

Republic of the Philippines Department of Health OFFICE OF THE SECRETARY

July 23, 2023

DEPARTMENT CIRCULAR No. 2023- 0324

TO:

ALL DEPARTMENT UNDERSECRETARIES AND ASSISTANT SECRETARIES; MINISTER OF BANGSAMORO AUTONOMOUS REGION IN MUSLIM MINDANAO (BARMM); CENTERS FOR HEALTH DEVELOPMENT, BUREAU AND SERVICE DIRECTORS; SPECIAL AND SPECIALTY HOSPITAL DIRECTORS; CHIEFS OF MEDICAL CENTERS, HOSPITALS AND SANITARIA; AND OTHER

SUBJECT:

<u>Updated Health Protocols following Lifting of the COVID-19 Public Health Emergency</u>

On July 21, 2023, the President declared the lifting of the Public Health Emergency throughout the Philippines due to COVID-19 through Proclamation No. 297. In light of this, the Department of Health (DOH) clarifies the following changes in the COVID-19 protocols:

Table 1. Updated protocols on Minimum Public Health Standards

CONCERNED OFFICES

PROTOCOLS	FROM	то
Masking	Required in healthcare facilities, medical transport vehicles, and public transportation	For Health Facilities While no longer mandated, the DOH recommends retention of the mandatory use of masks in health facilities to protect vulnerable patients and reduce nosocomial infection. Infection Prevention and Control Committees (IPCC) of health facilities can choose to retain mandatory masking and issue specific guidelines applicable to their facility. For all other stationary or mobile healthcare providers without IPCC, DOH still recommends masking to be continued.

PROTOCOLS	FROM	то
	Mask wearing recommended for • Elderly; • Individuals with comorbidities; • Immunocompromised individuals; • Pregnant women; • Unvaccinated individuals; and • Symptomatic	For Public Transportation Wearing masks is no longer mandatory but not prohibited, especially for those who wish to protect themselves and others from COVID-19 or other respiratory infections. Mask wearing still recommended especially in crowded or poorly ventilated public spaces for: • Elderly; • Individuals with comorbidities; • Immunocompromised individuals; • Pregnant women; • Unvaccinated individuals; and
Minimum Public Health Standards	individuals Good hygiene, frequent hand washing, observance of physical distancing, and good ventilation	• Symptomatic individuals. Good hygiene, frequent hand washing, and good ventilation; especially in situations where close interaction with vulnerable populations cannot be avoided such as the elderly population, those with comorbidities and immunocompromised individuals.
Vaccination	Recommended	Recommended

As to clinical guidelines, the following are the updated *recommendations* informed by the Philippine COVID-19 Living Recommendations, World Health Organization, U.S. Centers for Disease Control and Prevention (CDC) and recommended by the members of the DOH Scientific Advisory Group of Experts for Emerging and Re-Emerging Infectious Diseases (EREID SAGE). As with all other diseases, patients are advised to consult their health care provider, most especially if presenting with moderate to severe symptoms.

The DOH also reiterates that neither repeat testing (showing a negative COVID-19 test) nor requiring medical certificates are required for resumption of work or entrance to school.

Table 2. Updated masking, quarantine and isolation protocols

	Masking / Quarantine / Isolation Protocols	
Asymptomatic close contact exposed to confirmed COVID-19 positive individual	 No need to quarantine; and Wear a well-fitted face mask for 10 days. 	
Asymptomatic but confirmed COVID-19 positive case	 Home isolation for 5 days <u>OR</u> until afebrile/ fever-free for at least 24 hours without using antipyretics (e.g., Paracetamol) and 	
Confirmed COVID-19 positive case with mild symptoms OR individuals with acute respiratory symptoms	 with improvement of respiratory symptoms, whichever is earlier; and Wear a well-fitted face mask for 10 days. Note: Isolation may be shortened upon the advice of your healthcare provider. 	
Confirmed COVID-19 positive case with moderate to severe symptoms, OR immunocompromised	 Isolation for at least 10 days from onset of signs and symptoms following advice of the attending physician, including whether to be admitted in a health care facility; and Wear a well-fitted face mask for 10 days. Note: For severe disease and immunocompromised, discontinue isolation only upon the advice of your healthcare provider. 	

Whilst the state of public health emergency has already been lifted, the health sector shall continue to remain vigilant to ensure adequate health system capacity in the event that it is required. Continued surveillance is necessary to minimize the risk of outbreaks and/or severe disease in settings with high-risk individuals. Regarding modifications in surveillance, reporting and public risk communication, please refer to the table below:

Table 3. Reporting and Risk Communication

PROTOCOLS	FROM	то
Surveillance	COVID-19 surveillance as a stand-alone surveillance system	COVID-19 surveillance protocols (case definitions, confirmatory testing, whole genome sequencing, case investigation forms, etc.) shall continue to be implemented until its integration into the pilot pan-respiratory surveillance system by Q4 2023.
Disease Reporting Unit reporting to the	Mandatory reporting of all cases and laboratory results	Continue mandatory reporting of cases and laboratory results to

PROTOCOLS	FROM	то
DOH		official information systems.
DOH reporting to the public	Weekly case bulletins are released	Weekly to include other notifiable diseases
	DOH COVID-19 tracker updated daily	Weekly to include other notifiable diseases

Finally, updated guidelines for incoming travelers (e.g. vaccination, testing, and isolation/quarantine requirements), issuance of vaccine certificates, implementation of the eTravel Pass, and the COVID-19 Alert Level System will be issued by the Inter-Agency Task Force for the Management of Emerging Infectious Diseases (IATF-EID) through the concerned agencies.

For dissemination and strict compliance of all concerned.

Secretary of Health