by Emergency Operations Center, Department of Disease Control

Thailand situation update on 4 July 2021

1. International Situation

	Total Number	Daily Increase	Case Fatality Rate (CFR)
Confirmed cases	184,278,801	380,243	
Deaths	3,988,216		2.16%

2. The Disease Situation in Thailand

Situation	Total Number
Total number of new cases	5,916
Cases found in quarantine facilities/centers (Imported)	6
Cases found in prisons	39
Cases infected in Thailand (Local transmission)	4,071
Cases found from active case finding (Local transmission)	1,800
Total number of confirmed cases	283,067
 Total recovered and discharged from hospitals Newly recovered and discharged from hospitals 	220,903 (78.04%) 3,404
Undergoing treatment	59,938 (21.96%)
 Deaths New deaths 	2,226 (0.79%) 44



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Screening, Testing, and PUI	Total Number
Total number of people screened	
• Ports of entry (Airports, ground ports, and seaports)	8,745,684
 People renewing their passports at the Immigration Bureau, Chaeng Watthana 	608,623
Total number of laboratory tests	2,785,126
People who met the PUI criteria	2,356,317
Returnees in quarantine facilities/centers	83,075
People who did not meet the PUI criteria	345,734
Total number of people who met the criteria of PUI	2,356,317
Detected from ports of entry	6,086
• Sought medical services on their own at hospitals (570,588 cases in private hospitals, and 1,709,296 cases in public hospitals)	2,350,143
Notified by hotel residences, the Erawan Medical Center, local universities, tour groups, and U-Tapao	88

Remark: *PUI (Patients Under Investigation)

Characteristics of Deaths (2,226 deaths)	Wave: 1 Jan - 14 Dec 2020 (60 deaths)	Wave: 15 Dec 2020 - 31 Mar 2021 (34 deaths)	Wave: 1 April 2021 - now (2,132 deaths)			
Case Fatality Rate (CFR) in each age group						
• 15 - 39 years old	0.20%	0.02%	0.11%			
• 40 - 59 years old	2.10%	0.02%	0.89%			
• 60+ years old	6.50%	2.60%	7.37%			
Under 1 year old (2 deaths)						
Percentage of COVID-19 deaths that consist of elderly patients, patients with underlying diseases including obesity, or pregnant patients						
	64%	100%	91%			



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Average number of days between the onset of symptoms and the date of receiving treatment (Minimum-Maximum)				
	3.5 (0 - 19)	1.2 (0 - 8)	3.2 (0 - 19)	

3. Thailand Implementations

- The Centre for COVID-19 Situation Administration (CCSA) revealed the COVID-19 beds and hospitals have been prepared and managed as the overall capacity of the country. At the moment, it had been focused on the surged beds in Bangkok and surrounding provinces that would be about 200 - 300% expansion. Beds, supplies and equipment would be ready but the medical workforce was still inadequate. The CCSA, therefore, had requested urgent workforce support of specialty doctors and ICU nurses from other provinces.
- The Ministry of Public Health (MOPH) revealed that it had increased 1,500 more beds of Bussarakam Hospital to accommodate green level patients (starting to have symptoms) and yellow level patients (having mild symptoms). The total beds, therefore, would be 3,700 beds. The hospital would also receive patients whose symptoms had improved from other hospitals in order to secure more beds for more severe cases. There would be a rotation of medical personnel in every 2 weeks and medical supplies would be prepared for the situation.

4. Risk Assessment of COVID-19 Situation

According to the COVID-19 situation monitoring, as of July 4, 2021, Thailand has had 283,067 accumulated confirmed cases. Today, There are 5,916 new cases and 44 deaths. The trend of new cases has been increasing rapidly and spreading widely, especially in Bangkok and its vicinity which had started to have an exceeding number of patients over the healthcare capacities, especially severe patients requiring tracheal intubation. Therefore, in order to reduce mortality, beside surveillance measures and active case finding to rapidly bring patients into the treatment system, it is very crucial to accelerate the COVID-19 vaccination among the severe illness at-risk populations such as the elderly and those with chronic diseases. In addition, reduction of the disease spreading risk, measures such as time lapse working hours, refraining from group chatting or eating together are encouraged. If it is necessary to be in a close proximity, for example, while working or taking service buses, all must strictly follow the disease spreading preventive measures. All agencies and enterprise offices are required to set a fever and respiratory symptoms of staff screening before entering the workplaces. All employees must comply with the measures such as prompt reporting in case of high-risk exposure to COVID-19 patients and not to wait until the symptoms develop.