



INTERNAL STAFF'S GUIDE AND PROTOCOLS FOR MCO AND COVID-19



Approved by : Sr. Wong Kok Soo, FRISM, FPEPS, FMIPFM, MMIEA, MMIPEAC
Managing Director.
wongkoksoo@burgessrawson.com.my / +6012 3321 867 / +603 2260 2300

Published Date : 28 March 2020.

Revision No. : 4.

Last Revision Date : 21 April 2020.

All rights reserved. No parts of the content of this guide may be reproduced or distributed in public, without the prior written permission of the publisher. All images are copyright to their respective owners and are protected under Malaysia's copyright laws. Without prior written permission, it is not permitted to copy, download, or reproduce these images in any way whatsoever.

Novel Coronavirus (2019-nCoV)



MINISTRY OF HEALTH MALAYSIA

3 Simple Ways to Prevent Transmitting Virus to Others

1



Cover your mouth and nose using tissue whenever you cough or sneeze. Throw the tissue in the trash after using it. Wash your hands with soap and water or use hand sanitizer regularly.



2

Use face mask whenever being in public or close contact with people.

Always maintain good personal hygiene and cleanliness.

3



myhealthkkm



<u>Contents</u>	<u>Page</u>
List of Abbreviations Used	4
A. Advisories and Guidelines for PMO	5
B. Advisories and Guidelines for Clients (Developer/JMC/MC/SMC)	6
C. Entry Protocol for Residents / Occupiers	7
D. Entry Protocol for Visitors	7
E. Entry Protocol for Delivery Personnel (Food, Essential Items, Postal and Courier Services)	8
F. Entry Protocol for Domestic Helpers, Contractors, Repairmen and Others	8
G. Emergency Protocols for confirmed COVID-19 cases	9
1. COVID-19 positive for PMO Personnel	9
2. COVID-19 positive for Occupiers / Residents	10
3. COVID-19 positive for external Service Providers / Contractors	12
Flowchart – COVID-19 Emergency Protocols	15
H. Protocol for mitigation of clusters after confirmed COVID-19 case	16
Flowchart – Emergency Protocols for mitigation of COVID-19 clusters	19
I. Protocol for Social Distancing	20
J. Protocol for Self-Quarantine and Self-Assessment	22
Appendix “1” – Protocol for Sanitization work performed by Cleaners	25
Appendix “2” – ADVISORY NOTE	27
Appendix “3” – IMPORTANT NOTICE	28
Appendix “3A” – IMPORTANT NOTICE	29
Appendix “4” – IMPORTANT NOTICE	30
Appendix “4A” – IMPORTANT NOTICE	31
Appendix “5” – IMPORTANT NUMBERS AND REFERENCES	32
Appendix “6” – Diagnosis & Screening of Coronavirus	44
Appendix “7” – Frequently Asked Questions on COVID-19 Tests	46
Appendix “8” – Roche statement on SARS-CoV-2 and COVID-19	48
Appendix “9” – Disinfecton Guide for Surau	50
Appendix “10” – LEGAL RAMIFICATIONS	51

[The space below is intentionally left blank]

List of Abbreviations Used.

AGM	-	Annual General Meeting
COB	-	Commissioner of Buildings
CPRC	-	National Crisis Preparedness and Response Centre
EGM	-	Extraordinary General Meeting
EMCO	-	Enhanced Movement Control Order
FAQ	-	Frequently Asked Questions
JMC	-	Joint Management Committee
KPKT	-	Ministry of Housing and Local Government
MC	-	Management Committee
MCO	-	Movement Control Order
MOH	-	Ministry of Health
PMO	-	Property Management Office
PPE	-	Personal Protective Equipment
RAT	-	Rapid Assessment Team
SMC	-	Subsidiary Management Committee
STRA	-	Short-Term Rental Accommodation

[The space below is intentionally left blank]

A. Advisories and Guidelines for PMO.

1. Enforce hand sanitization before entering the PMO.
2. Maintain **GOOD HAND HYGIENE** by frequently washing hands with soap or sanitizing hands with hand sanitizers of 70% alcohol content.

NOTE: Washing hands with soap for at least 20 seconds is the GOLD standard in hand hygiene. In the absence of water and soap, use hand sanitizer of 70% alcohol content and rub your hands thoroughly, especially your fingertips.
3. **NEVER TOUCH YOUR FACE** (nose, eyes and mouth) or adjust the facemask until hands are washed or sanitized.
4. Maintain **SOCIAL DISTANCING** of at least 1 meter apart. No physical contact. No handshake. No sharing of food from the same plate or with shared utensils.
5. **COUGH OR SNEEZE ETIQUETTE:** Always cover your mouth and nose with a tissue paper whenever you cough or sneeze. Immediately dispose the tissue paper into the garbage bag in the dustbin and the garbage bag must be replaced daily. Wash or sanitize your hands immediately.
6. No physical group meetings. Use FREE video conference application like [Team Link](#) (available on [Windows](#), [MAC](#), [iOS](#) and [Android](#)) for group meetings.
7. If you are unwell, seek **MEDICAL ATTENTION** and **STAY AT HOME**. Notify and update your medical condition to your immediate superior until full recovery.
8. All frequently touched surfaces, e.g. door knobs/handles, telephones, workstations, etc. to be cleaned and sanitized regularly with commercial grade disinfectant.
9. Increase natural ventilation whenever possible, e.g. opening of windows.
10. **DAILY TEMPERATURE SCREENING** for all PMO's personnel on duty twice daily: once in the morning and once in the afternoon.

NOTE: In the event the temperature reading exceeds 38 degrees Celsius for three (3) continuous time at 1 minute apart after each reading, the said personnel shall be asked to seek medical attention immediately, go on medical leave (MC) and then update medical report to the immediate superior.

11. Wear a **FACEMASK** when speaking with another person, and when the personnel is out of the management office to use washroom, purchase food, discharging duties, etc.
12. Defer any non-critical maintenance works unless it affects the safety and comfort of the occupiers.
13. The PMO will be closed to public until the MCO is lifted. Inform all parties that all businesses and transactions shall be done online, e.g. online payments, enquiries over the phone, etc.
14. All service providers working during the MCO shall wear adequate protection consisting of facemasks, gloves and/or goggles.
15. The Manager in charge of the PMO shall prepare a **DUTY ROSTER** for the PMO personnel to work, and the said duty roster shall be approved by the Asset Manager before approval is to be obtained from the Client (developer, JMB, MC or SMC).

NOTE: The “work from home” shift is **not an off-day or holiday**. In the event any personnel is unwell, please obtain a medical certificate from a certified and registered medical doctor. Emergency leave shall also be applied in the event the personnel is unable to be on duty.

B. Advisories and Guidelines for Clients (Developer/JMC/MC/SMC).

1. Stop all gatherings, functions and meetings including AGM, EGM and committee meetings during the MCO period. If necessary, committee meeting may be conducted via video conferencing without any physical contact during the MCO period where decisions and resolutions are made with record of names of members making their votes and on the condition that a sufficient quorum is present when the votes are taken.
2. Shut down all common recreational facilities but maintaining suitable level of servicing and maintenance of such facilities to ensure that they do not go into disrepairs during the MCO period. This is to implement social distancing and self-isolation during the MCO period.
3. Stop all STRA activities during the MCO period.
4. Stop all renovation, moving-in and moving-out activities.
5. Daily sanitizing by cleaning and wiping of all the frequently touched surfaces in the common property like lift buttons, handrails, door knobs/handles, chairs, tables, switches, wash basins, taps, etc. with commercial grade disinfectant. In addition, wipe down all accessible walls, glazing, doors and windows with commercial grade disinfectant. Additional budget, subject to Client’s approval, will be allocated to the cleaning agency for the disinfectants, disposable N95 or 3-ply surgical masks, disposable gloves, disposable long-sleeved gowns and eye goggles or face shield.
6. In order to enhance safety of the occupiers, it is recommended that hand sanitizers of 70% alcohol content be provided to critical areas of the common property such as guardhouse, security counters and checkpoints, reception counters and main lift lobbies; and soap dispensers to common washrooms.
7. Conduct temperature screening of the personnel on duty for all the service providers in the building twice daily: once in the morning and once in the afternoon.

NOTE: In the event the temperature reading exceeds 38 degrees Celsius for three (3) continuous time at 1 minute apart after each reading, the said personnel shall be asked to seek medical attention immediately, go on medical leave (MC) and then update medical report to the immediate superior and the PMO.

8. Conduct temperature screening of all individuals entering the building in accordance with the established temperature screening protocols.
9. In order to avoid any unnecessary exposure to Novel Coronavirus (2019-nCoV) infection, the PMO staff will be working on alternate day rotation to work on site and from home during the MCO period.

[The space below is intentionally left blank]

C. Entry Protocol for Residents / Occupiers.

1. Movements of residents / occupiers within the strata development during MCO shall be limited to needs only, such as seeking medical care and procurement of food and essential items.
2. Security personnel on duty will conduct temperature screening for all residents or occupiers each time they enter the building.

NOTE: In the event the temperature reading exceeds 38 degrees Celsius for three (3) continuous time at 1 minute apart after each reading, the said resident or occupier shall be asked to seek medical attention immediately, and their personal particulars will be recorded. An advisory note (*refer to [Appendix "2"](#)*) will be issued to the said person by the security personnel on duty and a copy of the same will be extended to the PMO.

3. The following advice shall be conveyed to the abovementioned resident or occupier:
 - a. Please seek immediate medical attention;
 - b. Kindly impose self-quarantine and social distancing, including when at home;
 - c. To wear a facemask at all times; and
 - d. To update the PMO on his/her condition until full recovery from the fever, at least once every 24 hours on a working day via telephone call.
4. In the event the said resident or occupier did not perform item C3(d), the PMO shall initiate contact by phone; and, if a response is not received within the next 24 hours, the CPRC will be notified for further advice and action.

D. Entry Protocol for Visitors.

1. No visitors are allowed during the enforcement of the MCO, unless:
 - a. Occupier is a senior citizen living alone and require monitoring. Only children or immediate sibling or caregiver is allowed to visit if required;
 - b. Occupier is a sick person (non COVID-19) or infirm who needs regular monitoring. Only children or immediate sibling or caregiver is allowed to visit if required;
 - c. Occupier requiring immediate medical intervention. Only children or immediate sibling or medical caregiver is allowed to visit if required;
 - d. Bereavement in the occupier's unit. Only children or immediate sibling or undertaker is allowed to visit if required. (Notes: Bereavement will be subject to the additional by-laws of the strata building as bereavement is not permitted in the unit for majority of strata buildings; and they will have to do the last rites at the funeral parlour);
 - e. The business premise is providing essential services and the visitor is critical to the continuation of the essential services.
2. Security personnel on duty will check and qualify all visitors in accordance with item D(1). The visitors, who are not qualified, will be denied entry into the building.
3. The visitors, who are qualified, will undergo temperature screening each time they enter the building at each security checkpoint. The security personnel will be equipped with a non-contact infrared thermometer for temperature screening and hand sanitizers (if available) for the said visitor to sanitize their hands prior to entering the building.

4. In the event the temperature reading exceeds 38 degrees Celsius for three (3) continuous time at 1 minute apart after each reading, the qualified visitor shall be denied entry to the building and be advised to seek medical attention immediately. The security personnel will inform the owner / resident / occupier of the matter immediately.

E. Entry Protocol for Delivery Personnel (Food, Essential Items, Postal and Courier Services).

1. Subject to the restrictions imposed at the respective strata developments, it is recommended that delivery shall limited to the ground floor only.
2. Residents / occupiers are encouraged to collect their food and delivery items from the ground floor at a designated location, e.g. security checkpoint, concierge or main lift lobby.
3. For those with mobility issues (e.g. the elderly, infirm, bedridden, etc.), the security personnel on duty may assist to deliver the ordered food or essential items to their units, subject to consent from the management after compiling a list of units requiring such attention and assistance.
4. In the event such arrangement under item E(3) cannot be done (e.g. the said security personnel is alone manning the security post), such delivery personnel may be granted entry into the building upon being cleared in the temperature screening by the security personnel on duty and the delivery personnel must sanitize their hands before entering.
5. In the event the temperature reading exceeds 38 degrees Celsius for three (3) continuous time at 1 minute apart after each reading, the delivery personnel shall be denied entry to the building and be advised to seek medical attention immediately. In such an event, the security supervisor on duty shall handle the said delivery personally, where he shall inform the recipient of the reason so that the recipient can take safety precautions to sanitize the items and wash hands after handling the items. Similarly, the said security supervisor will ensure that he takes safety precaution by immediately washing or sanitizing his hands after the delivery.
6. Item E(1) to item E(5) shall apply for courier services.
7. For postal services, access to the building's mailroom may be granted upon being cleared in the temperature screening by the security personnel on duty and the postal delivery personnel must sanitize his hands before entering. In the event the temperature reading exceeds 38 degrees Celsius for three (3) continuous time at 1 minute apart after each reading, the said postal delivery personnel shall be denied entry to the building and be advised to seek medical attention immediately and report to the postmaster.

F. Entry Protocol for Domestic Helpers, Contractors, Repairmen and Others.

1. Only those involved in providing essential services, or attending to any emergency repairs that affects the safety of the occupiers will be allowed into the building.
2. Security personnel on duty will conduct temperature screening of all domestic helpers, contractors, repairmen and/or others each time they enter the building at each checkpoint, where the said security personnel will be equipped with a non-contact infrared thermometer for temperature screening and hand sanitizers (if available) for the said person to sanitize their hands prior to entering the building.
3. In the event the temperature reading exceeds 38 degrees Celsius for three (3) continuous time at 1 minute apart after each reading, the person shall be denied entry to the building and be advised to seek medical attention immediately. The security personnel will inform the owner / resident / occupier of the matter immediately.

G. Emergency Protocols for confirmed COVID-19 cases.
1. COVID-19 positive for PMO Personnel.

- 1.1 PMO to call CPRC at 03-8881 0200, 03-8881 0600 or 03-8881 0700 or cprc@moh.gov.my for instructions, advices and contact tracing.
- 1.2 PMO to notify the Client, the Asset Manager and the head office.
- 1.3 PMO will identify and report to CPRC all those personnel of PMO, service providers and any other persons in the building who have been in close physical contact with the patient recently. PMO will notify them to self-quarantine themselves at home for 14 days and to take a COVID-19 test at the selected government hospitals or as directed by the MOH or CPRC.
- 1.4 As [advised by the Ministry of Human Resources](#), PMO will also find out from the patient which persons in the building that he/she come within one and two meters distance recently and provide a list of such individuals to CPRC.
- 1.5 A notice (*refer to [Appendix "3" or "3A"](#), as the case may be*) shall be prepared and sent out to inform the residents / occupiers of the matter on the same day. However, as [advised by the Ministry of Human Resources](#), the name of the infected PMO personnel shall be kept confidential.
- 1.6 Seal off the management office and areas of the common property that the patient visited recently on an urgent basis for sanitization.
- 1.7 If fumigation is required, the Asset Manager or the Manager may contact the following specialists for quotations, and then submit them to the Client for approval:

M-CUBE ENGINEERING SDN BHD P.I.C.: Mr. Chew Kok Lee Mobile: +6012 4022 306 Tel: +603 5103 3603 Email: ckoklee@m-cube.com.my Web: www.m-cube.com.my	IAQ DIAGNOSTICS SDN BHD P.I.C: En. Hamzah Harjono Mobile: +6019 3377 545 Tel: +603 6734 7533 / 35 Email: info@iaqds.my / hamzah@iaqds.my Web: http://iaqds.my/
BRITCLEAN SOLUTIONS SERVICES P.I.C: Mr. Choong Wan Maw Mobile: +017 3686 031 Email: briteclean2u@gmail.com Web: https://www.facebook.com/BriteClean-Solutions-Services-670604423144799/	SINAR GLOBAL HYGIENE (M) SDN BHD P.I.C: Cik Nur Sarah Muhamad Muslim Mobile: +6014 9614 912 Tel: +603 6187 6866 Email: sarah@sghygiene.com.my Web: http://sghygiene.com.my/

- 1.8 Immediately on the same day, the cleaners will be instructed to wear PPE and commence the sanitization of the sealed-off areas of the common property by thorough cleaning and wiping of all the frequently touched surfaces like lift buttons, handrails, door knobs/handles, chairs, tables, switches, wash basins, taps, etc. with commercial grade disinfectant. In addition, wipe down all accessible walls, glazing, doors and windows thereof with commercial grade disinfectant. PPE for cleaners carrying out sanitizing works shall comprise of disposable N95 or 3-ply surgical masks, disposable gloves, disposable long-sleeved gowns and eye goggles or face shield.

NOTE: For more details, please refer to the Protocol for Sanitization work performed by Cleaners in [Appendix “1”](#).

- 1.9 If there are areas in the common property for fumigation by appointed specialist, the cleaners will commence sanitization of the said areas only after the fumigation has been done.
- 1.10 After the above sanitization and/or fumigation, the sealed-off areas will be reopened for use, as the case may be.
- 1.11 From the next day onwards, the cleaners will continue to sanitize the whole common property by cleaning and wiping of all the frequently touched surfaces like lift buttons, handrails, door knobs/handles, chairs, tables, switches, wash basins, taps, etc. with commercial grade disinfectant. Wipe down all accessible walls, glazing, doors and windows thereof with commercial grade disinfectant.

NOTE: For more details, please refer to the Protocol for Sanitization work performed by Cleaners in [Appendix “1”](#).

- 1.12 The frequency of such sanitization will be thrice daily for the next 14 days and then reduce to twice daily until further notice. Additional budget, subject to Client’s approval, will be allocated to the cleaning agency for the disinfectants, disposable N95 or 3-ply surgical masks, disposable gloves, disposable long-sleeved gowns and eye goggles or face shield. Notwithstanding this, the lift buttons and lift lobby door handles will be sanitized daily at every 1 - 2 hourly intervals. In addition to placing hand sanitizers at the main lift lobbies, all lift cars will also be equipped with hand sanitizers.
- 1.13 In order to enhance the safety of the residents / occupiers, it is recommended that hand sanitizers of 70% alcohol content to be provided to critical areas of the common property such as guardhouse, security counters and checkpoints, reception counters and main lift lobbies; and soap dispensers to common washrooms.
- 1.14 If the PMO is required to be closed for fumigation due to possible exposure, the PMO personnel, who are not affected, shall continue to work from a different location such as meeting room or the control room until the fumigation is completed with a certificate of clearance.
- 1.15 If the entire PMO team is required to be quarantined, the Asset Manager will temporarily oversee the management and maintenance of the essential services for the subject site while the HQ Accounts Department will render temporary support to the accounting services for the subject site. In the event of a facility breakdown, the Asset Manager will seek technical assistance from other sites, as the case may be.
- 1.16 In accordance with the directives by the COB and KPKT, the PMO will remain shut down to the public (owners, residents and occupiers) during the MCO period save and except for the PMO personnel operating at limited capacity from the PMO.
- 1.17 If there is a possibility of any formation of COVID-19 clusters in the building, then the PMO shall carry out the mitigation measures as prescribed under [“H. Protocol for mitigation of clusters after confirmed COVID-19 case”](#).

2. COVID-19 positive for Occupiers / Residents.

- 2.1 PMO to call CPRC at 03-8881 0200, 03-8881 0600 or 03-8881 0700 or cprc@moh.gov.my for instructions, advices and contact tracing.
- 2.2 PMO to notify the Client, the Asset Manager and the head office.

- 2.3 PMO will identify and notify all persons in the building who had close physical contact with the patient to self-quarantine themselves at home and to take a COVID-19 test at the selected government hospitals or as directed by the MOH or CPRC.
- 2.4 When in self-quarantine, the person must not leave his/her unit; and the concierge staff or the security, as the case may be, can arrange for his/her deliveries to be sent up to his/her unit if he/she informs the Management that he/she is in self-quarantine.
- 2.5 A notice (*refer to [Appendix "3"](#) or ["3A"](#), as the case may be*) shall be prepared and sent out to inform the Occupiers / Residents of the matter on the same day. Do not disclose to the name of the patient, the unit no. and the floor level which are to be kept as strictly confidential. Only the block or tower can be disclosed.
- 2.6 Seal off all areas of the common property that the patient visited recently for sanitization.
- 2.7 If fumigation is required, the Asset Manager or the Manager may contact the following specialists for quotations, and then submit them to the Client for approval:

M-CUBE ENGINEERING SDN BHD P.I.C.: Mr. Chew Kok Lee Mobile: +6012 4022 306 Tel: +603 5103 3603 Email: ckoklee@m-cube.com.my Web: www.m-cube.com.my	IAQ DIAGNOSTICS SDN BHD P.I.C: En. Hamzah Harjono Mobile: +6019 3377 545 Tel: +603 6734 7533 / 35 Email: info@iaqds.my / hamzah@iaqds.my Web: http://iaqds.my/
BRITECLEAN SOLUTIONS SERVICES P.I.C: Mr. Choong Wan Maw Mobile: +017 3686 031 Email: briteclean2u@gmail.com Web: https://www.facebook.com/BriteClean-Solutions-Services-670604423144799/	SINAR GLOBAL HYGIENE (M) SDN BHD P.I.C: Cik Nur Sarah Muhamad Muslim Mobile: +6014 9614 912 Tel: +603 6187 6866 Email: sarah@sghygiene.com.my Web: http://sghygiene.com.my/

- 2.8 Immediately on the same day, the cleaners will be instructed to wear PPE and commence the sanitization of the sealed-off areas of the common property by thorough cleaning and wiping of all the frequently touched surfaces like lift buttons, handrails, door knobs/handles, chairs, tables, switches, wash basins, taps, etc. with commercial grade disinfectant. In addition, wipe down all accessible walls, glazing, doors and windows thereof with commercial grade disinfectant. PPE for cleaners carrying out sanitizing works shall comprise of disposable N95 or 3-ply surgical masks, disposable gloves, disposable long-sleeved gowns and eye goggles or face shield.

NOTE: For more details, please refer to the Protocol for Sanitization work performed by Cleaners in [Appendix "1"](#).

- 2.9 If there are areas in the common property for fumigation by appointed specialist, the cleaners will commence sanitization of the said areas only after the fumigation has been done.
- 2.10 After the above sanitization and/or fumigation, the sealed-off areas will be reopened for use, as the case may be.
- 2.11 From the next day onwards, the cleaners will continue to sanitize the whole common property by cleaning and wiping of all the frequently touched surfaces like lift buttons, handrails, door

knobs/handles, chairs, tables, switches, wash basins, taps, etc. with commercial grade disinfectant. Wipe down all accessible walls, glazing, doors and windows thereof with commercial grade disinfectant.

NOTE: For more details, please refer to the Protocol for Sanitization work performed by Cleaners in [Appendix "1"](#).

- 2.12 The frequency of such sanitization will be thrice daily for the next 14 days and then reduce to twice daily until further notice. Additional budget, subject to Client's approval, will be allocated to the cleaning agency for the disinfectants, disposable N95 or 3-ply surgical masks, disposable gloves, disposable long-sleeved gowns and eye goggles or face shield. Notwithstanding this, the lift buttons and lift lobby door handles will be sanitized daily at every 1 - 2 hourly intervals. In addition to placing hand sanitizers at the main lift lobbies, all lift cars will also be equipped with hand sanitizers.
- 2.13 In order to enhance the safety of the occupiers, it is recommended that hand sanitizers of 70% alcohol content to be provided to critical areas of the common property such as guardhouse, security counters and checkpoints, reception counters and main lift lobbies; and soap dispensers to common washrooms.
- 2.14 PMO to notify the owner of the unit with COVID-19 case that he/she has to carry out sanitization of his/her unit with the assistance from MOH or by a sanitization specialist at his/her own expense on an urgent basis i.e. within 48 hours. Otherwise, the management body will carry out the said sanitization and then charge the expense to his/her unit's account.
- 2.15 In the event the occupier / resident is a tenant, the PMO will inform the owner that his/her tenant was tested positive for COVID-19 and that the owner has to carry out sanitization of his/her unit with the assistance from MOH or by a sanitization specialist at his/her own expense on an urgent basis i.e. 48 hours. Otherwise, the management body will carry out the said sanitization and then charge the expense to his/her unit's account.
- 2.16 If the PMO is required to be closed for fumigation due to possible exposure, the PMO personnel, who are not affected, shall continue to work from a different location such as meeting room or the control room until the fumigation is completed with a certificate of clearance.
- 2.17 If the entire PMO team required to be quarantined, the Asset Manager will temporarily oversee the management and maintenance of the essential services for the subject site while the HQ Accounts Department will render temporary support to the accounting services for the subject site. In the event of a facility breakdown, the Asset Manager will seek technical assistance from other sites, as the case may be.
- 2.18 In accordance with the directives by the COB and KPKT, the PMO will remain shut down to the public (owners, residents and occupiers) during the MCO period save and except for the PMO personnel operating at limited capacity from the PMO.
- 2.19 If there is a possibility of any formation of COVID-19 clusters in the building, then the PMO shall carry out the mitigation measures as prescribed under "[H. Protocol for mitigation of clusters after confirmed COVID-19 case](#)".

3. COVID-19 positive for external Service Providers / Contractors.

- 3.1 PMO to call CPRC at 03-8881 0200, 03-8881 0600 or 03-8881 0700 or cprc@moh.gov.my for instructions, advices and contact tracing.
- 3.2 PMO to notify the Client, the Asset Manager, the head office and the service provider / contractor head office.

- 3.3 PMO will identify and notify all persons in the building who had close physical contact with the patient to self-quarantine themselves at home and to take a COVID-19 test at the selected government hospitals or as directed by the MOH or CPRC.
- 3.4 When in self-quarantine, the person must not leave his/her unit; and the concierge staff or the security, as the case may be, can arrange for his/her deliveries to be sent up to his/her unit if he/she informs the Management that he/she is in self-quarantine.
- 3.5 A notice (*refer to [Appendix "3"](#) or ["3A"](#), as the case may be*) shall be prepared to inform the Occupiers / Residents on the matter on the same day. Do not disclose to the name of the patient which is to be kept as strictly confidential.
- 3.6 Seal off all the areas of the common property that the patient visited recently for sanitization.
- 3.7 If fumigation is required, the Asset Manager or the Manager may contact the following specialists for quotations, and then submit them to the Client for approval:

M-CUBE ENGINEERING SDN BHD P.I.C.: Mr. Chew Kok Lee Mobile: +6012 4022 306 Tel: +603 5103 3603 Email: ckoklee@m-cube.com.my Web: www.m-cube.com.my	IAQ DIAGNOSTICS SDN BHD P.I.C: En. Hamzah Harjono Mobile: +6019 3377 545 Tel: +603 6734 7533 / 35 Email: info@iaqds.my / hamzah@iaqds.my Web: http://iaqds.my/
BRITECLEAN SOLUTIONS SERVICES P.I.C: Mr. Choong Wan Maw Mobile: +017 3686 031 Email: briteclean2u@gmail.com Web: https://www.facebook.com/BriteClean-Solutions-Services-670604423144799/	SINAR GLOBAL HYGIENE (M) SDN BHD P.I.C: Cik Nur Sarah Muhamad Muslim Mobile: +6014 9614 912 Tel: +603 6187 6866 Email: sarah@sghygiene.com.my Web: http://sghygiene.com.my/

- 3.8 Immediately on the same day, the cleaners will be instructed to wear PPE and commence the sanitization of the sealed-off areas of the common property by thorough cleaning and wiping of all the frequently touched surfaces like lift buttons, handrails, door knobs/handles, chairs, tables, switches, wash basins, taps, etc. with commercial grade disinfectant. In addition, wipe down all accessible walls, glazing, doors and windows thereof with commercial grade disinfectant. PPE for cleaners carrying out sanitizing works shall comprise of disposable N95 or 3-ply surgical masks, disposable gloves, disposable long-sleeved gowns and eye goggles or face shield.

NOTE: For more details, please refer to the Protocol for Sanitization work performed by Cleaners in [Appendix "1"](#).

- 3.9 If there are areas in the common property for fumigation by appointed specialist, the cleaners will commence sanitization of the said areas only after the fumigation has been done.
- 3.10 After the above sanitization and/or fumigation, the sealed-off areas will be reopened for use, as the case may be.
- 3.11 From the next day onwards, the cleaners will continue to sanitize the whole common property by cleaning and wiping of all the frequently touched surfaces like lift buttons, handrails, door knobs/handles, chairs, tables, switches, wash basins, taps, etc. with commercial grade

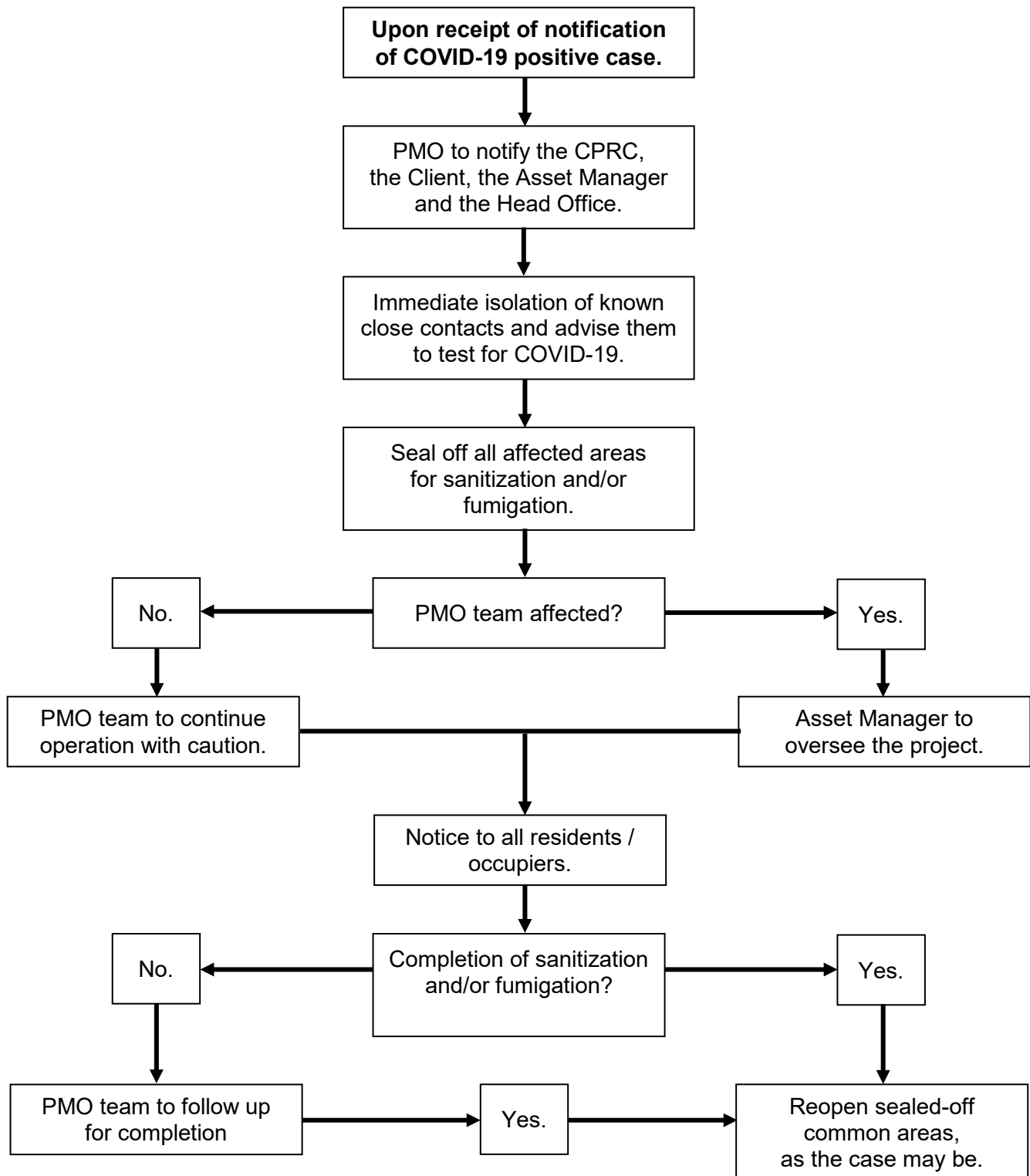
disinfectant. Wipe down all accessible walls, glazing, doors and windows thereof with commercial grade disinfectant.

NOTE: For more details, please refer to the Protocol for Sanitization work performed by Cleaners in [Appendix "1"](#).

- 3.12 The frequency of such sanitization will be thrice daily for the next 14 days and then reduce to twice daily until further notice. Additional budget, subject to Client's approval, will be allocated to the cleaning agency for the disinfectants, disposable N95 or 3-ply surgical masks, disposable gloves, disposable long-sleeved gowns and eye goggles or face shield. Notwithstanding this, the lift buttons and lift lobby door handles will be sanitized daily at every 1 - 2 hourly intervals. In addition to placing hand sanitizers at the main lift lobbies, all lift cars will also be equipped with hand sanitizers.
- 3.13 In order to enhance the safety of the occupiers, it is recommended that hand sanitizers of 70% alcohol content to be provided to critical areas of the common property such as guardhouse, security counters and checkpoints, reception counters and main lift lobbies; and soap dispensers to common washrooms.
- 3.14 If the PMO is required to be closed for fumigation due to possible exposure, the PMO personnel, who are not affected, shall continue to work from a different location such as meeting room or the control room until the fumigation is completed with a certificate of clearance.
- 3.15 If the entire PMO team required to be quarantined, the Asset Manager will temporarily oversee the management and maintenance of the essential services for the subject site while the HQ Accounts Department will render temporary support to the accounting services for the subject site. In the event of a facility breakdown, the Asset Manager will seek technical assistance from other sites, as the case may be.
- 3.16 The service provider or contractor will arrange for the continuation of service or work with minimal disruption, as the case may be.
- 3.17 In accordance with the directives by the COB and KPKT, the PMO will remain shut down to the public (owners, residents and occupiers) during the MCO period save and except for the PMO personnel operating at limited capacity from the PMO.
- 3.18 If there is a possibility of any formation of COVID-19 clusters in the building, then the PMO shall carry out the mitigation measures as prescribed under "[H. Protocol for mitigation of clusters after confirmed COVID-19 case](#)".

[The space below is intentionally left blank]

BURGESS RAWSON MANAGEMENT SDN BHD (361976-W)			
Quality System Procedure		Doc. Ref. No.	
Department	PROPERTY MANAGEMENT	QSP-C19	
Subject	EMERGENCY PROTOCOLS TO HANDLE CONFIRMED COVID-19 POSITIVE CASE		
Effective Date	18 March 2020	Prepared By	Sr. Wong Kok Soo
Revision No.	05/2020	Site	All BRM's Managed Sites



Note: For detailed instructions, please refer to the protocol [G1](#), [G2](#) or [G3](#), as the case may be.

H. Protocol for mitigation of clusters after a confirmed COVID-19 case.

1. PMO will instruct the cleaners to wear PPE and sanitize the whole common property by cleaning and wiping of all the frequently touched surfaces like lift buttons, handrails, door knobs/handles, chairs, tables, switches, wash basins, taps, etc. with commercial grade disinfectant. Wipe down all accessible walls, glazing, doors and windows thereof with commercial grade disinfectant. Special focus will be given to the affected block with the COVID-19 case. PPE for cleaners carrying out sanitizing works shall comprise of disposable N95 or 3-ply surgical masks, disposable gloves, disposable long-sleeved gowns and eye goggles or face shield.

NOTE: For more details, please refer to the Protocol for Sanitization work performed by Cleaners in [Appendix "1"](#).

2. The frequency of such sanitization will be thrice daily for the next 14 days until further notice. Additional budget, subject to Client's approval, will be allocated to the cleaning agency for the disinfectants, disposable N95 or 3-ply surgical masks, disposable gloves, disposable long-sleeved gowns and eye goggles or face shield. Notwithstanding this, the lift buttons and lift lobby door handles will be sanitized daily at every 1 hourly interval. In addition to placing hand sanitizers at the main lift lobbies, all lift cars will also be equipped with hand sanitizers.
3. The residents / occupiers in the affected block will be advised to carry out the following precautionary measures over the next 14 days:-
 - a. **Carry out self-quarantine and stay at home;**
 - b. **Practise social distancing of at least 1 metre apart and self-isolation;**
 - c. **Wear a 3-ply facemask at all times;**
 - d. **Practise good hand hygiene by frequently washing your hands with soap for at least 20 seconds or sanitizing your hands with hand sanitizers of 70% alcohol content;**
 - e. **Never touch your face (nose, eyes and mouth) until your hands are washed or sanitized;**
 - f. **Always cover your mouth and nose with a tissue paper when you cough or sneeze; and dispose the tissue properly into the garbage bag in the dustbin;**
 - g. **If you experience fever, dry cough and breathing difficulty, please seek medical attention immediately or you may contact CPRC for advice and medical attention at 03-8881 0200, 03-8881 0600 or 03-8881 0700 or cprc@moh.gov.my and **please keep the Management informed on your condition regularly;** and**
 - h. **Please inform the Management immediately if there is a confirmation of COVID-19 case.**
4. The residents / occupiers of the other blocks in the strata development are also advised to follow the above precautionary measures on a voluntary basis for their own safety and wellbeing.
5. PMO will issue notice (refer to [Appendix "4"](#) or ["4A"](#), as the case may be) to advise the residents / occupiers on the above. Do not disclose to the name of the patient, the unit no. and the floor level which are to be kept as strictly confidential. Only the block or tower can be disclosed.
6. xxx
7. PMO will circulate the following information to all residents / occupiers for their reference:

- a. <https://www.doctoroncall.com.my> (**DoctorOnCall.com**) – for any normal medical attention, assistance, consultation and ordering of medications.

Note: You may also access the Virtual Health Advisory Portal of Novel Coronavirus (COVID-19) by the MOH here, or ask a MOH doctor questions daily from 8:30 AM – 5:00 PM.

- b. The list of hospitals with screening test for COVID-19 are:

Selangor	Hospital Sungai Buloh	03 6145 4333
	Hospital Tengku Ampuan Rahimah, Klang	03 3372 3333
	Hospital Selayang, Batu Caves	03 6120 3233
	Hospital Serdang, Kajang	03 8947 5555
	Hospital Shah Alam	03 5562 3000
	Hospital Banting	03 3187 1333
	Hospital Kajang	03 8913 3333
Putrajaya	Hospital Putrajaya	03 8312 4200
Kuala Lumpur	Hospital Kuala Lumpur	03 2615 5555

- c. <https://shop.doctor2u.my/covid19/main> (**Doctor2U.com**) – for an online assessment to determine if you are at risk of the Novel Coronavirus infection (COVID-19), and to request for a home sampling test.

NOTE: For further questions, please call:

+6012 5251 530 / +6018 3772 692 / +6018 3215 491 or email support@doctor2u.my
Phone Support available – 8:00 AM to 8:00 PM

Group Special Rate :		
1-5 pax	- RM700 per pax	11-20 pax - RM600 per pax
6-10 pax	- RM650 per pax	21-40 pax - RM550 per pax

8. PMO shall assist the residents / occupiers to arrange and coordinate for a group screening test so as to enjoy the special group rate offered by [Doctor2U.com](https://shop.doctor2u.com).

NOTES:

To understand more about how COVID-19 is diagnosed, test and screened, please to refer to [Appendix "6"](#).

For frequently asked questions pertaining the COVID-19 test and screening, please to refer to [Appendix "7"](#).

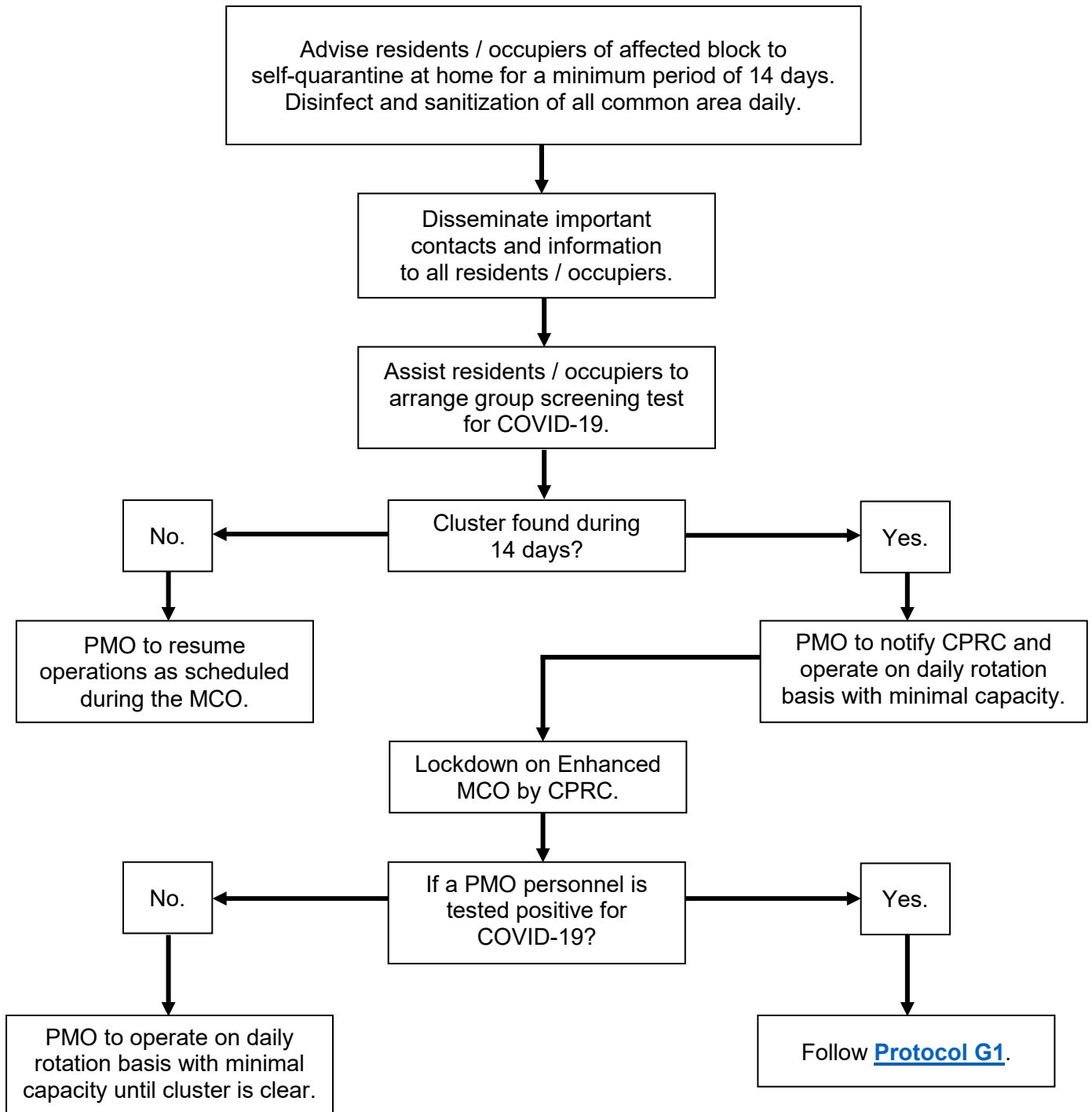
9. After fourteen (14) days, if:

- a. there is no new case reported, then the building is clear of COVID-19 cluster, or

- b. cluster of COVID-19 cases appears during the 14 days, then CPRC has to be notified immediately for evaluation of risk and the building may have to be in lockdown (EMCO) if ordered by CPRC.
10. During the said 14 days, the PMO shall exercise extreme precautions and ensure that:
 - a. all PMO personnel and service providers working within the strata development shall diligently practise higher level of self-protection and hand hygiene based on [Advisories and Guidelines \(A\)](#) above; and
 - b. the PMO to continue to operate on daily rotation basis with minimal manpower capacity in order to minimize potential exposure to COVID-19 until the MCO or EMCO, as the case may be, is lifted by the CPRC.
11. In the event a PMO personnel is down with suspected symptoms, he will be required to undergo screen test for COVID-19 immediately. The Manager or Asset Manager, as the case may be, shall notify the Client immediately and the cost incurred by the said PMO personnel for the COVID-19 shall be paid under the actual staff cost reimbursement by the Client.
12. The PMO shall comply with all directives and instructions given by the authorities for EMCO if the strata development is in lockdown.

[The space below is intentionally left blank]

BURGESS RAWSON MANAGEMENT SDN BHD (361976-W)			
Quality System Procedure		Doc. Ref. No.	
Department	PROPERTY MANAGEMENT	QSP-C20	
Subject	PROTOCOL FOR MITIGATION OF CLUSTERS AFTER A CONFIRMED COVID-19 CASE		
Effective Date	1 April 2020	Prepared By	Sr. Wong Kok Soo
Revision No.	02/2020	Site	All BRMSB Managed Sites



I. Protocol for Social Distancing and Personal Hygiene.

1. Lifts and Main Lift Lobby.

- (1) Social distancing queue markers at one (1) metre apart will be placed on the floor leading to the lifts at the main lift lobby.
- (2) Not more than four (4) persons in a lift car in order to maintain social distancing.
- (3) Good personal hygiene:
 - (a) Always cover your mouth and nose with a tissue paper whenever you cough or sneeze. Immediately dispose the tissue paper into the garbage bag in the dustbin. In the absence of tissue paper, use your handkerchief or cough/sneeze into your elbow.
 - (b) Never touch your face (nose, eyes and mouth) until your hands are washed with soap and water or sanitized with sanitizer of 70% alcohol content.
- (4) A bottle of hand sanitizers will be placed in the main lift lobby and in each lift car with instructions for user:
 - (a) to sanitize the finger or knuckle first before using it to press the lift button; and
 - (b) to sanitize the hands before using the door handle/knob to open the lift lobby door.
- (5) Notice will be put up at the main lift lobby for purposes of subparagraphs (1), (2), (3) and (4) herein.
- (6) Notice will be put up inside each lift car for purposes of subparagraphs (2), (3) and (4)(a) herein.

2. Escalators.

- (1) Social distancing queue markers at one (1) metre apart will be placed on the floor leading to the entrance of the escalator.
- (2) Good personal hygiene:
 - (a) Always cover your mouth and nose with a tissue paper whenever you cough or sneeze. Immediately dispose the tissue paper into the garbage bag in the dustbin. In the absence of tissue paper, use your handkerchief or cough/sneeze into your elbow.
 - (b) Never touch your face (nose, eyes and mouth) until your hands are washed with soap and water or sanitized with sanitizer of 70% alcohol content.
- (3) A bottle of hand sanitizers will be placed one (1) metre from both ends of the escalator for the users to sanitize their hands first before holding the handrails of the escalator and to sanitize their hands after exiting the escalator.
- (4) Users are advised to maintain social distancing of at least one (1) metre apart from other individuals while on the escalator.

- (5) Notice will be put up one (1) metre from the entrance of the escalator for purposes of subparagraphs (1), (2), (3) and (4) herein.

3. Guardhouse and Security Checkpoint.

- (1) Social distancing queue markers at one (1) metre apart will be placed on the floor or road leading to the entrance of the guardhouse or security checkpoint.
- (2) Good personal hygiene:
 - (a) Always cover your mouth and nose with a tissue paper whenever you cough or sneeze. Immediately dispose the tissue paper into the garbage bag in the dustbin. In the absence of tissue paper, use your handkerchief or cough/sneeze into your elbow.
 - (b) Never touch your face (nose, eyes and mouth) until your hands are washed with soap and water or sanitized with sanitizer of 70% alcohol content.
- (3) A bottle of hand sanitizer will be placed at the guardhouse or the security checkpoint.
- (4) The security guard will squeeze a drop of the sanitizer on the hand of the person for him/her to sanitize his/her hands first before allowing him/her to enter the building after satisfying the entry protocols.
- (5) Notice will be put up one (1) metre from the entrance of the guardhouse or the security checkpoint for purposes of subparagraphs (1), (2) and (4).

4. Social Distancing on the Common Property.

- (1) All individuals are advised to always maintain social distancing of at least one (1) metre apart from other individuals while on the common property at all times.
- (2) Good personal hygiene:
 - (a) Always cover your mouth and nose with a tissue paper whenever you cough or sneeze. Immediately dispose the tissue paper into the garbage bag in the dustbin. In the absence of tissue paper, use your handkerchief or cough/sneeze into your elbow.
 - (b) Never touch your face (nose, eyes and mouth) until your hands are washed with soap and water or sanitized with sanitizer of 70% alcohol content.
- (3) Notices will be put up on the notice boards, at the heavy pedestrian traffic areas and the facilities of the common property for purposes of subparagraphs (1) and (2) herein.

[The space below is intentionally left blank]

J. Protocol for Self-Quarantine and Self-Assessment.

1. Protocol for Self-Quarantine.

- (1) You are required to perform a **mandatory self-quarantine** for at least fourteen (14) days if you:-
 - (a) **Have been identified as a contact to someone diagnosed positive with COVID-19;** or
 - (b) **Have just returned from overseas.**
- (2) Perform a daily health check by taking the body temperature of yourself and your live-in family members at least twice a day using a non-contact infrared thermometer.
- (3) Record the temperature readings into a logbook for reference purposes.
- (4) **STAY AT HOME and DO NO LEAVE YOUR RESIDENCE** throughout the self-quarantine period.
- (5) Self-isolate while you are at home; stay in a separate room and keep yourself in isolation from any other cohabiters living together in the same residence. Use a separate bathroom and basin/sink, if possible. Where and when possible, open the windows for natural ventilation.
- (6) Use separate personal items at all times, e.g. personal hygiene items, tableware, mobile phone, etc. and keep clothes and bedding separately for the person under self-quarantine.
- (7) If you need to leave your residence for any inevitable reasons, exercise extreme precautions by practicing **enhanced social distancing of at least 2 meters or 6 feet from any persons, wear a 3-ply surgical mask and wash your hands with soap for at least 20-seconds or hand sanitizers with at least 70% alcohol content.**

IMPORTANT: Please notify the management and/or the security officer on duty first before leaving your residence for record purposes; and necessary preparation can be arranged, e.g. sanitization of areas involved in the movement of the person under self-quarantine.

- (8) Pay attention to your health and should you experience any symptoms such as fever, respiratory related illness (e.g. cough, sore-throat, runny nose, shortness of breath), or any mild flu-like illness (e.g. fatigue, chills, muscle aches) and/or loss of taste or smell, kindly seek immediate medical attention and notify the management.
- (9) Should you need to seek medical assistance, please notify the medical provider in advance that you are under self-quarantine at home for COVID-19 so that adequate preparation can be done prior to consultation either at your residence or at the intended medical facility.
- (10) After 14 days of self-quarantine, you should continue to isolate yourself from others, including cohabiters for:
 - (a) At least seven (7) days since your symptoms first appeared, if any; and
 - (b) At least 72 hours or three (3) days upon recovery from any medical condition (e.g. fever), if any, without the use of medications to improve or suppressed any medical symptoms you may have.

2. Protocol for Self-Assessment.

- (1) As reported by the Ministry of Health Malaysia, 88% of patients in Malaysia are at clinical stage 1 or 2, where there is no or very minor symptoms shown.



- (2) Therefore, should you be concerned or worried of your health, you may perform a self-assessment to determine if you may be infected with the Novel Coronavirus (2019-nCoV).

NOTE: Self-assessment is a precautionary step a person may consider taking before imposing a **non-mandatory self-quarantine**.

- (3) If you are experiencing any known symptoms for COVID-19 such as fever, respiratory difficulties, cough, sore-throat, shortness of breath and/or loss of taste or smell, you may visit:

- (a) <https://shop.doctor2u.my/covid19/main> (**Doctor2U.com**) – for an online assessment to determine if you are at risk of the Novel Coronavirus infection (COVID-19), and to request for a home sampling test.

NOTE: For further questions, please call:

+6012 5251 530 / +6018 3772 692 / +6018 3215 491 or email support@doctor2u.my

Phone Support available – 8:00 AM to 8:00 PM



COVID-19

**GET TESTED BY DOCTOR
FOR COVID-19 AT HOME**

**ONLY
RM700 / PER PAX**

Results Ready Within 3-5 DAYS
RM700 includes doctor consultation, sample collection, home visit, digital report, sample storage and test kit to the doctor

Group Special Rate :

1-5 pax	- RM700 per pax	11-20 pax	- RM600 per pax
6-10 pax	- RM650 per pax	21-40 pax	- RM550 per pax

- (b) The management shall assist the residents to arrange and coordinate for a group-screening test so as to enjoy the special group rate offered by [Doctor2U.com](https://www.doctor2u.com).
- (4) If you are not experiencing any known symptoms for COVID-19 but needed medical attention for any other medical conditions, you may visit:
- <https://www.doctoroncall.com.my> ([DoctorOnCall.com](https://www.doctoroncall.com.my)) – for any normal medical attention, assistance, consultation and ordering of medications.
- (5) If you wish to find out more about COVID-19, you may also access the **Virtual Health Advisory Portal of Novel Coronavirus (COVID-19)** by the MOH at:
- <https://www.doctoroncall.com.my/coronavirus>, or ask a MOH doctor questions daily from 8:30 AM – 5:00 PM.

[The space below is intentionally left blank]

Protocol for Sanitization work performed by Cleaners.**A. Wearing PPE for Sanitization.**

The personnel involved in the cleaning and disinfection tasks in infected areas must wear appropriate PPE and take note of the following:-

1. Wear N95 or 3-ply surgical masks, disposable gloves, disposable long-sleeved gowns and eye goggles or face shields.
2. Avoid touching the nose, eyes and mouth. N95 masks and goggles are recommended to be used.
3. Gloves should be removed and discarded if they become soiled or damaged, and replaced with a new pair.
4. All disposable PPE should be removed and discarded after cleaning activities are completed.
5. Eye goggles, if used, should be disinfected after each use, according to the manufacturer's instructions.
6. Hands should be washed with soap and water immediately as well as with sanitizer that contains more than 70% alcohol after completing cleaning works.

B. Sanitizing Guidelines for Areas exposed to COVID-19 virus.

For the cleaning and sanitization of infected areas, the personnel involved must be well trained to carry out the task. Property managers, in supervising any cleaning up and sanitization, must take note of the following:-

1. Proceed to seal off areas where the patient has visited, before carrying out cleaning and disinfection of the contaminated surfaces to prevent further exposure.
2. Cleaning personnel should wear suitable PPE. Gloves should be removed and discarded if they become soiled or damaged, and replaced with a new pair. All other disposable PPE should be removed and discarded after cleaning activities are completed. Hands should be washed with soap and water immediately.
3. Ensure the area is well ventilated especially when using disinfectants.
4. Mop floors with disinfectant and wipe all frequently touched surfaces (e.g. lift buttons, handrails, door knobs/handles/buttons, arm rests, seat backs, tables, air/ light controls, keyboards, switches, etc.) and toilet surfaces with chemical disinfectants and allow to dry.
5. Clean toilets, including the toilet bowls and accessible surfaces in the toilet with disinfectant.
6. Wipe down all accessible surfaces of walls as well as structures, objects and fittings.
7. Remove curtains/blinds for washing.
8. Arrange for a cleaning contractor to properly disinfect the mattresses, pillows, cushions or carpets that have been used by the person who has been confirmed to have COVID-19.
9. Dispose all disposable PPE and cleaning equipment into appropriate biohazard bags and dispose the secured bags properly.

Covid-19

TATACARA PEMBERSIHAN DAN DISINFEKSI DI TEMPAT AWAM



Definisi Disinfeksi

Disinfeksi merupakan tindakan pembasmian kuman pada permukaan yang tercemar atau berpotensi tercemar

Tempat Awam

- Tempat ibadat
- Pusat komuniti
- Pasar awam
- Stesen dan hub pengangkutan awam
- Taman rekreasi
- Taman permainan
- Tempat kegunaan awam lain termasuklah semua laluan orang awam contohnya perhentian bas ke laluan siar kaki



Senarai PPE

- | | |
|----|--|
| 1. | Sarung tangan getah |
| 2. | Penutup mulut dan hidung
- 3 ply mask untuk kegunaan dalam bangunan
- Chemical respirator untuk pembancuhan dan semburan |
| 3. | Apron plastik |
| 4. | But Getah |
| 5. | Goggle atau face shield |
| 6. | Long-sleeved gown |

Anggota yang tidak dibenarkan melaksanakan Disinfeksi

- Dari Kumpulan Person Under Investigation (PUI)
- Mempunyai sejarah kontak rapat dengan pesakit yang disahkan COVID-19
- Mengalami gejala COVID-19

Langkah-langkah Disinfeksi

- Sebelum proses disinfeksi:
 - Basuh tangan dengan air dan sabun dijalankan
 - Pakai PPE yang bersesuaian
- Bersih permukaan yang hendak disinfeksi
- Lakukan disinfeksi mengikut Kesesuaian tempat
- Bersihkan diri dan tukar pakaian selepas proses disinfeksi

Bahan Disinfeksi

Kegunaan

Sodium Hypochlorite (0.5%)	Luaran/persekitaran
Sodium Hypochlorite (0.1%) (bahan peluntur)	Dalam bangunan
Ethanol (70%)	Dalam bangunan



ADVISORY NOTE

Name	
NRIC/Passport No.	
Unit No.	
Mobile Number	
*Home/Office Number	
Date and Time	
Temperature Recorded	

Dear Sir/Madam,

1. The Management regrets to inform you that your body temperature taken at the above date and time has indicated that you are having a fever.
2. We are deeply concerned for your health and wellbeing. Hence, we would like to advise you to consult a medical doctor for your fever and, at the same time, suggest that you wear facemask, practise self-isolation and social distancing during your stay at home in the building throughout the Movement Control Order (MCO) period.
3. For the collective safety and wellbeing of everyone in the community, the property management office (PMO) will carry out the following measures and we truly appreciate your kind understanding and cooperation:
 - a. You are requested to update the PMO on your condition until full recovery from the fever, at least once every 24 hours on a working day via telephone call.
 - b. In the event the PMO does not receive an update from you, the PMO shall initiate contact by phone. If a response is not received within the next 24 hours, the Ministry of Health (MOH) / Crisis Preparedness And Respondent Centre (CPRC) will be notified for further advice and action.
 - c. If your condition worsens, you are advised to consult a medical doctor or, with your consent, the PMO will assist you to contact the MOH/CPRC for assistance. Notwithstanding this, if your condition worsens for three (3) continuous days, the PMO will contact the MOH/CPRC for advice and assistance.
4. We truly care for your health, wellbeing and safety; and, therefore, if you need any assistance, please call us at <insert management office number> during working hours.

Yours sincerely,

The Management,
<insert name of management body>.

Receipt Acknowledgement of this Advisory Note by (*please sign here*):

IMPORTANT NOTICE**SUBJECT: CONFIRMED CASE OF COVID-19**

1. The management deeply regrets to inform you that an *resident / *occupier / *service provider / *visitor / *PMO personnel in <insert name of the block and the strata development> was tested positive for COVID-19 on <insert date>.
2. The Crisis Preparedness And Respondent Centre (CPRC) has been duly notified and the management has taken all necessary measures to sanitize all frequently accessed areas of the common property, focusing on **all frequently touched surfaces**, using commercial grade disinfectants.
3. You are advised to follow these advisories at all times for your own safety and wellbeing:-
 - a. Obey the Movement Control Order (MCO) to stay at home and remain indoor at all times;
 - b. Wear a 3-ply facemask when you are outdoor to seek medical attention or to procure food and essential items;
 - c. Practise good hand hygiene by frequently washing your hands with soap for at least 20 seconds or sanitizing your hands with hand sanitizers of 70% alcohol content;
 - d. Never touch your face (nose, eyes and mouth) until your hands are washed or sanitized;
 - e. Always cover your mouth and nose with a tissue paper when you cough or sneeze; and dispose the tissue properly into the garbage bag in the dustbin;
 - f. Practice social distancing of at least 1 meter apart at all times; and
 - g. If you experience fever, dry cough and breathing difficulty, please seek medical attention immediately or you may contact CPRC for advice and medical attention at 03-8881 0200, 03-8881 0600 or 03-8881 0700 or cprc@moh.gov.my. Please keep the Management informed of the matter.
 - h. Please inform the Management immediately if there is a confirmation of COVID-19 case.
4. We truly care for your health, wellbeing and safety, and your cooperation is very highly appreciated to ensure that everyone is free of COVID-19.

Thank you.

The Management,
<insert name of management body>

(* Delete whichever is not relevant.

NOTE: Please amend the notice to suit your site situation.

IMPORTANT NOTICE

To : Dear Valued Owners and *Residents/*Occupiers
From : Management Office
Date : <date of notice>
Subject : Confirmed case of COVID-19 at <name of block or tower>

1. The Management deeply regrets to inform you that an occupant of <name of block or tower and building> was tested positive for COVID-19 on <date> and had been taken by ambulance to hospital.
2. The Crisis Preparedness And Respondent Centre (CPRC) has been duly notified and the Management has taken measures to sanitize all frequently accessed areas of the common property, focusing on **all frequently touched surfaces**, using commercial grade disinfectants.
3. Then Management is arranging for a **deep cleaning** to be carried out at all common areas with priority to the areas that the infected person had accessed by tomorrow, at first possibility.
4. The Management is tracking access card logs and CCTV footage to continue to trace the infected person's previous movements and to disinfect those areas accordingly.
5. We would like to request all *residents/*occupiers to take note and ensure everyone checks themselves and self-quarantine if necessary.
6. All *residents/*occupiers are advised to declare to the Management if they are at risk, or have recently returned from overseas travel or been in contact with a Person Under Investigation (PUI).
7. When in quarantine, please do not leave your unit, and the *concierge staff/*security can arrange for your deliveries to be sent up to your unit if you inform the Management that you are in quarantine.
8. You are advised to follow this guidance at all times for your own safety and well-being:-
 - a. Obey the Movement Control Order (MCO) to stay at home and remain indoor at all times, unless necessary to head out.
 - b. Wear a 3-ply face mask when you are outdoor to seek medical attention or to procure food and essential items.
 - c. Practise good hand hygiene by frequently washing your hands with soap for at least 20 seconds or sanitizing with hand sanitizers of 70% alcohol content.
 - d. Never touch your face (nose, eyes and mouth) until your hands are washed or sanitized.
 - e. Always cover your mouth and nose with a tissue paper when you cough or sneeze; and dispose the tissue properly into the garbage bag in the dustbin.
 - f. Practice social distancing of at least 1 metre apart from other individuals at all times0
 - g. If you experience fever, dry cough, breathing difficulty and/or lost sense of smell or taste, please seek medical attention immediately or you may contact CPRC for advice and medical attention at 03-8881 0200, 03-8881 0600 or 03-8881 0700 or cprc@moh.gov.my.
9. We truly care for your health, well-being and safety; and your cooperation is very highly appreciated to ensure that everyone is free of COVID-19.

The Management
<Insert name of management body>

IMPORTANT NOTICE**SUBJECT: CONFIRMED CASE OF COVID-19**

1. Reference is made to our notice dated <insert date> under ref. <insert the ref. no. of the first notice> regarding the above captioned.
2. Please be informed that there will be an increased frequency in the sanitization of all the lifts and the common areas on a daily basis over the next 14 days and with special focus on <insert name of the affected block> where a COVID-19 case is confirmed.
3. Based on the advice of the Crisis Preparedness And Respondent Centre (CPRC), we strongly request that all the *residents / *occupiers in <insert name of the affected block> to carry out the following precautionary measures over the next 14 days:-
 - a. **Carry out self-quarantine and stay at home;**
 - b. **Practise social distancing of at least 1 metre apart and self-isolation;**
 - c. **Wear a 3-ply facemask at all times;**
 - d. **Practise good hand hygiene by frequently washing your hands with soap for at least 20 seconds or sanitizing your hands with hand sanitizers of 70% alcohol content;**
 - e. **Never touch your face (nose, eyes and mouth) until your hands are washed or sanitized;**
 - f. **Always cover your mouth and nose with a tissue paper when you cough or sneeze; and dispose the tissue properly into the garbage bag in the dustbin;**
 - g. **If you experience fever, dry cough and breathing difficulty, please seek medical attention immediately or you may contact CPRC for advice and medical attention at 03-8881 0200, 03-8881 0600 or 03-8881 0700 or cprc@moh.gov.my and keep the Management informed on your condition; and**
 - h. **Please inform the Management immediately if there is a confirmation of COVID-19 case.**
4. The *residents / *occupiers of the other blocks in <insert name of the strata development> are also advised to follow the precautionary measures for your own safety and wellbeing.
5. We truly care for your health, wellbeing and safety, and your utmost cooperation is greatly appreciated to ensure that there will be no COVID-19 cluster at <insert name of the strata development> and everyone is free of COVID-19.

Thank you.

The Management,
<Insert name of management body>

(*) Delete whichever is not relevant.

NOTE: Please amend the notice to suit your site situation.

IMPORTANT NOTICE

To : Dear Valued Owners and *Residents/*Occupiers
From : Management Office
Date : <date of notice>
Subject : Enhanced COVID-19 Response Plan

1. In response to the recent COVID-19 positive case in <name of block or tower and building>, the Management has decided to further ramp up the response plan for the building beginning <date>.
2. **Sanitization**
There will be increased frequency of sanitization in the lifts and common areas with special focus on <name of block> for the next 14 days.
3. **Disclosure to Management Office**
All at-risk *residents/*occupiers, anyone who has been in touch with a Patient Under Investigation (PUI), a PUI themselves, or recently returned from overseas travel, **MUST** disclose such circumstances to the management immediately by calling <management office number> or emailing <management email address>.
4. **Self-quarantine**
The management advises anyone who has been to <name of retail outlet> in the last 14 days to self-quarantine for the next 14 days. Please also inform management of your decision to quarantine, so that we may track the units under quarantine. When in quarantine, you are to remain within your unit. Please arrange for delivery of your necessities. The *concierge staff/*security can arrange for your deliveries to be sent up to your unit if you inform the management that you are in quarantine.
5. **Temperature checking at lobby and carpark entry**
The guards will begin limiting entry points to the lobbies and everyone who comes in will be screened their body temperature at the lift lobbies and carpark entrance. Anyone with a fever will be directed to a clinic or hospital.
6. Practice good hygiene and social distancing. As previously guided, please continue to:
 - a. Wash your hands regularly with soap or hand sanitizer;
 - b. Do not touch your face, eyes, nose and mouth until you have washed your hands;
 - c. Cover your mouth with tissue paper while coughing or sneezing;
 - d. Wear a medical mask in public to protect yourself;
 - e. *Residents/*Occupiers staying in <name of building> to self-quarantine after returning home from travelling; and
 - f. Please consult a doctor if you have any flu like symptoms such as fever, cough, sneezing breathing difficulties, loss of sense of smell or taste, or simply unwell.

Your cooperation and honesty are truly appreciated as we make it through this difficult time. We hope to work with the community to manage the safety and wellbeing of everyone and prevent any further infections within the community of <name of building>. We all play a part in ensuring that a safe outcome for all the *residents/*occupiers.

Thank you.

The Management,
<Insert name of management body>

(* Delete whichever is not relevant.

NOTE: Please amend the notice to suit your site situation.

IMPORTANT NUMBERS AND REFERENCES

Pengurusan Kes-Kes Positif 2019-nCoV

1 Disahkan positif melalui ujian makmal

2 Dimasukkan ke Wad Isolasi untuk rawatan (symptomatic treatment)

3 Jika wujud keperluan, ubat anti viral akan diberikan

4 Pengawasan berterusan pesakit yang dirawat di Wad Isolasi

5 Discaj - Sekiranya ujian ulangan adalah negatif dan amalkan cara hidup sihat

Terbitan: Kementerian Kesihatan Malaysia

myhealthkkm

MyHEALTH

CRISIS PREPAREDNESS AND RESPONSE CENTRE KEBANGSAAN (CPRC)

SUMBER: KEMENTERIAN KESIHATAN MALAYSIA

State	Contact Number
PERLIS	04 - 976 0712
PULAU PINANG	04 - 262 9902
PERAK	05 - 243 3962
SELANGOR	03 - 5123 7366/67
WP KL/PUTRAJAYA	03 - 2698 3757 03 - 2268 7301
NEGERI SEMBILAN	06 - 766 4940
MELAKA	06 - 234 5999 06 - 288 3019
JOHOR	07 - 238 2217
KEDAH	04 - 774 1174
KELANTAN	09 - 747 2089
TERENGGANU	09 - 622 9775 09 - 635 3752
PAHANG	09 - 570 7909 09 - 570 7910 09 - 570 7914

| NOMBOR TELEFON JABATAN KESIHATAN NEGERI

Negeri	No. Tel	Emel	Waktu Operasi	
			Hari Bekerja	Hari Minggu & Cuti Umum
Pulau Pinang	04-262 9902	epid_penang@moh.gov.my	8.00 pagi-5.00 petang	10.00 pagi-2.00 petang
Perak	05-243 3962	cprcprk@moh.gov.my	8.00 pagi-5.00 petang	10.00 pagi-2.00 petang
Sarawak	082-443248	cprc_sarawak@moh.gov.my	8.00 pagi- 5.00 petang	8.00 pagi- 5.00 petang
Kedah	04-774 1174	cprc_jknkedah@moh.gov.my	8.00 pagi-6.00 petang	8.00 pagi-12.00 tengahari
Negeri Sembilan	06-766 4940	cprcjkns@moh.gov.my	8.00 pagi-5.00 petang	9.00 pagi-1.00 petang
WP Labuan	087-596160	cprclabuan@gmail.com	8.00 pagi- 5.00 petang	8.00 pagi- 5.00 petang
Kelantan	09-747 2089	cprc_kel@moh.gov.my	8.00 pagi- 5.00 petang	9.00 pagi- 12.00 tengahari
Johor	07-238 2217	cprcjkj@moh.gov.my	8.00 pagi- 5.00 petang	8.00 pagi- 5.00 petang
Perlis	04-976 0712 019-2780408	cprcjkpl@moh.gov.my	8.00 pagi-5.00 petang	Beroperasi melalui pegawai atas panggilan
Selangor	03-5123 7366 03-5123 7367	cprc_sel@moh.gov.my	8.00 pagi-5.00 petang	9.00 pagi-1.00 tengahari
Terengganu	09-622 9775 09-635 3752	bgerakan.trg@moh.gov.my	8.00 pagi- 5.00 petang	9.00 pagi - 3.30 petang
Melaka	06-234 5999 06-288 3019	cprcmelaka@moh.gov.my	8.00 pagi- 5.00 petang	9.00 pagi-5.00 petang
WP Kuala Lumpur & Putrajaya	03-2698 3757 03-2268 7301	cprckl@moh.gov.my	8.00 pagi-5.00 petang	9.00 pagi-3.00 petang
Pahang	09-570 7910 09-570 7914 09-570 7909	cprc_pahang@moh.gov.my	8.00 pagi- 5.00 petang	9.00 pagi - 12.00 tengahari
Sabah	088-219455 088-512531 088-512533	sbhcprc@moh.gov.my	8.00 pagi- 5.00 petang	8.00 pagi- 5.00 petang

UKK MOH


#COVID-19




CRISIS PREPAREDNESS AND RESPONSE CENTRE (CPRC) KEBANGSAAN

Untuk sebarang pertanyaan berkenaan Novel Coronavirus (2019-nCoV) boleh hubungi :

For any inquiries regarding Novel Coronavirus (2019-nCoV), please contact :



Nombor Hotline

03 88810200

03 88810600

03 88810700

atau emel:
or email to us at:
cprc@moh.gov.my

UKK MOH

Contact Details of the National Crisis Preparedness & Response Centre (CPRC), Disease Control Division, the State Health Departments and Rapid Assessment Team (RAT) Representative of the District Health Offices.

National Crisis Preparedness and Response Centre (CPRC)

Disease Control Division
 Ministry of Health Malaysia
 Level 6, Block E10, Complex E
 62590 WP Putrajaya.

Fax No.: 03-8881 0400 / 0500
 Telephone No. (Office Hours): 03-8881 0300
 Telephone No. (After Office Hours): 013-6699 700
 E-mail: cprc@moh.gov.my
 (Cc: dr_norhayati@moh.gov.my and drwnoraini@moh.gov.my)

NO.	STATE
1.	<p>PERLIS</p> <p>The State CDC Officer Perlis State Health Department Lot 217, Mukim Utan Aji Jalan Raja Syed Alwi 01000 Kangar Perlis Telephone: +604-9773 346 Fax: +604-977 3345 E-mail: cprc.pls@moh.gov.my</p> <p>RAT Representative of the Kangar District Health Office: Dr. Zulhizzam bin Haji Abdullah (Mobile: +6019-4441 070)</p>
2.	<p>KEDAH</p> <p>The State CDC Officer Kedah State Health Department Simpang Kuala Jalan Kuala Kedah 05400 Alor Setar Kedah Telephone: +604-7741 170 Fax: +604-7742 381 E-mail: cprc_jknkedah@moh.gov.my</p> <p>RAT Representative of the Kota Setar District Health Office: Dr. Aishah bt. Jusoh (Mobile: +6013-4160 213)</p> <p>RAT Representative of the Kuala Muda District Health Office: Dr. Suziana bt. Redzuan (Mobile: +6012-4108 545)</p> <p>RAT Representative of the Kubang Pasu District Health Office: Dr. Azlina bt. Azlan (Mobile: +6013-5238 603)</p> <p>RAT Representative of the Kulim District Health Office: Dr. Sharifah Hildah Shahab (Mobile: +6019-4517 969)</p>

	<p>RAT Representative of the Yan District Health Office: Dr. Syed Mustaffa Al-Junid bin Syed Harun (Mobile: +6017-6920881)</p> <p>RAT Representative of the Sik District Health Office: Dr. Noorul Emilin bt. Abd Khalid (Mobile: +6012-4949 377)</p> <p>RAT Representative of the Pendang District Health Office: Dr. Shareh bin Shareh Azizan (Mobile: +6019-5427 871)</p> <p>RAT Representative of the Baling District Health Office: Dr. Hamizah bt. Mohd Sultan (Mobile: +6012-9648804)</p> <p>RAT Representative of the Padang Terap District Health Office: Dr. Latifah bt. A. Rahman (Mobile: +6019-5136 688)</p> <p>RAT Representative of the Bandar Baharu District Health Office: Dr. Natrah bt. Mohd Sa'ad (Mobile: +6013-3949 077)</p> <p>RAT Representative of the Langkawi District Health Office: Dr. Mohd Hisham bin Ahmad Kusairi (Mobile: +6013-3424 874)</p>
3.	PULAU PINANG
	<p>The State CDC Officer Pulau Pinang State Health Department Tingkat 35 & 37, KOMTAR 10590 Pulau Pinang Telephone: +604-2017 287 Fax: +604-2623 371 E-mail: epid_penang@moh.gov.my</p> <p>RAT Representative of the Timur Laut District Health Office: Dr. Vasantha Thiruvengadam (Mobile: +6016-4755 029)</p> <p>RAT Representative of the Barat Daya District Health Office: Dr. Liew Chiu Yee (Mobile: +6012-5448 408)</p> <p>RAT Representative of the Seberang Perai Utara District Health Office: Dr. Nik Normanieza bt. Nik Man (Mobile: +6019-9425 423)</p> <p>RAT Representative of the Seberang Perai Tengah District Health Office: Dr. Yusmawati bt. Mohd Yusof (Mobile: +6013-4411 973)</p> <p>RAT Representative of the Seberang Perai Selatan District Health Office: Dr. Noraishah bt. Jaafar (Mobile: +6012-4728 665)</p>
4.	PERAK
	<p>The State Surveillance Officer Perak State Health Department Jalan Panglima Bukit Gantang Wahab 30590 Ipoh Perak Telephone: +605-2433 962 / +605-2490 200 ext. 418 / 419 Fax: +605-2552 678 E-mail: cprcprk@moh.gov.my</p>

	<p>RAT Representative of the Perak Tengah District Health Office: Dr. Ariza bt. Abd Rahman (Mobile: +6019-5700 835)</p> <p>RAT Representative of the Hulu Perak District Health Office: Dr. Hj. Noor Asmah bt. Hj Ahmad Shah Azizi (Mobile: +6019-5407 409)</p> <p>RAT Representative of the Manjung District Health Office: Dr. Ling He Mey (Mobile: +6019-5565 609)</p> <p>RAT Representative of the Batang Padang District Health Office: Dr. Zainol Ariffin bin Mohammed (Mobile: +6019-5538 133)</p> <p>RAT Representative of the Kinta District Health Office: Dr. Hj. Noridah bt. Othman (Mobile: +6016-5576 740)</p> <p>RAT Representative of the Kuala Kangsar District Health Office: Dr. Marina bt. Kamaruddin (Mobile: +6013-5848 901)</p> <p>RAT Representative of the Larut, Matang & Selama District Health Office: Dr. Syahrizal bin Abdul Halim (Mobile: +6012-4457 978)</p> <p>RAT Representative of the Kampar District Health Office: Dr. Afzaninawati Suria bt. Yusof (Mobile: +6019-3332 295)</p> <p>RAT Representative of the Kerian District Health Office: Dr. Hj. Thaherah Nor Bt Mohd Kassim (Mobile: +6019-5788 339)</p> <p>RAT Representative of the Hilir Perak District Health Office: Dr. Malek Sazali bin Abd Razak (Mobile: +6012-3763 185)</p>
5.	SELANGOR
	<p>The State CDC Officer Selangor State Health Department Tingkat 9, 10, 11 & 17, Wisma Sunwaymas Lot 1, Persiaran Kayangan 40100 Shah Alam, Selangor Telephone: +603-5123 7366 Fax: +603-5123 7369 / 29 E-mail: cprc_sel@moh.gov.my</p> <p>RAT Representative of the Petaling District Health Office: Dr. Vicky Ayadurai (Mobile: +6012-2032 012)</p> <p>RAT Representative of the Klang District Health Office: Dr. Nazrila Khairizan bt. Nasir (Mobile: +6013-3659 105)</p> <p>RAT Representative of the Gombak District Health Office: Dr. Ruziyah bt. Omar (Mobile: +6013-5336 505)</p> <p>RAT Representative of the Hulu Langat District Health Office: Dr. Mohd Nasir Bin Habib (Mobile: +6014-2853 721)</p> <p>RAT Representative of the Kuala Langat District Health Office: Dr. Nor Azila bt. Mohd Isa (Mobile: +6012-2390 434)</p> <p>RAT Representative of the Sepang District Health Office: Dr. Fuziah bt. Peinin (Mobile: +6017-6451 950)</p>

	<p>RAT Representative of the Hulu Selangor District Health Office: Dr. Nor Anizah Muzaid (Mobile: +6012-6260 973)</p> <p>RAT Representative of the Kuala Selangor District Health Office: Dr. Noraliza bt. Md Zain (Mobile: +6019-3547 684)</p> <p>RAT Representative of the Sabak Bernam District Health Office: Dr. Mohd Khairi bin Mohd Noor (Mobile: +6012-2587 994)</p>
6.	WP KUALA LUMPUR & PUTRAJAYA
	<p>The State CDC Officer Kuala Lumpur FT Health Department Jalan Cenderasari 50590 Kuala Lumpur Telephone: +603-2268 7333 Fax: +603-2268 7555 E-mail: cprckl@moh.gov.my</p> <p>RAT Representative of the Titiwangsa Health Office: Dr. Hajah Mahanim bt. Md. Yusof (Mobile: +6013-9336 331)</p> <p>RAT Representative of the Lembah Pantai Health Office: Dr. Noraliza bt. Noordin Merican (Mobile: +6019-4575 815)</p> <p>RAT Representative of the Putrajaya Health Office: Dr. Othman bin Warrijo (Mobile: +6019-2349 557)</p> <p>RAT Representative of the Cheras Health Office: Dr. Husnina bt. Ibrahim (Mobile: +6019-2195 650)</p> <p>RAT Representative of the Kepong Health Office: Dr. Sophia bt. Mohd Ramli (Mobile: +6019-3302 975)</p>
7.	NEGERI SEMBILAN
	<p>The State CDC Officer Negeri Sembilan State Health Department Jalan Rasah 70300 Seremban Negeri Sembilan Telephone: +606-7641 326 Fax: +606-7617 924 E-mail: cdcjkns@moh.gov.my</p> <p>RAT Representative of the Jelebu District Health Office: Dr. Ariza bt. Zainudin (Mobile: +6013-9373 294)</p> <p>RAT Representative of the Jempol District Health Office: Dr. Mohamad Iqbal bin Mazeli (Mobile: +6019-2463683)</p> <p>RAT Representative of the Kuala Pilah District Health Office: Dr. Sharifah Nor bt. Ahmad (Mobile: +6013-3687 117)</p> <p>RAT Representative of the Port Dickson District Health Office: Dr. Lokman bin Rejali (Mobile: +6019-6000 357)</p> <p>RAT Representative of the Rembau District Health Office: Dr. Hamizar Iqbal bin Abd Halim (Mobile: +6019-9309 719)</p>

	<p>RAT Representative of the Seremban District Health Office: Dr. Ram Prasad Sinnaidu (Mobile: +6012-4475 453)</p> <p>RAT Representative of the Tampin District Health Office: Dr. Anizan bt. Abd Manaf (Mobile: +6013-6309 633)</p>
8.	MELAKA
	<p>The State Surveillance Officer Melaka State Health Department Tingkat 3,4 & 5, Wisma Persekutuan Jalan Business City, Bandar MITC 75450 Ayer Keroh Melaka Telephone: +606-2345 999 Fax: +606-2345 959 E-mail: cprcmelaka@moh.gov.my</p> <p>RAT Representative of the Alor Gajah District Health Office: Dr. Shazelin bt. Ali Pitchay (Mobile: +6013-3635 253)</p> <p>RAT Representative of the Jasin District Health Office: Dr. Noor Aizam bin Mohd Said (Mobile: +6013-6002 303)</p> <p>RAT Representative of the Melaka Tengah District Health Office: Dr. Salinah bt. Omar (Mobile: +6019-6648 771)</p>
9.	JOHOR
	<p>The State CDC Officer Johor State Health Department Jalan Persiaran Permai 81200 Johor Telephone: +607-2353 306 Fax: +607-2382 291 E-mail: epidjknjhr@moh.gov.my</p> <p>RAT Representative of the Batu Pahat District Health Office: Dr. Noorhaida bt. Ujang (Mobile: +6012-6350 191)</p> <p>RAT Representative of the Johor Bahru District Health Office: Dr. Norli bt. Rosli (Mobile: +6013-7275 912)</p> <p>RAT Representative of the Kluang District Health Office: Dr. Mohamad Nizam bin Hj.Subahir (Mobile: +6013-7049 510)</p> <p>RAT Representative of the Kota Tinggi District Health Office: Dr. Hjh. Norhamimah bt. Hj. Abdullah (Mobile: +6019-7237 740)</p> <p>RAT Representative of the Kulaijaya District Health Office: Dr. Abdul Rahim B. Abdullah (Mobile: +019-7591 956)</p> <p>RAT Representative of the Ledang District Health Office: Dr. Hjh. Zaharah bt. Mohd Salleh (Mobile: +6012-7126 549)</p> <p>RAT Representative of the Mersing District Health Office: Dr. Haidar Rizal B. Toha (Mobile: +6019-7148 511)</p>

	<p>RAT Representative of the Muar District Health Office: Dr. Shahril Azian bin Masrom (Mobile: +6016-7114 877)</p> <p>RAT Representative of the Pontian District Health Office: Dr. Norasikin Mahdan (Mobile: +6019-7877 216)</p> <p>RAT Representative of the Segamat District Health Office: Dr. Mohtar Bin Pungut @ Hj Ahmad (Mobile: +6013-6228 117)</p>
10.	PAHANG
	<p>The State CDC Officer Pahang State Health Department Jalan IM4, Bandar Indera Mahkota 25582 Kuantan Pahang Darul Makmur Telephone: +609-5707 909 Fax: +609-5707 911 E-mail: cdcpahang@moh.gov.my</p> <p>RAT Representative of the Cameron Highland District Health Office: Dr. Muhd Rafiq bin Mohd Kasri (Mobile: +6013-3501 979)</p> <p>RAT Representative of the Jerantut District Health Office: Dr. Hj. Wan Abd Rahim bin Hj. Wan Muhamad (Mobile: +6019-9308 770)</p> <p>RAT Representative of the Rompin District Health Office: Dr. Mohd Rahim bin Sulong (Mobile: +6013-9865 179)</p> <p>RAT Representative of the Lipis District Health Office: Dr. Rahimi bt. Hassan (Mobile: +6019-9321 037)</p> <p>RAT Representative of the Bera District Health Office: Dr. Idilia bt. Sahar (Mobile: +6 019-9503 368)</p> <p>RAT Representative of the Raub District Health Office: Dr. Raja Mohd Azim bin Raja Haron (Mobile: +6012-9851 583)</p> <p>RAT Representative of the Temerloh District Health Office: Dr. Azuwa bin Haji Arif (Mobile: +6 019-9556 200)</p> <p>RAT Representative of the Kuantan District Health Office: Dr. Hj. Amirullah bin Mohd Arshad (Mobile: +6019-3466 643)</p> <p>RAT Representative of the Maran District Health Office: Dr. Suzana bt. Mohd Hashim (Mobile: +6017-9869 993)</p> <p>RAT Representative of the Bentong District Health Office: Dr. Hj. Rosli bin Ismail (Mobile: +6019-9114 455)</p> <p>RAT Representative of the Pekan District Health Office: Dr. Siti Zubaidah bt. Abd Rahman (Mobile: +6012-9839 027)</p>
11.	TERENGGANU
	<p>The State CDC Officer Terengganu State Health Department Tingkat 5, Wisma Persekutuan Jalan Sultan Ismail</p>

	<p>20909 Kuala Terengganu Terengganu Telephone: +609-6222 866 / 3709 / 2749 Fax: +609-6248367 E-mail: bgerakan.trg@moh.gov.my</p> <p>RAT Representative of the Besut District Health Office: Dr. Razan bt. Ab. Samat (Mobile: +6016-9396 031)</p> <p>RAT Representative of the Dungun District Health Office: Dr. Sentil Kumar A/L Kandasamy (Mobile: +6016-2460 966)</p> <p>RAT Representative of the Hulu Terengganu District Health Office: Dr. Nik Nor Ronaidi bin Nik Mahdi (Mobile: +6012-9893 443)</p> <p>RAT Representative of the Kemaman District Health Office: Dr. Nor Aizan bt. Abdullah (Mobile: +6017-9770 445)</p> <p>RAT Representative of the Kuala Terengganu District Health Office: Dr. Norhana bt. Yazid (Mobile: +6 019-9365566)</p> <p>RAT Representative of the Marang District Health Office: Dr. Azlihanis bt. Abdul Hadi (Mobile: +6019-9388 448)</p> <p>RAT Representative of the Setiu District Health Office: Dr. Rohayati bt. Muda (Mobile: +6109-9340 049)</p>
12.	KELANTAN
	<p>The State Surveillance Officer Kelantan State Health Department Jalan Mahmood 15200 Kota Bahru Kelantan Telephone: +609-747 2089 Fax: +609-7480 945 E-mail: cprc_kel@moh.gov.my</p> <p>RAT Representative of the Gua Musang District Health Office: Dr. Ahmad Faris bin Hj. Awang (Mobile: +6012-9217 008)</p> <p>RAT Representative of the Tanah Merah District Health Office: Dr. Abdullah bin Yunus (Mobile: +6013-9225 545)</p> <p>RAT Representative of the Jeli District Health Office: Dr. Che Kamaludin bin Che Ahmad (Mobile: +6019-9179 027)</p> <p>RAT Representative of the Tumpat District Health Office: Dr. Ahmad Syaarani bin Yasin (Mobile: +6019-9927 155)</p> <p>RAT Representative of the Pasir Mas District Health Office: Dr. Yelmizaitun bt. Osman (Mobile: +6013-9814 767)</p> <p>RAT Representative of the Pasir Puteh District Health Office: Dr. Zawiyah bt. Dollah (Mobile: +6019-9314 497)</p> <p>RAT Representative of the Kuala Krai District Health Office: Dr. Noor Aini bt. Ibrahim (Mobile: +6019- 9618 172)</p>

	<p>RAT Representative of the Bachok District Health Office: Dr. Junaidi bin Djoharnis (Mobile: +6012-9580814)</p> <p>RAT Representative of the Machang District Health Office: Dr. Che Ghani bin Che Soh (Mobile: +6013-9972 200)</p> <p>RAT Representative of the Kota Bharu District Health Office: Dr. Nik Khairol Reza bin Md Yazin (Mobile: +6012-9006 132)</p>
13.	SARAWAK
	<p>The State Surveillance Officer Sarawak State Health Department Jalan Diplomatik Off Jalan Bako 93050 Kuching Sarawak Telephone: +6082-443 248 Fax: +6082-443 098 E-mail: opsroom_jkns@moh.gov.my</p> <p>RAT Representative of the Bintulu Health Office: Dr. Shafizah Ahmad Shafei (Mobile: +6019-384 2 370)</p> <p>RAT Representative of the Kuching Health Office: Dr. Kamarudin bin Lajim (Mobile: +6013-8014 332)</p> <p>RAT Representative of the Limbang Health Office: Dr. Norliza bt. Hj Jusoh (Mobile: +6013-8163 163)</p> <p>RAT Representative of the Kapit Health Office: Dr. Mohd. Shahril Yong B. Abdullah (Mobile: +60111-9376 039)</p> <p>RAT Representative of the Sibu Health Office: Dr. Muhamad Rais Abdullah (Mobile: +6017-8030 839)</p> <p>RAT Representative of the Marudi Health Office: Dr. Veronica Lughah (Mobile: +6019-6061 847)</p> <p>RAT Representative of the Simunjan Health Office: Dr. Fatin Amalina Ibrahim (Mobile: +6010-9833 769)</p> <p>RAT Representative of the Lawas Health Office: Dr. Azrine Bin Aziz (Mobile: +6013-8360 350)</p> <p>RAT Representative of the Daro Health Office: Dr. Haji Osman Haji Rafaie (Mobile: +6013-8014 700)</p> <p>RAT Representative of the Sri Aman Health Office: Dr. Noor Rafizah Aminah Bt. Aziz (Mobile: +6012-2110 315)</p> <p>RAT Representative of the Sarikei Health Office: Dr. Mark Wong (Mobile: +6016-8707 047)</p> <p>RAT Representative of the Samarahan Health Office: Dr. Sharifah Norashikin (Mobile: +6019-8868 548)</p>

	<p>RAT Representative of the Mukah Health Office: Dr. Haji Osman Haji Rafaie (Mobile: +6013-8014 700)</p> <p>RAT Representative of the Miri Health Office: Dr. Veronica Lugah (Mobile: +6019-6061 847)</p> <p>RAT Representative of the Betong Health Office: Dr. Jeffery Ak Stephen (Mobile: +6019-8189 183)</p>
14.	SABAH
	<p>The State CDC Officer Sabah State Health Department Tingkat 1, 3 & 6, Rumah Persekutuan Jalan Mat Salleh 88590 Kota Kinabalu Sabah Telephone: +6088-219 455 / 263 651 Fax: +6088-219 461 / 217 740 E-mail: sbhccprc@moh.gov.my</p> <p>RAT Representative of the Kunak District Health Office: Dr. Dahliah Ali (Mobile: +6012-3955 021)</p> <p>RAT Representative of the Beaufort District Health Office: Dr. Aklil Bin Muhammad (Mobile: +6010-2204 098)</p> <p>RAT Representative of the Keningau District Health Office: Dr. Sarah Marilyn Amin (Mobile: +6016-8780 685)</p> <p>RAT Representative of the Kinabatangan District Health Office: Dr. Ng Chong Kiat (Mobile: +6016-6650 397)</p> <p>RAT Representative of the Kota Belud District Health Office: Dr. Fiona Vincent Bizini (Mobile: +6014-320 0540)</p> <p>RAT Representative of the Kota Kinabalu District Health Office: Dr. Khalid Mokti (Mobile: +6012-3900 745)</p> <p>RAT Representative of the Kota Marudu District Health Office: Dr. Nik Dewi Delina Bt. Mohd. Kamil (Mobile: +6012-9122 554)</p> <p>RAT Representative of the Kuala Penyu District Health Office: Dr. A.L. Liza Bt Latip (Mobile: +6019-2166 786)</p> <p>RAT Representative of the Lahad Datu District Health Office: Dr. Abdul Rahman Bin Mansor (Mobile: +6012-5373 501)</p> <p>RAT Representative of the Nabawan District Health Office: Dr. Fong Hui Chyi (Mobile: +019-8236 572)</p> <p>RAT Representative of the Papar District Health Office: Dr. Shameer Khan Sulaiman (Mobile: +6017-3076 602)</p> <p>RAT Representative of the Pitas District Health Office: Dr. Hazwani Hanum Bt. Hashim (Mobile: +6017-7641 553)</p>

	<p>RAT Representative of the Putatan District Health Office: Dr. Anisah Jantim (Mobile: +6019-8202 498)</p> <p>RAT Representative of the Ranau District Health Office: Dr. Wong Yoke Kong (Mobile: +6012-5475 613)</p> <p>RAT Representative of the Semporna District Health Office: Dr. Mohd Fadhil Bin Abd Rahman (Mobile: +60139725 633)</p> <p>RAT Representative of the Sipitang District Health Office: Dr. Benny Krisnanda (Mobile: +6016-8114 506)</p> <p>RAT Representative of the Tambunan District Health Office: Dr. Evelyn Sunggip (Mobile: +6019-8047 715)</p> <p>RAT Representative of the Tawau District Health Office: Dr. G. Navindran (Mobile: +6013-8861 797)</p> <p>RAT Representative of the Tenom District Health Office: Dr. Koo Jian Wei (Mobile: +6012-4293 086)</p> <p>RAT Representative of the Tongod District Health Office: Dr. Yap Eng Hern (Mobile: +6016-6736 400)</p> <p>RAT Representative of the Beluran District Health Office: Dr. Fiona Vincent Bizini (Mobile: +6014-3200 540)</p> <p>RAT Representative of the Kudat District Health Office: Dr. Hanisah Binti Hamzah (Mobile: +6016-8419 414)</p> <p>RAT Representative of the Penampang District Health Office: Dr. Rosila Bt. Yahaya (Mobile: +019-3385 982)</p> <p>RAT Representative of the Sandakan District Health Office: Dr. Zulhafizi Bin Pandak Idris (Mobile: +6017-3800 078)</p> <p>RAT Representative of the Tuaran District Health Office: Dr. George Matthew (Mobile: +6016-8150 492)</p>
15.	WP LABUAN
	<p>The State CDC Officer Labuan FT Health Department P. O. Box 80832 87018 WP Labuan Telephone: +6087-596 000 Fax: +6087-410 972 E-mail: cdclabuan@moh.gov.my</p> <p>RAT Representative of the Labuan District Health Office: Dr. Ismail Ali (Mobile: +6019-6201 377)</p>

[The rest of this page has been intentionally left blank]

Diagnosis & Screening of Coronavirus.

Introduction

The emergence of the mysterious virus called 2019 Novel Coronavirus has sent the world population into a panic state. As a result, hospitals and clinics are crowded with patients especially those with respiratory symptoms. So, everyone must have been wondering, how do the doctors diagnose this disease? It is considerably new. How can we develop the test so quickly?

Clinical Diagnosis

Most of the time, even for a disease that has the most advanced and specific test, a lot of them can be pre-diagnosed with clinical pictures. Doctors will assess the patients based on history, clinical symptoms and signs on examination. If the patient is found to be at risk based on history and shows suspected symptoms and signs, then they will be sent for further investigation to confirm the diagnosis.

In the case of the Wuhan Virus or Novel Coronavirus 2019 (COVID-19), an important background history includes travel history to China, sick contact and also food consumption, especially exotic food such as wild animals or raw meat, seafood and poultry. Symptoms are mostly non-specific, which are mainly fever and respiratory symptoms. However, patients can also have other symptoms such as headache, diarrhoea, and vomiting. Clinical signs that doctors usually look out for are physical signs such as patient's breathing patterns, the colour of their lips and any lethargic appearance. The patient's vital signs such as temperature, oxygen saturation, pulse, and breathing rate are also important. Doctors will listen to the lungs to check for any possible signs of pneumonia.

Lab diagnosis

If a symptomatic patient is suspected of this infection, few samples are needed to be sent to the laboratory. The samples are required for 2 main tests as follow:

1. Reverse Transcriptase - Polymerase Chain Reaction Test (RT-PCR)

2 samples are needed for this test which are from the lower respiratory tract of our lungs and the other is from the upper respiratory tract. The first sample can be obtained if the patient is able to cough out sputum. Otherwise, a more invasive technique may be needed such as aspiration or alveolar lavage. The second sample from the upper respiratory tract can be obtained by the swab test. This is usually obtained by a swab sample from the nasopharyngeal and oropharyngeal area.

2. Serology Test

Serology test which requires blood sampling will be obtained on day 5-8 after a patient presented with symptoms or upon discharge from hospital.

3. Other routine tests

Another routine test such as infective and inflammatory markers may also be done such as full blood count, C-Reactive Protein (CRP) and Erythrocyte Sedimentation Rate (ESR).

Screening

According to the Ministry of Health protocol, all patients that visit any healthcare facilities should be screened for COVID-19 at triage. Currently, there is no rapid test available to screen for this virus. At the triage counter, a risk assessment will be conducted. The criteria for a patient to be suspected of COVID 2019 are:

A person with fever AND clinical sign/symptoms suggestive of pneumonia OR severe respiratory infection with breathlessness AND had history of travel to or reside in Mainland China within the last 14 days; OR close contact with a confirmed case of COVID-19.

Source: [KKM COVID-19 protocol](#)

Screening at travel borders & airports

As we all know, this infection originates from China and is spread from human to human as they travel from China to another country. Therefore, screening is conducted at the airport and at the border to prevent further spread. Travellers and flight crews arriving from China are screened for fever. Those without fever will be sent home with a health alert card while the suspected person will be sent to a health screening area for further assessment.

* Source from <https://www.doctoroncall.com.my/coronavirus/diagnosis-screening>

[The rest of this page has been intentionally left blank]

Frequently Asked Questions on COVID-19 Tests.**Q: Can my family and I claim COVID-19 screening expenses from our Insurance or Takaful providers?**

Yes. We are pleased to announce that under the National Economic Stimulus Package unveiled by our Honorable Prime Minister on 27/March/2020, Insurance and Takaful companies are now required to **bear COVID-19 screening test costs of up to RM 300 each** for their policyholders.

Q: How do we determine prices for our Home COVID-19 Screening Tests?

The Home Covid-19 Screening Test is a complex and highly laborious process undertaken by our fully-qualified medical and lab staff. Samples will be collected directly by our MOH-certified doctors who will meet you at your desired location. Due to the contagious risks from COVID-19, our doctors and lab professionals are required to wear protective gears at all times when handling sample / carrying out sampling. The process also involves high amounts of other unique consumables and specialised equipment. All of this means COVID-19 testing costs are not cheap.

By way of comparison, the MOH is charging RM 500.00 for WALK-IN PATIENTS. Only those who meet certain criteria (e.g. have been in close contact with verified infected patients) are entitled to free testing at the MOH. You can find out more about MOH's comments to coronavirus testing [here](#).

In comparison, at Doctor2U, the services we provide include bringing tests straight to your doorstep, to your convenience and safety. You will not need to travel and wait at the hospital, or trouble your loved-ones to bring you there and risk possible contagion.

We understand that healthcare costs are escalating in this day and age and will continue our very best to provide competitive rates to people who require medical assistance. Hence, for a period of time we are providing cheaper rates to families testing in a group.

Q: How long does it take to get the result?

Upon collection, the test result will be ready within 3-5 days (Kindly note that due to the recent surge in demand, there may be slight delays - we will try our level best to adhere to this TAT).

Q: What is your coverage area?

Our professional medical team is able to collect your sample in Kuala Lumpur, Selangor, Penang (only Georgetown), Johor (only Johor Bahru), Perak (only Ipoh), Kedah (only Alor Setar) and Negeri Sembilan (only Seremban and Nilai).

Q: Who should get tested?

We advise you to speak to our professional Doctor immediately or contact Local Health Authority for further verification about your condition and required action.

Q: Where can I get FREE testing?

Ministry of Health (MOH), Malaysia will only provide a free testing in authorised health facilities if you meet their criteria of testing and/or have been identified for testing.

Q: Who will be conducting the Home Visit COVID-19 Tests?

We will send a fully qualified doctor to your doorstep for the complete sample collection.

Q: How do we activate Doctor2U if we have a patient requesting for this service?

1. Launch the Doctor2U Mobile App ([Android](#) or [iOS](#)).
2. Click on the (COVID-19) Slider on the header.
3. Choose "Request COVID-19 Home Sampling & Testing Service".
4. Fill up your information request accordingly.
5. Proceed to payment page and make payment accordingly.

Q: How is the response time i.e. How fast can the Doctor2U team send a medical team to a person's home/onsite to collect samples?

We are using same method as MOH KKM uses from supplier **Roche**, which is method recommended by WHO - [Click Here to Read](#) (refer to [Appendix "8"](#)).

Myeg - IgG & IgM testing

- Detect antibody which are produced **3-5 days** post infection
- Low sensitivity and specificity compared to DNA testing

BP - ISO thermal amplification DNA testing

- Detect current infection
- Higher sensitivity and specificity
- Good correlation with IMR confirmatory testing

* Source from <https://shop.doctor2u.my/covid19/main>

[The rest of this page has been intentionally left blank]

Statement



Roche statement on SARS-CoV-2 and COVID-19

Basel, 19 March 2020 (Update)

On Wednesday 11th March the World Health Organization (WHO) declared a pandemic in response to the COVID-19 outbreak. This is a serious health situation and we extend our sympathies to people who have lost loved ones, to patients and healthcare professionals. We recognise that the public and private sectors across the globe need to work together to help effectively manage this developing situation.

As a leader in diagnostics, Roche is committed to providing testing solutions for the world's most challenging healthcare emergencies. Our emergency response teams have been working to develop a diagnostics test which was [granted Emergency Use Authorization by the US Food and Drug Administration](#). It is also available in markets accepting the CE mark. Roche is committed to delivering as many tests as possible and is going to the limits of our production capacity.

While there are currently no approved treatment options for the treatment of COVID-19, Roche is actively involved in understanding the potential of our existing portfolio. Roche has confirmed initiation of a clinical trial, and is also collecting and compiling data from other, independently-led clinical trials that are taking place around the world.

Roche is working with and supporting the WHO and global and national non-governmental organisations, health authorities and the governments in affected countries to ensure people can get access to diagnostics and healthcare. In order to continue fulfilling this role Roche has implemented solid business continuity planning.

Roche advocates that people follow the steps outlined by the WHO and the US Center for Disease Control (CDC) to protect themselves and others from the virus.

About Roche

Roche is a global pioneer in pharmaceuticals and diagnostics focused on advancing science to improve people's lives. The combined strengths of pharmaceuticals and diagnostics under one roof have made Roche the leader in personalised healthcare – a strategy that aims to fit the right treatment to each patient in the best way possible.

Statement



Roche is the world's largest biotech company, with truly differentiated medicines in oncology, immunology, infectious diseases, ophthalmology and diseases of the central nervous system. Roche is also the world leader in in vitro diagnostics and tissue-based cancer diagnostics, and a frontrunner in diabetes management.

Founded in 1896, Roche continues to search for better ways to prevent, diagnose and treat diseases and make a sustainable contribution to society. The company also aims to improve patient access to medical innovations by working with all relevant stakeholders. More than thirty medicines developed by Roche are included in the World Health Organization Model Lists of Essential Medicines, among them life-saving antibiotics, antimalarials and cancer medicines. Moreover, for the eleventh consecutive year, Roche has been recognised as one of the most sustainable companies in the Pharmaceuticals Industry by the Dow Jones Sustainability Indices (DJSI).

The Roche Group, headquartered in Basel, Switzerland, is active in over 100 countries and in 2019 employed about 98,000 people worldwide. In 2019, Roche invested CHF 11.7 billion in R&D and posted sales of CHF 61.5 billion. Genentech, in the United States, is a wholly owned member of the Roche Group. Roche is the majority shareholder in Chugai Pharmaceutical, Japan. For more information, please visit www.roche.com.

All trademarks used or mentioned in this release are protected by law.

Roche Group Media Relations Phone: +41 61 688 8888 / e-mail: media.relations@roche.com

- Nicolas Dunant (Head)
- Patrick Barth
- Daniel Grotzky
- Karsten Kleine
- Nathalie Meetz
- Barbara von Schnurbein

[The rest of this page has been intentionally left blank]

PANDUAN DISINFEKSI & PEMBERSIHAN DI SURAU/MASJID

PEMERSIHAN LANTAI & PERMUKAAN PERALATAN

- Sekurang-kurangnya 2 kali sehari
- Disinfektan : Cecair Peluntur Komersial atau cecair mengandungi 70% Alkohol



PERMUKAAN KERAP DISENTUH



PERALATAN

- Penutup muka & hidung
- Mop
- Baldi
- Sarung tangan
- Kain Lap



PERALATAN

- Vacum cleaner
- Botol spray
- Air
- Sarung tangan getah
- Penutup muka & hidung

RENDAM PAKAIAN/TELEKUNG & PERALATAN LAIN

- Sekurang-kurangnya 30 minit. Perlu dibilas dan dikeringkan
- Disinfektan : Cecair Peluntur Komersial



PERALATAN

- Air
- Sarung tangan
- Penutup muka & hidung



PERMAIDANI

- Permaidani perlu divakum terlebih dahulu
- Sekurang-kurangnya 2 kali sehari disemur menggunakan botol spray
- Disinfektan : Cecair Peluntur Komersial



Cecair Peluntur komersial hendaklah mengandungi sekurang-kurangnya 5% kepekatan **Sodium Hypochlorite (RUJUK LABEL)** pada botol cecair peluntur komersial). Bancuhan tidak boleh disimpan kerana keberkesanan akan berkurangan setelah digunakan atau bercampur dengan bahan organik. **Pastikan anda tidak menambah bahan lain untuk mengelakkan tindak balas yang tidak diinginkan.**



LEGAL RAMIFICATIONS.

Legal ramifications for not providing honest and accurate information to the authority concerning overseas travel history, close contact with COVID-19 cases or their attendance at large gatherings.

- (1) The [World Health Organization \(WHO\)](#) has declared COVID-19 as a pandemic on 11 March 2020, and YB Dato' Sri Dr. Adham bin Baba, the Minister of Health Malaysia, had on 16 March 2020 declared that COVID-19 as an infectious disease via [federal gazette declaration P.U.\(A\) 87](#), effectively classifying COVID-19 as a "life threatening microbial infection".
- (2) The legal ramifications of the Minister's declarations empower the Attorney General Chambers of Malaysia (AGC) to prosecute recalcitrant individuals under the [Prevention and Control of Infectious Diseases Act 1988 \[Act 342\]](#) (PCIDA) and secondly, if not more importantly, for offence under the [Penal Code \[Act 574\]](#).

Our Legal Duties.

- (3) It is our legal and social responsibility to disclose honestly and accurately, all pertinent information concerning our overseas travel history, our close contact with any confirmed COVID-19 patient, and our attendance at any large gatherings without any reservation.
- (4) Any action from a person that results in someone else being infected, be they, family, friends or strangers, carries legal ramifications and here are some array of charges one could face should the person challenge the might of the law.

Case scenario no.1.

- (5) If a COVID-19 patient knowingly or has reasonable grounds to believe that his action would spread the virus to others, that tantamount to **an offence under Section 12 of the PCIDA**.
- (6) Omitting to give information or giving false information to a public servant (in this case a doctor), renders you open to facing charges under **Sections 176 or 177 of the Penal Code**.
- (7) Conviction on any of these charges brings about penalties of **fines or imprisonment for terms up to 12 months**.

Case scenario no.2.

- (8) A confirmed COVID-19 patient choosing to cough in the direction of another within a one-meter range may find themselves liable to face assault charges under **Section 351 of the Penal Code**.
- (9) That could render you liable to pay a **fine up to RM1,000.00 or imprisonment for up to three (3) months or both**.

Case scenario no.3.

- (10) Anyone exposed to COVID-19 who is instructed to self-quarantine must strictly comply with that order.
- (11) A choice to venture out to a public place is deemed to be a negligent act and likely to cause the spread of the virus to others.
- (12) The prosecution in such cases does not need to definitively prove that anyone was actually infected to secure a conviction, which consequently brings about a **maximum six (6) months' jail term and/or a fine**.

Case scenario no.4.

- (13) The actions of not fully and truthfully disclosing vital COVID-19 information to attending doctors that later proves to be the causal link to someone else's death may likely to be considered as a rash or negligent act but not amounting to homicide.
- (14) If that is the case, the offender, upon conviction for an offence under **Section 304A of the Penal Code**, brings about penalties of **fines or imprisonment for terms up to two (2) years or both.**

Case scenario no.5.

- (15) A COVID-19 exposed persons or patients who continue to defy orders to self-quarantine or provide honest and accurate COVID-19 related information when asked, and such refusal results in the infection and death of others.
- (16) Such blatant defiance bringing about grave and sometimes fatal consequences may trigger the harshest of charges to be brought, that of "murder" or "attempted murder" under the Penal Code – that under current Malaysian law, still **carries the death penalty on conviction** whilst attempted murder brings about a **20-year term of imprisonment.**
- (17) In addition to legal ramifications under the Malaysian law, always be mindful that breaching this duty of care may also result in a civil action, rendering the defendant liable to pay hefty financial compensation to victims or their families.

Therefore, the management implore to everyone to be honest and truthful on matters pertaining to your travel history and medical symptoms at all times.

We truly care for you wellbeing, health and safety and we too wish to flatten the curve sooner rather than later.

Let us work together as a community and play our role to make this possible.



#StayHome #DudukRumah #FlattenTheCurve #WeCare

#WeStayAtWorkForYou #YouStayAtHomeForUs