	0.05%
United States	7,949,913	5,090,255	14,719	219,304	2.8%
India	7,063,955			108,412	1.5%
Brazil	5,091,540			150,236	3.0%
Russia	1,298,718			22,597	1.7%
Peru	846,088			33,223	3.9%
United Kingdom	590,844			42,760	7.2%
Spain	890,367			32,929	3.7%
Italy	354,950			36,166	10.2%
Germany	324,596			9,697	3.0%
France	718,873			32,637	4.5%
China	85,557			4,634	5.4%
Indonesia	333,449			11,844	3.6%
Philippines	339,341			6,321	1.9%
Japan	88,912			1,627	1.8%
South Korea	24,606			432	1.8%
Malaysia	15,657			157	1.0%
Thailand	3,636			59	1.6%
Influenza stats from CDC USA 1st Oct 2019	Estimated 31,000,000			Taking high estimate 30,000	0.1%

Stats adapted from Worldometer as of 0100 11 Oct 2020





LATEST UPDATES

11 October

COVID-19 IMPACT ON MENTAL HEALTH MUST BE MANAGED, AS



SINGAPORE: Health authorities around the world must not only fight COVID-19 but also manage its impact on mental health, Prime Minister Lee Hsien Loong said on Saturday (Oct 10).

This is as the pandemic has brought "stresses, pressures and disruptions" to more people, Mr Lee said in a video message to the World Health Organisation for World Mental Health Day.

Mental health is essential to overall well-being, said Mr Lee. But while awareness of its importance has grown, "too often, persons with mental health conditions are still not well understood or fully accepted".

In Singapore's case, Mr Lee highlighted the National Care Hotline set up to provide psychological first aid and emotional support to the public during this "stressful period". He also pointed to the COVID-19 Mental Wellness Taskforce, established to tackle the pandemic's impact on mental health.

The Prime Minister noted that one in seven people in Singapore will suffer from a mental health condition at some point in their lives. "Ensuring access to quality mental healthcare for every citizen is therefore a major priority," he said, pointing out efforts to raise mental health literacy, promote early intervention and improve mental health services.

"Protecting mental health takes a collective effort," Mr Lee said. "Let's resolve to work together to understand mental health better, and to care for one another during these difficult times."

AUSTRALIA IN TRAVEL TALKS WITH SINGAPORE, JAPAN, KOREA AS COVID-19 CASES EASE

MELBOURNE: Australia is in talks with Japan, South Korea, Singapore and South Pacific nations on reopening travel as coronavirus infections ease, Prime Minister Scott Morrison said on Sunday (Oct 11).

Australia shut its borders in March to slow the spread of the coronavirus and is looking to revive tourism to help pull the country out of its first recession in nearly three decades. While Australia has managed to contain the outbreak better than others, it is facing a second wave in the state of Victoria, where Melbourne remains under a tight lockdown. But infections there have been falling since early August.

Mr Morrison said he had spoken to his counterparts in Japan, South Korea and some Pacific nations, while Foreign Minister Marise Payne had held talks in Singapore this week on resuming travel. "There are a number of countries that have performed well on the health front, and Australia and those countries are one of a handful of countries that have had the same level of success," Mr Morrison said at a televised media conference.

"But we have to go cautiously on this – very, very cautiously. COVID-19 hasn't gone anywhere. It's still there. And it is no less aggressive today than it was six months ago."

AUSTRALIA'S COVID-19 HOTSPOT STATE VICTORIA SAYS DAILY CASES NEAR FOUR-MONTH LOW

SYDNEY: New daily COVID-19 cases in Australia's hotspot state Victoria have fallen to a near four-month low, authorities said on Friday (Oct 2), as other states recorded only imported cases raising the prospect of more domestic borders reopening.

The state of Queensland flagged it may open its border with the country's most populous state New South Wales (NSW) from Nov 1, if NSW records no local cases for 28 days. NSW has posted six straight days of no local cases.

The second most populous state Victoria said seven people have been diagnosed with COVID-19 in the past 24 hours, down from 15 on Thursday and near the four-month low of five cases reported on Sep 28. The decline in COVID-19 cases comes nearly two months after Victoria imposed a stringent lockdown across its state capital, Melbourne.

The bulk of restrictions will only be eased when the average for new daily cases over a two-week window falls below five. The 14-day rolling case average for Melbourne is now down to 12.8, after falling from 15.6 on Thursday.

Victoria accounts for 90 per cent of national COVID-19 deaths. Australia, with 890 fatalities, has fared far better than many other developed countries.

10 October

US STRIKES DEAL WITH ASTRAZENECA FOR COVID-19 ANTIBODY TREATMENT TOUTED BY TRUMP

WASHINGTON: The US government has awarded US\$486 million to AstraZeneca to develop and secure supplies of up to 100,000 doses of COVID-19 antibody treatment, a similar class of drug that was used in treating President Donald Trump.

The agreement, under the Trump administration's Operation Warp Speed, is for developing a monoclonal antibody cocktail that can prevent COVID-19, especially in high-risk population like those over 80 years old, the US Department of Health and Human Services said. The treatment has come under the spotlight after Trump was treated with Regeneron Pharmaceuticals' antibody drug last week. The president has also released a video on Twitter touting its benefits. In a call earlier on Friday (Oct 9), a top US health official said the government was expecting to provide more than 1 million free doses of antibody treatments to COVID-19 patients, similar to the one that was administered to Trump.

Regeneron and Eli Lilly have both applied to the US Food and Drug Administration for emergency use authorisations of their antibody treatments.

AstraZeneca said it was planning to supply up to 100,000 doses starting toward the end of 2020 and that the US government could acquire up to an additional one million doses in 2021 under a separate agreement.

Regeneron signed a US\$450 million deal in July to sell Operation Warp Speed enough doses of its antibody treatment, REGN-COV2, to treat around 300,000 people.





Eli Lilly said on Friday it had not signed an agreement with Operation Warp Speed.

AstraZeneca plans to evaluate the treatment, AZD7442, which is a cocktail of two monoclonal antibodies, in two studies.

One trial will evaluate the safety and efficacy of the experimental treatment to prevent infection for up to 12 months in about 5,000 participants, while the second will evaluate post-exposure preventative and pre-emptive treatment in roughly 1,100 participants.

EUROPE RECORDS 100,000 DAILY CORONAVIRUS CASES FOR FIRST TIME

LONDON: Europe surpassed 100,000 daily reported COVID-19 cases for the first time on Thursday (Oct 8), after countries such as Russia and United Kingdom saw no respite in the mounting number of infections every day in the past five days.

Cases throughout Europe have been steadily rising over the past week even as new infections in worst-affected countries such as India and Brazil have shown signs of slowing down.

The epicentre of the outbreak in the European region has moved to the United Kingdom, Russia, Spain and France which have reported at least over 10,000 cases each in the last three days. Russia reported its highest daily coronavirus cases ever since the last record in May on Friday, prompting Moscow authorities to mull closing bars and nightclubs.

The United Kingdom recorded more than 17,000 cases on Thursday with the country's Health Minister Matt Hancock warning that the United Kingdom was at a "perilous moment". Many parts of northern England, Wales and Scotland have introduced tougher restrictions on social interaction to try to curb the growing spread of the disease. Britain has been reeling under a double whammy of coronavirus cases skyrocketing and an alarming case-to-fatality rate of 7 per cent, among the highest in the world. More than six of every 10,000 people have died due to the virus in the country.

The country's fatality rate is in stark contrast to the United States at 2.8 per cent, even though the United States has recorded more than four times the total number of deaths due to the virus compared to Britain.

Europe currently has recorded over 16 per cent of total global coronavirus cases and nearly 22 per cent of deaths worldwide due to the virus. On Thursday, when daily reported cases breached the 100,000 mark, Eastern Europe was the worst affected region with over 33,600 daily reported cases.

Among the 10 countries in the region, including Ukraine, Russia and the Czech Republic, eight posted record increases in cases in the past week. In Northern Europe, Britain was the sole country with a mammoth caseload. New infections in the country have risen more than 2.5 times since the beginning of October showing no signs of slowing down.

Italy, in the southern region of Europe, recorded over 4,000 cases for the first time since April when the country was slammed by virus. The daily number of cases in the country has been consistently rising for three months. The country has the second-highest death toll in the continent, with 36,083 dying since the outbreak erupted in February.

Spain's government invoked a state of emergency on Friday to impose a partial lockdown on Madrid. With 850 COVID-19 infections per 100,000 people, the Madrid area has Europe's highest infection rate. In Western Europe, France recorded new daily COVID-19 infections above the record 18,000 threshold for two days in a row on Thursday, with hospitals moving to an emergency mode and its biggest cities

closing down establishments to curtail further spread of the virus.

Belgium too enforced stricter controls on gatherings after new infections surged in the country. New coronavirus cases rose more than 2.6 times since the beginning of October. COVID-19 has already claimed over 10,000 lives in the country, which has a population of 11 million people.

In Europe, daily cases averaged around 78,000 cases for since the beginning of October, compared with an average of 47,500 cases in September.

NURSES SUFFER BURN-OUT, PSYCHOLOGICAL DISTRESS IN COVID-19 FIGHT

GENEVA: Many nurses caring for COVID-19 patients are suffering burn-out or psychological distress, and many have faced abuse or discrimination outside of work, the International Council of Nurses (ICN) said. Supplies of personal protective equipment for nurses and other health workers in some care homes remain insufficient, it said, marking World Mental Health Day on Saturday (Oct 10).

"We are extremely concerned about the mental health impact on nurses," Howard Catton, a British nurse who is the ICN's chief executive, told Reuters Television at the association's headquarters in Geneva.

"Our most recent survey of national nurses' associations shows that more than 70 per cent of them (the associations) were saying that nurses have been subject to violence or discrimination and as a result of that they are very concerned about extreme cases of psychological distress and mental health pressure," he said.

The figure was based on responses from roughly a quarter of its national nurses' associations in more than 130 countries. Nurses face a broad spectrum of issues that affect their mental health, including physical and verbal abuse, Catton said.

"There are nurses who have been subject to discrimination, where their landlord has not renewed their lease for their apartment, or they can't get child care for their children," he said, without giving specifics of physical or verbal abuse.

ICN has lobbied for better protection and working conditions for nurses on the front lines of the pandemic. "We still continue to see problems with the supplies personal protective equipment. There have been improvements, particularly in hospitals," Catton said. But some care homes and long-term care facilities in Europe, and in North and South America still lack supplies, he said, citing its members' survey.

The World Health Organization said last Monday that services for mentally ill and substance abuse patients have been disrupted worldwide during the pandemic, and COVID-19 is expected to cause further distress for many.

MYANMAR REPORTS MORE THAN 2,000 DAILY CORONAVIRUS CASES IN NEW RECORD

YANGON: Myanmar's health ministry reported 2,158 new cases of coronavirus on Saturday (Oct 10) in a record daily rise, along with 32 new deaths.

The Southeast Asian nation has locked down its biggest city, Yangon, and air and overland travel in the country has been halted.



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A total of 26,064 cases and 598 deaths have been reported in Myanmar, the vast majority since a second wave began in mid-August.

MALAYSIA REPORTS 374 NEW COVID-19 CASES AND 3 DEATHS

KUALA LUMPUR: Malaysia reported 374 new coronavirus cases on Saturday (Oct 10), a slight increase from the previous day, as health officials ramp up contact tracing in Sabah state where a large number of cases have been detected over the past few weeks.

The new cases raise the cumulative tally to 15,096 cases, according to the health ministry.

This is the 10th consecutive day that the number of new COVID-19 cases remained at three digits. Health director-general Dr Noor Hisham Abdullah said the number of active cases now stands at 4,161.

Sabah continued to report the highest number of new cases with a total of 277 new cases reported. This is mainly due to more screenings done, particularly in areas under the Enhanced Movement Control Order (EMCO) and Administrative EMCO, said Dr Noor Hisham "Selangor reported 44 cases, followed by Kedah with 27 cases, all involving Tembok cluster, while Sarawak recorded nine cases, Kuala Lumpur (four) and three in Penang.

"There were two cases each in Johor, Perak and Labuan, and one case in Melaka and Putrajaya," Dr Noor Hisham said in an online media conference via the Health Ministry's Facebook account on Saturday.

Of the new cases, 372 were locally transmitted cases while two were imported cases - a Malaysian and a foreigner returning from the Philippines.

Of the 372 locally transmitted cases, 343 involved Malaysians and the remaining cases were foreigners.

"Seventeen of the local transmissions were those who had returned from Sabah, bringing the total number of cases with a history of travel to Sabah since Sep 20 to 341 cases," he said.

All three new deaths were Malaysians in Sabah, said Dr Noor Hisham. This takes Malaysia's death toll to 155.

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RUSSIA'S COVID-19 CASES HIT RECORD HIGH, MOSCOW MULLS CLOSING NIGHTCLUBS

MOSCOW: Authorities in Moscow were considering closing bars and nightclubs to halt a second coronavirus wave as the number of new daily cases surged on Friday (Oct 9) to the highest it has been since the pandemic began.

Russia reported 12,126 new infections, pushing the overall total to 1,272,238. The previous record daily rise was 11,656 cases on May 11, when strict lockdown measures were in force across most of the vast country.

Russian authorities have recommended people stay at home this weekend, but currently have no lockdown in place and the Kremlin has said there are no plans to impose one for now.

The Moscow Mayor's office was looking into closing bars, nightclubs and karaoke bars, but keeping restaurants in the capital open, the RBC media outlet reported on Friday, citing a source at the mayor's office. "We have to at least somehow reduce the number of people in the city, otherwise we may arrive at the same strict restrictions as we had in the spring," RBC quoted the source as saying.

Authorities in Moscow, the epicentre of Russia's coronavirus outbreak

in the spring, has also recommended people over the age of 65 isolate and has told businesses that at least a third of their staff must work remotely.

Officials said on Friday that 201 people had died of COVID-19, the respiratory disease caused by the coronavirus, in the last 24 hours, pushing the official death toll to 22,257.

FINAL TRIAL RESULTS SHOW REMDESIVIR SHAVED 5 DAYS OFF COVID-19 RECOVERY TIME, REDUCED RISK OF DEATH IN SOME: GILEAD

CHICAGO: Final data from Gilead Sciences' antiviral drug remdesivir showed the treatment cut COVID-19 recovery time by five days compared with patients who got a placebo, one day faster than indicated in preliminary data, the company said in a press release on Thursday (Oct 8).

The final study looked at data at 29 days of treatment, versus a preliminary study released in May that reported results after 15 days. The results showed that patients receiving remdesivir - sold under the brand Veklury - achieved clinical recovery five days faster than those who received a placebo, Gilead said, citing the final results from the National Institute of Allergy and Infectious Diseases' Phase 3 ACTT-1 trial of its drug.

Those on Veklury had a median recovery time of 10 days, compared with 15 days for those on a placebo.

The result was most pronounced in patients who were on oxygen when they first got the drug. Remdesivir reduced recovery time for such patients by seven days compared with a placebo after 29 days.

The results of the trial, which involved 1,062 patients, were published in the New England Journal of Medicine.

Gilead's drug was among the first to be used as a treatment for the novel coronavirus, and was one of the drugs recently used to treat US President Donald Trump.

Remdesivir received emergency use authorisation from the US Food and Drug Administration on May 1, and has since been authorised for use in several other countries.

Results of the overall study suggested the drug may reduce mortality, but the benefit was not statistically significant. In a separate analysis looking just at patients who received oxygen, however, the drug appeared to reduce the risk of death by 72 per cent at day 15, and 70 per cent by day 29.

With this analysis, "We now have data suggesting that giving remdesivir to patients on oxygen may significantly reduce their chances of death compared to other subgroups," Dr Andre Kalil, an infectious disease expert at the University of Nebraska Medical Center and the study's principal investigator, said in the press release.

CHINA TO PURCHASE COVAX VACCINES FOR 1% OF POPULATION, SAYS FOREIGN MINISTRY

BEIJING: China will purchase COVID-19 vaccines for 1 per cent of its population, or 15 million people, via a global scheme backed by the World Health Organization, the Foreign Ministry said on Friday (Oct 9).

Beijing's move to join the COVAX programme means China "will be



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procuring vaccines through the facility for a proportion of their own population, just as with other countries", a spokesman for GAVI, which co-leads the scheme, said earlier.

The first batch of vaccine available under the plan will be in short supply, so there would be less for other countries if China had secured doses for a large number of its 1.4 billion people, ministry spokeswoman Hua Chunying told a news briefing.

China has at least four experimental vaccines in final stages of clinical trials, and is also in talks with the WHO to have its domestically made vaccines assessed for international use.

Self-financing countries in COVAX scheme can request vaccine doses sufficient for 10-50per cent of their populations, GAVI said on its website.

Funded countries will receive enough doses to vaccinate up to 20 per cent of their population in the longer term, GAVI said.

JAPAN TO REMOVE TRAVEL BAN FOR 12 REGIONS, INCLUDING CHINA AND SINGAPORE: REPORT

TOKYO: Japan plans to remove a ban on overseas travel next month to 12 countries and regions, including China and Singapore, the Yomiuri newspaper reported on Thursday (Oct 8).

The others include Taiwan, Australia, New Zealand, South Korea, Vietnam and Malaysia, the Yomiuri said.

The Japanese government, which currently bans travel to 159 countries and regions, will recommend that travellers continue to refrain from unnecessary and non-urgent visits, the newspaper said. Japan is on track to have 521 million doses of five different COVID-19 vaccines in 2021, compared with a population of 126 million.

The country will scale back a requirement of two weeks of self-quarantine for some business travellers, the Nikkei reported on Wednesday.

The new rules apply to returning Japanese and holders of long-term visas, some of whom will be exempted from quarantine requirements, depending on airport testing capacity, it added.

There will be a cap on the number of such exemptions, but no figure has been specified. Such arrivals must submit an itinerary and a negative PCR test result on arrival, and will not be allowed to use public transport upon their return, the media outlet reported.

Japan has already eased two-way travel curbs with nations such as South Korea and Vietnam, while allowing entry from October for long-term residents from any country.

SINGAPORE TO SET UP MORE COVID-19 REGIONAL SCREENING CENTRES AND TESTING FACILITIES IN DORMITORIES

Singapore will set up more COVID-19 regional screening centres and testing facilities in dormitories, as well as offer night swabs for workers to "accommodate their work cycles", the Ministry of Manpower (MOM) and Health Promotion Board (HPB) said on Thursday (Oct 8).

There are currently 20 regional screening centres across Singapore, with 14 centres facilitating the rostered routine testing of migrant workers living in dormitories, as well as workers from the construction, marine and process sectors.

"More regional screening centres are in the pipeline to ensure that swab testing needs continue to be met," said MOM and HPB in their joint press release.

"The plan is to have 25 to 30 regional screening centres progressively in operation by the end of the year and about two-thirds of these sites will be conducting (rostered routine testing)."

Nine more in-dormitory rostered routine testing facilities will be set up by the end of October, in addition to the 24 facilities currently in operation.

Four of these facilities – Acacia Lodge, Cassia @ Penjuru, Central Staff Apartments and Westlite Mandai – will offer night swabs for workers. More than 35,000 migrant workers can benefit from the new initiative, the agencies said.

"Employers whose workers reside in dormitories with (rostered routine testing) facilities can schedule their workers' (rostered routine testing) appointments at their dormitories, or at regional screening centres," MOM and HPB said.

"This adds to the convenience and ease for employers and workers to undergo rostered routine testing."

Using the Swab Registration System, employers can select their preferred swab locations and testing dates for their workers. Once workers attend their first appointment, they will be automatically scheduled by the system for successive routine testing appointments.

Rostered routine testing is a "critical part" of early detection of COVID-19 and to contain its transmission, said MOM and HPB.

"Workers and employers are reminded to ensure that those who are required to undergo (rostered routine testing) continue to do so, in order to safeguard their health and that of the wider community," the agencies added.





7 Oct 2020

FURTHER RESUMPTION OF CO-CURRICULAR ACTIVITIES AND SCHOOL ACTIVITIES

- Since 27 July 2020, secondary schools, Junior Colleges and Millennia Institute have gradually resumed selected Co-Curricular Activities (CCAs) and other school activities, while primary schools have been given the option to bring back such activities since 14 September.
- MOE will be carefully resuming more programmes across the different levels in our schools, with appropriate SMMs in place. These include:

From Mid-October 2020 [after year-end examinations]

- Activities / programmes conducted at external venues such as Learning Journeys, SwimSafer 2.0¹ and MOE-run non-residential activities at MOE Outdoor Adventure Learning Centres (OALCs).
- Activities involving different schools such as Strategic-Partnership CCA (SP-CCA)² and Local Olympiads.
- 3. Activities involving wind instruments and Speech and Drama programmes.

From 2021

- 1. The National School Games* and Singapore Youth Festival Arts Presentation*.
- Non-residential outdoor adventure learning activities* conducted by Outward Bound Singapore (OBS) or external vendors at MOE OALCs and external sites.
 - *Further details on these activities will be available at a later stage.
- Most CCAs and school activities will resume with the following SMMs in place:
- In alignment with the national guidelines, we will increase the
 overall group cap for CCAs and school activities from 20 to 50
 persons, except for higher-risk activities which remain suspended
 or limited to a smaller group cap. This 50-person limit is inclusive
 of students and adults supporting them in their learning;
- There should be a safe distance of at least one metre between students. For activities like sports that involve more physical exertion where the students are unmasked, there should be a safe distance of at least two metres between students;
- For activities where one-metre safe distancing cannot be observed, students should be organised into groups of five with one metre between groups. For more physically-demanding activities where the students are unmasked, there should be a minimum of three metres between groups. There should also be minimal inter-mingling between students and members of the public when taking part in activities or programmes at external yenues:
- Students should remain within their fixed groupings when taking part in activities which involve inter-mingling among different schools;
- High-touch points and common facilities will be wiped down at the end of each activity or change in groups; and
- Schools will continue to screen all visitors, including coaches and instructors, for flu-like symptoms such as fever and cough, and ensure that they comply with all SMMs.

4. CCA experiences and school activities are important elements of our students' socio-emotional well-being and holistic development. They provide opportunities and platforms for students to explore their passion, build camaraderie, develop character and resilience, and strengthen mental well-being, which are important especially during these difficult times. MOE will continue to monitor the situation closely as we resume further aspects of school life. We urge all students and staff to continue practising good personal hygiene, exercise social responsibility and abide by SMMs, whether in or outside school.

CCAs and Activities that Remain Suspended:

- Singing
- Activities with high level of body contact such as Taekwondo sparring, Rugby scrum and tackle
- Overnight camps

Footnotes

- SwimSafer is a national water safety programme aimed at raising the swimming proficiency of children below 16 years old.
- SP-CCA is a centralised, non-school-based CCA offered in partnership with SportSG and National Arts Council, to provide secondary school students the opportunity to pursue a CCA that their schools do not offer.

6 Oct 2020

SOME NSMEN TO BE SWABBED FOR COVID-19 FROM OCTOBER, NEW METHODS FOR MASS TESTING MAY BE USED

SINGAPORE: Some operationally ready national servicemen (NSmen) will have to undergo COVID-19 tests from October, if proximity to other individuals cannot be avoided during in-camp training.

This is an added measure to enhance the detection of COVID-19 infections, given that more training activities have resumed, said Minister for Defence Ng Eng Hen in Parliament on Tuesday (Oct 6).

"DSO (National Laboratories) is assisting the SAF (Singapore Armed Forces) to use other methods which are more suited for mass testing. For example, oropharyngeal mid-turbinate swabs (OP-MT) or saliva testing," said Dr Ng.

"Initial results of our trials on both these different applications have been promising with regard to the acceptability and accuracy of these newer methods."

COVID-19 VACCINE MAY BE READY BY YEAR-END: WHO'S TEDROS

GENEVA: A vaccine against COVID-19 may be ready by year-end, the head of the World Health Organization said on Tuesday (Oct 6).

WHO Director-General Tedros Adhanom Ghebreyesus called for solidarity and political commitment by all leaders to ensure equal distribution of vaccines when they become available.

"We will need vaccines and there is hope that by the end of this year we may have a vaccine. There is hope," Tedros said in final remarks to the WHO's Executive Board, without elaborating.

Nine experimental vaccines are in the pipeline of the WHO's COVAX global vaccine facility that aims to distribute 2 billion doses by the end of 2021.





The two-day board meeting, which examined the global response to the pandemic, heard calls from countries including Germany, Britain and Australia for reforms to strengthen the UN agency.

US President Donald Trump's administration has strongly criticised the WHO's role in the crisis, accusing it of being too close to China and not doing enough to question Beijing's actions late last year when the virus first emerged in Wuhan.

Tedros has dismissed the suggestions and said his agency has kept the world informed.

Three independent panels reviewing WHO performance including its 2005 International Health Regulations - which set guidelines on trade and travel restrictions imposed during health emergencies - gave updates on their work.

The Independent Panel for Pandemic Preparedness and Response, led by former New Zealand Prime Minister Helen Clark and former Liberian President Ellen Johnson Sirleaf, met for the first time last month.

"We hope to get the real lessons that we can implement and prevent the same thing from happening," Tedros said. "But I would like to assure you that WHO is ready to learn from this and change this organisation.

"During our transformation we promised this, we promised to keep change as a constant," he said, referring to his programme since taking the helm in 2017.

5 Oct 2020

GOVERNMENT WORKING TOWARDS PHASE 3, BUT SINGAPORE WILL REMAIN IN DORSCON ORANGE FOR THE TIME BEING

Singapore raised its DORSCON level from Yellow to Orange in early February, as several unlinked cases without travel history to mainland China emerged. DORSCON Orange means that the disease is deemed severe and spreads easily from person to person, but has not spread widely and is being contained.

"CAREFULLY CALIBRATED APPROACH IN OPENING UP"

Mr Gan said Singapore has learnt "very important lessons" from other countries in easing COVID-19 precautionary measures and that doing so "prematurely, or too hastily" could cause cases to rise again, resulting in partial re-imposition of restrictions.

But it is also "not sustainable" to maintain tight restrictions for a "prolonged period of time", as it would "severely impact" the economy and lives, he said.

As such, the Government has taken a "carefully calibrated approach in opening up our society and economy", even as it works towards Phase 3, said the minister.

"This is complemented by close monitoring, extensive testing and comprehensive contact tracing to keep the situation under control, as we balance the protection of lives and livelihoods."

He added that the Government has made "significant moves" towards restoring economic and social activities, such as allowing more employees to return to their workplaces.

But to keep workplaces "safe" and "minimise crowding", employees should continue to work from home for at least half their working time, and there should be no more than 50 per cent of such employees at the workplace at any one time, he said.

Work-related events, including conferences, seminars and meetings, are also allowed to resume, Mr Gan added, but with a 50-person cap. In addition, the Government has now allowed up to 100 persons to attend key life events, such as weddings and religious activities. However, they must be in multiple zones or time slots of at most 50 persons each.

Physical exercises classes have resumed, while cinemas and leisure attractions may now admit more people at any one time. Museums and libraries have also re-opened, and the Government is piloting small-scale live performances as trials towards progressive resumption on a bigger scale.

LARGER GROUP SIZES CONSIDERED

While the Government is "particularly concerned" about dining, as people remove their masks to eat but also talk at the same time, it could consider allowing general group sizes larger than five, said Mr Gan.

"If all of us continue to work together and keep our guard up even as more activities resume, we will be able to keep the pandemic under control, and progress towards further opening up our economy and society steadily," he said.

He added that the Government had started pilots of events and activities with a larger number of attendees, like trade exhibitions, conferences and religious worship. If the pilots show that they can "maintain effective precautions and safe distancing measures", the Government could allow more large-scale events to proceed, he said.

Overseas travel will further open up as well, in a "safe and calibrated manner".

"As overseas travel restrictions are progressively eased and more activities resume, it has become even more critical that each of us play our part to exercise social responsibility and adhere to the safe management measures, in order to keep our family and friends safe as we progress towards Phase 3," said Mr Gan.

NCID GUIDELINES RECOMMEND USE OF DEXAMETHASONE FOR PATIENTS WITH 'SEVERE' COVID-19



SINGAPORE: The steroid known as dexamethasone is recommended for patients with "severe" COVID-19 infection requiring supplemental oxygen or mechanical ventilation, according to interim treatment guidelines updated by the National Centre for Infectious Diseases (NCID) in August.

The guidelines provide updated evidence-based recommendations on the management of patients with COVID-19 in Singapore.

NCID's clinical director had said in response to queries from CNA in June that steroids were not routinely recommended for COVID-19 patients in Singapore at the time because of potential harmful effects.





NCID INTERIM TREATMENT GUIDELINES

Dexamethasone is a generic steroid widely used in other diseases to reduce inflammation. Some studies have shown that it can be beneficial in people with severe COVID-19, but may be ineffective in people with a milder case of the illness.

In its updated guidelines on Aug 31, NCID said that based on latest data, dexamethasone should be considered for patients with more severe COVID-19.

SOME RAPID COVID-19 TEST KITS SHOW 'PROMISING' RESULTS: GAN KIM YONG

SINGAPORE: Some of the rapid COVID-19 test kits under evaluation are showing "promising" results, said Health Minister Gan Kim Yong on Monday (Oct 5), adding that Singapore hopes to deploy alternative testing methods in the months ahead.

Implementing rapid testing is one of the ways Singapore can resume more activities, he noted. "Increased testing facilitated by such rapid test kits, coupled with strengthened containment efforts including contact tracing, and adherence to appropriate safe management measures, have potential to allow us to resume more activities, including travel-related industries and larger-scale events," said Mr Gan in a written parliamentary reply.

"We hope to be able to deploy some of these alternative tests in the months ahead, as we work out practical ways to incorporate such rapid testing into our national COVID-19 response." Mr Gan was responding to a question from Member of Parliament Sitoh Yih Pin, who asked for an estimated timeline as to when a "viable" rapid COVID-19 test kit will become available, and whether it will allow more activities to resume.

Currently, the main mode of COVID-19 testing and sampling in Singapore is known as the Polymerase Chain Reaction (PCR) test.

Mr Gan said that as new testing technologies become available, the Ministry of Health (MOH) "actively evaluates" these alternative tests to ensure they can be deployed in a safe and effective manner. "The key evaluation considerations include - the combined clinical performance of the test and sampling method, ease of administration, throughput, total turnaround time when using the test, and cost," he added.

Mr Gan cautioned that while any testing can help to reduce transmission risks, it is not foolproof, as a negative test does not mean that a person is free from COVID-19.

"For example, an individual who may be incubating the virus might not be picked up at the point of test," he said. "We therefore need to combine testing with contact tracing and other public health measures."





SUMMARY OF CURRENT CASES IN SG

As of 11 October 2020, 12pm, the Ministry of Health (MOH) has confirmed and verified three new cases of locally transmitted COVID-19 infection. All 3 reside in dormitories and there is none in the community. In addition, there are seven imported cases, who had all been placed on Stay-Home Notice (SHN) upon arrival. All new cases today are asymptomatic, and were detected from our proactive screening and surveillance.

SUMMARY OF NEW CASES

All new cases today are asymptomatic, and were detected from our proactive screening and surveillance.

		Breakdown by		Breakdown by	
	Number of cases	Already in quarantine/ isolation before detection	Detected from surveillance	Symptomatic	Asymptomatic
Cases in the community	0	0	0	0	0
Cases residing in dormitories	3	2	1	0	3
Imported cases	7	7	0	0	7
Total	10				

Overall, the number of new cases in the community has decreased from an average of two cases per day in the week before, to an average of one per day in the past week. The number of unlinked cases in the community has also decreased from an average of one case per day in the week before, to none in the past week.

All the new cases today are imported or linked to known cases / clusters.

Case Details

a) Cases in the community: 0

There are no cases in the community today.

b) Cases residing in dormitories: 3

Among the three cases residing in dormitories, two had been identified earlier as contacts of previous cases, and had already been quarantined to prevent further transmission. They were tested during quarantine to determine their status, even though they are asymptomatic. The remaining case was detected through our bi-weekly Rostered Routine Testing of workers living in dormitories.

c) Imported cases: 7

Among the seven imported cases, two (Cases 58028 and 58029) are Singapore Permanent Residents who returned from Indonesia. Another three cases (Cases 58022, 58024 and 58025) are Work Permit holders currently employed in Singapore who arrived from Malaysia and the Philippines. The remaining two cases (Cases 58023 and 58030) are Dependant's Pass holders who arrived from the Philippines and Saudi Arabia.

They had all been placed on 14-day SHN upon arrival in Singapore, and were tested while serving SHN even though all of them are asymptomatic.

Epidemiological investigations are in progress. In the meantime, all the identified close contacts of the cases have been isolated and placed on quarantine, and will be tested at the start and end of their quarantine period so that we can detect asymptomatic cases. We will also conduct serological tests for

the close contacts to determine if the cases could have been infected by them.

MOH has been monitoring existing clusters for any further transmission. As there have been no more cases linked to the clusters at Kranji Lodge I (12 Kranji Road) and Westlite Woodlands dormitory (2 Woodlands Sector 2) for the past two incubation periods (i.e. 28 days), the clusters have now been closed.

Update on Condition of Confirmed Cases

Seven more cases of COVID-19 infection have been discharged from hospitals or community isolation facilities. In all, 57,705 have fully recovered from the infection and have been discharged from hospitals or community care facilities.

There are currently 44 confirmed cases who are still in hospital. Of these, most are stable or improving, and one is in critical condition in the intensive care unit. 100 are isolated and cared for at community facilities. These are those who have mild symptoms, or are clinically well but still test positive for COVID-19. 27 have passed away from complications due to COVID-19 infection.

SUMMARY OF CURRENT CASES IN SG

CONFIRMED CASES IN SINGAPORE (as of 11 Oct)	57,812	
HOSPITALISED	44	
RECOVERING IN COMMUNITY FACILITIES	100	
CASES IN CRITICAL CONDITION	1	
DISCHARGED	57,705	
DEATH	27	





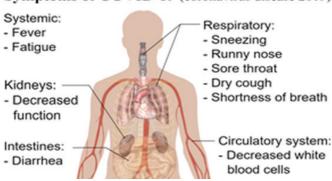
Symptoms

It is not possible to distinguish clearly between symptoms of the common cold, influenza and the COVID-19. In an article in the Lancet, it was reported that there were three major patterns of the clinical course of infection:

- Mild gradual illness with upper respiratory tract presenting symptoms;
- Non-life-threatening pneumonia;
- Severe pneumonia with acute respiratory distress syndrome (ARDS) that begins with mild symptoms for 7–8 days and then progresses to rapid deterioration and ARDS requiring advanced life support.

It has been shown that children are less likely to contract the infection with more research needed to understand why. On the other hand, severe disease and fatalities are more likely in elderly or those with coexisting diseases, such as diabetes, pulmonary disease, and other chronic conditions.

Symptoms of COVID-19 (coronavirus disease 2019)



Mode of Transmission and Infectiousness

Like other human coronaviruses, transmission of the COVID-19 occurs through droplets and can happen through:

- i. Coughing and sneezing
- ii. Close personal contact, such as touching or shaking hands
- iii. Touching an object or surface with the virus on it, then touching your mouth, nose, or eyes before washing your hands

The role of faecal—oral transmission is yet to be determined in COVID-19. Preliminary studies suggest that incubation period for the COVID-19 can range from two to 14 days. Mean incubation period observed in a study: **5.2 days.**

Incubation period



• There are reports of asymptomatic infections (detection of virus with no development of symptoms) and pre-symptomatic infections (detection of virus prior to development of symptoms) with SARS-CoV-2. In a local study, an analysis of exposure and symptom onset dates of 157 locally acquired cases suggests that presymptomatic transmission of COVID-19 occurred in 10 (6.4 per cent) of such cases. The data also suggests that transmission likely occurs one to three days before symptom onset in a presymptomatic source patient. These findings are also consistent with studies in Chinese patients outside of Hubei province, China,

- which found that 12.6 per cent of transmissions could have occurred before symptom onset in the source patient.
- Scientists have estimated that each infected person can spread it to somewhere between 1.5 and 3.5 people without effective containment measures.
- Infected persons have been found to be most infectious in the first week of developing symptoms as viral levels in respiratory secretions are at their highest.
- In terms of viral viability, COVID-19 was more stable on plastic and stainless steel than on copper and cardboard, and viable virus was detected up to 72 hours after application to these surfaces.
 On copper, no viable COVID-19 was measured after four hours. On cardboard, no viable SARS-CoV-2 was measured after 24 hours.

Diagnosis



Diagnostic testing for COVID-19 involves testing for the presence of the virus in specimens ("swabs") obtained from patients. Almost all diagnostic testing for COVID-19 is done using PCR-based methods, which look for the genetic material (RNA) of the SARS-CoV-2 virus, which causes COVID-19. These methods can only diagnose someone with COVID-19 if they are actively infected. Currently, these diagnostic tests for COVID-19 require nasopharyngeal or oropharyngeal specimens (nose or throat swabs). Currently, PCR testing for COVID-19 has been used for three key purposes – one, to diagnose suspect cases to provide early treatment and isolate close contacts; two, to do screening and active case finding of individuals at risk, such as migrant workers decanted from their dormitories before they return to work; and three, to do surveillance to monitor undetected cases in the community.

The terms "serological" or "antibody" tests are generally used to refer to blood tests that detect antibodies to the SARS-CoV-2 virus that causes COVID-19. Serology tests can be helpful in determining whether someone was infected in the past with the coronavirus,







whether or not they ever developed symptoms of the disease. Preliminary studies done locally have found that the sensitivity of the test is low in the first 2 weeks of illness. In contrast, the PCR tests currently being used to diagnose active cases of COVID-19 indicate the presence of viral genetic material during the period of active infection and do not indicate if a person was infected and subsequently recovered.

Treatment Updates

Medical care of viral pneumonia is largely supportive using medication and to help relieve symptoms and address severe complications such as bacterial infections. There are no licensed vaccines or coronavirus antivirals. The World Health Organisation (WHO) has begun a large, global trial (SOLIDARITY) on the four most promising therapies identified to date to treat COVID-19, including chloroquine. The primary completion date is March 2021 with findings expected to be reported by December 2021.



Kaletra

Clinical trials have so far found that Kaletra (comprising lopinavir and ritonavir) to be lacking in effectiveness against the infection.

Anti-malarial Drugs-chloroquine and Hydroxychloroquine

There is a lack of high-quality evidence to conclude that chloroquine or hydroxychloroquine is effective and safe for the treatment of COVID-19. Several clinical trials are ongoing and are likely to report results in the months ahead which will determine whether anti-malarials should be more widely used for COVID-19 treatment. The US Food and Drug Administration on Monday (Jun 15) revoked its emergency use authorisation for hydroxychloroquine to treat COVID-19. The move comes after several studies suggested it was not effective, including a widely anticipated trial earlier this month that showed it failed to prevent infection in people who had been exposed to the virus.

The World Health Organization (WHO) announced on Saturday (Jul 4) that it was discontinuing its trials of hydroxychloroquine and combination HIV drug lopinavir / ritonavir in hospitalised patients with COVID-19 after they failed to reduce mortality.

Convalescent Plasma

This is blood plasma from a person who has recovered from an infection. Antibody-containing plasma from a recovered patient is given by transfusion to a patient who is suffering from COVID-19. The donor antibodies help the patient fight the illness, possibly shortening the length or reducing the severity of the disease.

Published articles have suggested convalescent plasma as a potential treatment option for COVID-19 citing its use and perceived efficacy in SARS, Ebola virus, H1N1, and MERS outbreaks and international news coverage has reported that it has been used in China against COVID-19. The Food and Drug Administration (FDA) in the USA has listed COVID-19

convalescent plasma as an emergency Investigational New Drug (eIND) for patients who are critically ill with COVID-19. This allows its use for the treatment of an individual patient upon FDA authorisation. Eligible patients must have confirmed COVID-19 with severe or immediately life-threatening disease and give informed consent.

In Singapore, it was reported on 13 April that more than 100 patients who had recovered from COVID-19 have been screened and 11 of them were recruited and assessed for suitability to assist in the treatment.

Remdesivir

One drug that has received a lot of attention is the antiviral drug remdesivir. The coronavirus that causes COVID-19 is similar to the coronaviruses that caused the diseases SARS and MERS. Evidence from laboratory and animal studies suggests that remdesivir may help limit the reproduction and spread of these viruses. Interest in the drug remdesivir has been so great that the U.S. National Institutes of Health is boosting the size of its study.

Singapore is also taking part in the global Phase III trials and the participants include the NCID, NUH, SGH. Recruitment of patients for the trial had started in mid February. Japan's National Center for Global Health and Medicine and US National Institute of Heath are partners in this trial. On 10 June, it was announced that the Health Sciences Authority (HSA) has granted conditional approval for the drug to be administered to some patients — particularly to treat seriously ill COVID-19 patients in Singapore, making the country one of the first to get the nod for using the drug to treat the virus.



Vials of remdesivir are capped at a Gilead Sciences facility in La Verne, California, US on Mar 18, 2020. (Photo: Gilead Sciences via Reuters)





Updates on Definition of Suspected Case of 2019-nCoV

- A person with clinical signs and symptoms suggestive of Community-Acquired Pneumonia
- b) A person with an acute respiratory illness of any degree of severity (e.g. symptoms of cough, sore throat, runny nose, loss of smell), with or without fever, who, within 14 days before onset of illness had:
 - i. Travelled abroad (outside Singapore); OR
 - ii. ¹Close contact with a case of COVID-19 infection; OR
 - iii. Stayed in a foreign worker dormitory; OR
 - iv. Worked in occupations/environments with higher risk of exposure to COVID-19, these include but are not limited to any staff (healthcare worker and non-healthcare worker) working in:
 - Public and private healthcare settings, spanning acute care, primary care, intermediate and long-term care and community care settings
 - Dormitories or involved in dormitory outbreak control operations
 - Isolation / quarantine facilities
 - Community care facilities (CCFs) / community recovery facilities (CRFs)
 - Ambulance and dedicated patient transport (including private hire vehicles).

¹Close contact is defined as:

- Anyone who provided care for the patient, including a health care worker or family member, or who had other similarly close physical contact;
- Anyone who stayed (e.g. household members) at the same place as a case; or
- Anyone who had close (i.e. less than 2m) and prolonged contact (30 min or more) with a case (e.g. shared a meal).

MOH ENHANCED SWAB-AND-SEND-HOME (SASH) CRITERIA (as of 25 June)

As part of active case finding, the following groups of persons presenting with acute respiratory symptoms of any duration , with or without fever will be swabbed by primary care clinics on-site or referred to a facility that can do so:

- a) Persons working and/or living in communal settings (e.g. residential, custodial or special care facilities, students and education staff)
- b) Immunosuppressed patients such as those with
 - i. End Stage Renal Disease (ESRD) patients undergoing haemodialysis
 - ii. Cancer patients undergoing chemotherapy.
- c) All other persons aged 13 years old and above
- d) Persons with undifferentiated fever

FACILITIES THAT CURRENTLY OFFER SWAB TESTS FOR COVID-19?

- Selected Public Health Preparedness Clinics (PHPCs) performing SASH (https://www.flugowhere.gov.sg)
- 2. Selected Polyclinics
- 3. Fever screening area at SGH, (9am to 5pm)
- 4. Regional screening centres
- Screening centre at NCID

However, do note that the attending doctor will need to assess your condition to decide on necessity to conduct a swab test.

Personal Preventive Measures and Travel Advice

- MOH advises Singaporeans to defer all overseas travel.
- Be socially responsible. See a doctor and stay at home if you are not feeling well.
- Wash your hands regularly with soap and water for 30 seconds or use an alcohol based hand sanitiser.
- Wear a mask if you leave your home and at home as well should you have fever or respiratory symptoms.
- In case of symptoms suggestive of respiratory illness, either during or after travel, wear a surgical mask, seek medical attention, and share your travel history with your health care provider.
- Cover your mouth with a tissue paper when coughing or sneezing, and dispose the soiled tissue paper in the rubbish bin immediately.
- When issued a medical leave by your GP for respiratory symptoms, be sure to stay home. Mixing in large crowds, or continuing to go to work or school when ill, even with mild symptoms, will allow potential community transmission of viral infections to take place.
- Persons on Leave of Absence (LOA) should be socially responsible
 and comply with the LOA. They should remain in their residences
 as much as possible, minimise having visitors and maintain good
 records of persons with whom they come into close contact.
 Persons on LOA may leave their residences for daily necessities or
 to attend important matters, but they must minimise time spent in
 public spaces and contact with others.
- Persons on Stay-home-notice (SHN) MUST remain in their place of residence at all times during the 14-day period, even if it is to purchase food and essentials. If necessary, they may opt for home delivery services or enlist the assistance of others for their daily necessities. They should minimise contact with others, and avoid having visitors to their residence. They should maintain a record of persons they come into close contact with during this period. At all times, they should monitor their health closely, ie. twice daily for fever (ie. ≥ 38°C) and respiratory symptoms such as cough and breathlessness.
- <u>Consider getting the Influenza Vaccination:</u> Although it does NOT confer protection against COVID-19, it would minimise chance of you contracting influenza symptoms that would result in unnecessary anxiety.
- Use SafeEntry to check in and out when required, download and install the TraceTogether app

Commencement of Phase 2 of Circuit Breaker Easing Measures



The multi-ministry task force announced that Singapore would reopen in, 3 phases – termed SAFE REOPENING, SAFE TRANSITION and SAFE NATION. Singapore exited a two-month-long "circuit breaker" designed to limit the spread of COVID-19 on Jun 1. Phase 2 of the country's reopening started on Jun 19.





What Has Resumed in Phase 2?

- Small-group social gatherings of up to any five people can resume. Within the home, households may receive up to five visitors at any one time.
- · Retail businesses may reopen their physical outlets.
- Food and beverage dine-in will be allowed, with up to five people allowed to sit together. Tables must be spaced one metre apart.
 Outlets will have to cease liquor sales and consumption at 10.30pm.
 Live music, as well as television and video screenings will not be allowed in all F&B outlets at this stage.
- Tuition and other private enrichment classes can resume, with the exception of singing or voice training classes.
- Personal health and wellness, and home-based services will be allowed to resume.
- Registered clubs and societies will be allowed to operate at their registered premises.
- All other healthcare services, including eldercare services in the community, individual health screenings will resume.
- · Aesthetic services will resume.
- Face-to-face visitations at residential facilities for the elderly, including nursing homes, welfare homes, sheltered homes and adult disability homes, will resume.
- Playgrounds, beaches, lawns and fields, stadia, swimming complexes, sports halls, hard courts, gyms, fitness studios, bowling centres and function rooms will open. This also applies to similar facilities in private settings such as condominiums and clubs.
- Larger public venues with high human traffic such as malls and large standalone retail outlets will be subject to capacity limits, and operators will be required to prevent crowds or long queues from building up within and in the immediate vicinity of their premises.
- From the week of 27 July 2020, secondary schools, Junior Colleges and Millennia Institute will have the option to resume lower-risk Co-Curricular Activities (CCAs) and other school activities, with appropriate SMMs in place. For primary schools, such activities will resume only at a later date, once we are able to assess the progress for the older students. CCAs and school activities will take place with the following SMMs in place, which may require adjustments to game formats and rules. Maximum of 20 students per activity and where possible, the composition of participants should be fixed to minimise inter-mingling. For example, badminton CCAs may resume, with a maximum of 20 participants per venue; within the activity, groups of five or fewer students can interact more closely.
- Up to 100 people, including the wedding couple, are allowed at wedding receptions from 3 October, double the current number. Participants must be split into zones of up to 50 people each, or attend at staggered timings, with up to 50 people in each slot. There should be at least 30 minutes between slots for cleaning and disinfection. The cap for solemnisations will also be increased to 100 people, split across zones of up to 50 people each. Weddings at void decks and multi-purpose halls can resume in November, under a pilot which allows receptions organised by registered wedding organisers to take place at HDB common areas.
- All religious organisations can conduct services for up to 100 people from 3 October, with safe distancing and safe management measures in place.
- Columbaria in places of worship may re-open to visitors from 4August.
 Families who visit in groups are limited to no more than 5 persons in a group, with safe distancing of at least 1 metre between groups

- Large cinema halls with more than 300 seats can seat up to half this number, with up to three zones of 50 people each from 1 October.
- Smaller cinema halls can increase their capacity to 50% of the original figure, or maintain the current limit of up to 50 people per hall.

Working from home remains the default, but from 28 Sept, more employees who can work from home can opt to return, provided:

- They continue to work from home for at least half their working time.
- Fewer than half of a firm's employees who are able to work from home are at the workplace at any point.
- Workers have flexible working hours to minimise crowding.
- Reporting times are staggered, with half of all employees starting work at 10am or later.
- Split team or shift arrangements continue.
- Work-related events of up to 50 people, depending on venue capacity, are allowed.
- Larger-scale social gatherings within or outside the workplace remain off the table.

Activities That Still Cannot Resume For Now

- Some activities, where many people come into close contact for long periods of time, will take more time to resume. This is to ensure large clusters do not form. These include:
- Large-scale events and venues, such as conferences, exhibitions, concerts and trade fairs
- Entertainment venues such as bars, nightclubs, karaoke outlets, theatres, as well as indoor and outdoor attractions







Measures for Inbound Travellers (CAA 13 September 2020)

	Singapore Citizen, Permanent Residents	Long Term Pass Holders ¹	Short Term Visitors ²
Travellers who have spent the last 14 consecutive days in these countries / regions: Brunei Darussalam New Zealand Travellers who have spent the last 14 consecutive days in these countries / regions: Australia (including Victoria State) Macao Mainland China Malaysia Taiwan	7-day SHN Test before end of SHN (chargeable)	 7-day SHN Test before end of SHN (chargeable) 	Not allowed entry (Except under established Green Lane / Fast Lane arrangement ³ or with special prior approval4)
Vietnam All other travellers	 14-day SHN at dedicated SHN facility (chargeable)⁵ Test before end of SHN (chargeable) 	Negative pre-departure test result memo ⁶ 14-day SHN at dedicated SHN facility (chargeable) Test before end of SHN (chargeable)	

- 1 Long Term Pass holders will require a valid approval letter for entry.
- 2 Visitors from Brunei Darussalam and New Zealand will need to apply for an Air Travel Pass (ATP)
- 3 As of 1 September 2020, this includes Singapore-China Fast Lane, Singapore-Malaysia Reciprocal Green Lane and Periodic Commuting Arrangement with Malaysia.
- 4 Short-term visitors granted special prior approval to enter Singapore (except under established Green / Fast Lane arrangements) are subject to the same treatment with regard to SHN and test requirements, and charges, as Long Term Pass holders.
- 5 Cost of stay at dedicated SHN facility will be waived for Singapore Citizens and Permanent Residents who last left Singapore before 27 March 2020.
- 6 Travellers from India who are not SC/PR will need to present a valid negative COVID-19 PCR test result as a condition of approval to enter Singapore from 17 September 2020, 0000 hours.





MEDICAL SERVICES FOR COVID-19

The outbreak of COVID-19 has caused much disruption in our daily life and business operations. As Singaporeans, we all have a role to play in the fight to prevent spread of COVID-19 and to protect our families, loved ones and colleagues. To help meet the challenge posed by the current COVID-19 outbreak, Raffles is happy to provide the following services to meet your healthcare needs.



CORPORATE HEALTH CONSULTANCY

Consult our experts on all healthcare related aspects of COVID-19 in your company. Our services range from acquisition of PPE's, temperature screening services, staff education webinars and planning for prevention / mitigation of COVID-19 at the workplace.

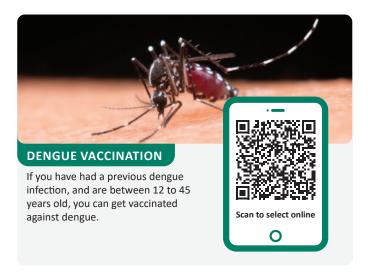
GET IN TOUCH WITH US TODAY

Corporate account holders Tel: 6812 6688

Non-corporate account holders







RAFFLES HOME CARE SERVICES

Raffles Home Care Services offer you the convenience of getting a vaccination, blood test or clinical procedure done at home, skipping the need to travel to a clinic. Call / SMS 8614 8292 to enquire about any of the following home-based services.



Home-Based FDW 6 Monthly Medical Examination (6ME) Your foreign domestic worker is required to screen for pregnancy and infectious diseases every six months. Enjoy the convenience of a mobile screening, where we arrange for our medical personnel to go to your home to conduct the tests required.



Find out more or make an enquiry <u>here</u>



Getting Your Vaccination Done At Home Influenza is a viral infection that causes high fever, muscle aches, runny nose, sore throat and cough. When an infected person coughs or sneezes, anyone who is in close proximity may breathe in the droplets and get infected.

A vaccination to protect you and your family from influenza can be done without going to the clinic. Find out more



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