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/ [Health services and general practice - coronavirus disease \(COVID-19\)](#) /

# Coronavirus COVID-19 daily update


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This Chief Health Officer update is intended to provide clinicians and the Victorian public with information about the number of confirmed cases of COVID-19 in Victoria as well as relevant public health response activities in Victoria. Chief Health Officer Alerts will continue to be issued when there are changes to the public health advice related to COVID-19.

**20/04/2020**

## What's new?

### Developments in the outbreak

- The Victorian Government has released modelling to provide greater understanding of the spread of coronavirus (COVID-19) in Victoria: <https://www.dhhs.vic.gov.au/victorias-coronavirus-covid-19-modelling-confirms-staying-home-saves-lives>.
- The modelling undertaken by Monash University and the Doherty Institute, in collaboration with DHHS, finds that if no physical distancing restrictions were in place, Victoria would have seen up to 58,000 new coronavirus (COVID-19) cases every day at the peak of the pandemic and as many as 36,000 people dying.
- As of 20 April 2020, Victoria has 1329 total confirmed cases, an increase of 1 since yesterday.
- 28 people are in hospital, including 11 people in intensive care. 15 people have died. 136 cases have an unknown source of infection, an increase of 2 since yesterday. 1196 people have recovered. More than 86,000 Victorians have been tested.
- Up-to-date [epidemiological data](#)  is available on our website.

### Current advice to clinicians

- Testing is now based on the clinical symptoms of coronavirus (COVID-19) which are:
  - Fever OR chills in the absence of an alternative diagnosis that explains the clinical presentation  
OR
  - Acute respiratory infection that is characterised by cough, sore throat or shortness of breath.
  - Note: In addition, testing is recommended for people with new onset of other clinical symptoms consistent with COVID-19\* AND who are close contacts of a confirmed case of COVID-19 or who have returned from overseas in the past 14 days.  
\*headache, myalgia, runny or stuffy nose, anosmia, nausea, vomiting, diarrhoea
  
- At this stage, Victoria advises against use of rapid, serological-based point of care lateral flow tests outside of a research framework. This is consistent with statements by the Australian Health Protection Principal Committee (AHPPC) and the Australian Public Health Laboratory Network (PHLN) on rapid, serology-based point of care lateral flow devices. See [Communique: Point of Care Testing for COVID-19 \(Word\)](#).
  
- Health services and hospitals are reminded of the clearance criteria for patients and health care workers confirmed with COVID-19.
  - The department will determine when a confirmed case no longer requires to be isolated in their own home or hospital. Release from isolation will be actively considered for all cases.
  - Health care workers and workers in aged care facilities who are confirmed cases are required to undergo further testing before they can return to work in a healthcare setting or aged care facility. This includes two consecutive negative respiratory specimens collected 24 hours apart after the acute illness has resolved.
  - Testing for return-to-work clearance can commence once the acute illness has resolved, provided this is at least 7 days after the onset of illness. Testing should be arranged by the healthcare worker's employer, the healthcare or aged care worker's treating doctor, or at a coronavirus assessment centre if testing by the treating doctor is not feasible.
  - Health services, assessment centres or testing centres should not refuse the testing or assessment of health care workers or members of the public.
  - This criteria should be used as a **minimum** standard for clearance in all circumstances for positive cases of COVID-19.
  - For full details on the return-to-work criteria for health care workers and workers in aged care facilities visit the [Health services and general practice page](#).
  - Close contacts of a confirmed COVID-19 case cannot be 'cleared' until they have completed a **full 14 day self-isolation period** from the time of last contact with the confirmed case. This 14 day requirement reflects the incubation period for COVID-19 and remains in place irrespective of whether a negative PCR result has been received within these 14 days.
  
- Doctors requesting COVID-19 testing are asked to ensure that a current contact phone number for the patient is included on all pathology request forms.
  
- Healthcare workers and other frontline employees will be able to have their test results returned faster. Specimens taken from health care workers should be marked:

- URGENT- Health Care Worker
  - In the case of testing for return-to-work criteria for healthcare and aged care workers, mark with 'URGENT: HCW CLEARANCE TESTING, please notify result to DHHS'
  - Results should be copied to the DHHS COVID-19 Response and the HCW's treating physician.
- Encourage patients to continue to proactively manage chronic illnesses, take routine tests and attend health services.
  - Remind patients in at-risk groups of the importance of being tested if they have symptoms of coronavirus (COVID-19).
  - Advise patients that smoking may increase the severity of symptoms if they contract coronavirus. Offer support and information to quit.
  - Please reinforce the advice to Victorians to stay home and stay safe.
  - Look for signs of mental distress in your patients and encourage them to take a look at our coronavirus mental health webpage: [Mental health resources - coronavirus \(COVID-19\)](#)
  - Be aware of the increased risk for family violence during this difficult time. Familiarise yourself with the services available for your patients: [Family violence crisis response and support during coronavirus](#)
  - Test all Aboriginal and Torres Strait Islander people who develop fever or respiratory symptoms for coronavirus (COVID-19)

## Key messages for the community

- The rules are clear - Stay home. Protect the health system. Save lives.
- There are only four reasons to leave home:
  - shopping for what you need - food and essential supplies
  - medical, care or compassionate needs
  - exercise in compliance with the public gathering requirements
  - work and study if you can't work or learn remotely.

## Current directions arising from the declared state of emergency

The State of Emergency in Victoria has been extended until midnight 11 May 2020.

The current directions remain in place and include: staying at home, restrictions on particular activities, detention, restrictions on airports and cruise ships, aged care, hospitals and isolation for people diagnosed with COVID-19.

More information viewed at the department's [website](#). The site also contains a page of [frequently asked questions](#) providing further guidance on the directions.

## More information

## Clinical information

[Health services and general practice - coronavirus disease \(COVID-19\)](#)

## Consumer information

[About Coronavirus \(COVID-19\) - information for the general public](#)

[World Health Organization - health topic - Coronavirus](#) 

[Smartertraveller website](#) 

## Contacts

Medical practitioners needing clinical information or to notify suspected or confirmed cases can contact the Department of Health and Human Services Communicable Diseases Section on 1300 651 160 (24 hours).

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## Contact

Address: 50 Lonsdale Street  
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3000

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The department acknowledges Aboriginal and Torres Strait Islander people as the Traditional Custodians of the land and acknowledges and pays respect to their Elders, past and present.

The department is committed to safe and inclusive work places, policies and services for people of LGBTIQ communities and their families.

