

**Information provided in response to letters dated 18 and 20 March from  
the Clerk to Select Committee to inquire into the handling of  
the Severe Acute Respiratory Syndrome outbreak by  
the Government and the Hospital Authority**

- (a) Whether Severe Community-Acquired Pneumonia cases reported before 13 March 2003, which were subsequently confirmed to be SARS cases, were included in the daily statistics; if so, how and where these cases were included.*

After the Prince of Wales Hospital (PWH) cluster surfaced on 11 March 2003 with 11 staff from Ward 8A on sick leave, the Government began briefing the media on the latest situation, and statistics on the number of hospital staff admitted to hospitals for respiratory tract infection were released to the public on a daily basis from 13 March. In the meantime, notwithstanding the absence of diagnostic tests, the Hospital Authority (HA) and Department of Health (DH) closely monitored the clinical conditions of hospital patients with pneumonia symptoms and collated their epidemiological information for the purpose of case identification. Figures on patients other than hospital staff were included in the daily statistics from 17 March onwards as more information became available. The daily statistics, which were jointly collected by HA and DH, were released after collating, analyzing and confirming the clinical symptoms and test results of the patients concerned, including some who had been admitted earlier.

Turning to the specific questions, eight Severe Community-Acquired Pneumonia (SCAP) cases reported before 13 March 2003 were subsequently confirmed to be SARS cases. From DH's records, these eight cases were included in the daily statistics during 17-24 March 2003. As explained in the above, they were included on the basis of clinical and epidemiological information.

- (b) Whether and how the cases of [REDACTED], his sister, his brother-in-law, the nurse of Kwong Wah Hospital (KWH) infected by [REDACTED] and the St Paul's Hospital (SPH) index patient (who was later transferred to Queen Mary Hospital) were included in the statistics, and if so, under which day(s) were their cases included.*

[REDACTED] and his brother-in-law were among the SCAP cases reported before 13 March 2003. Please refer to (a) above for the required information.

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██████████'s sister was not a SARS case and was not included in the daily statistics. For further details, please refer to (d) - (f) below.

As regards the case of the KWH nurse which was related to ██████████<sup>AA</sup>, please see (c) below.

The SPH index patient was included in the daily statistics released on 18 March 2003.

*(c) Whether the number of 39 healthcare workers as at 13 March 2003 represents the cumulative total of infected healthcare workers up to that particular date*

The 39 healthcare workers reported in the daily statistics on 13 March 2003 represented the cumulative total number of staff members of hospitals who were then hospitalized for respiratory tract infection and reported. They included the infected nurse of KWH who had been working in the cubicle next to that of ██████████ at the Accident & Emergency Department on 22 February 2003.

- (d) In respect of the case of ██████████'s sister, whether samples have been collected;*  
*(e) Whether tests have been performed; and*  
*(f) Whether the results of the tests were negative for SARS.*

██████████'s sister was admitted to KWH on 1 March 2003. Specimens were taken from the patient for various tests including sputum for culture, acid fast bacilli and viral antigen; urine for culture; nasopharyngeal aspirate for culture; and serum for influenza, parainfluenza, adenovirus, respiratory syncytial virus, mycoplasma, chlamydia and legionella. The test results were all negative. She was in stable condition and was subsequently discharged on 6 March 2003 with antibiotics for chest infection. She was not a SARS case.

Department of Health  
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