

by Emergency Operations Center, Department of Disease Control

Thailand situation update on 19 June 2021

1. International Situation

	Total Number	Daily Increase	Case Fatality Rate (CFR)
Confirmed cases	178,635,077	402,743	
Deaths	3,867,805		2.17%

2. The Disease Situation in Thailand

Situation	Total Number*
Total number of new cases	3,667
Cases found in quarantine facilities/centers (Imported)	32
Cases found in prisons	435
Cases infected in Thailand (Local transmission)	2,095
Cases found from active case finding (Local transmission)	1,105
Total number of confirmed cases	214,449
Total recovered and discharged from hospitals Newly recovered and discharged from hospitals	181,358 (84.57%) 4,948
Undergoing treatment	31,482 (14.68%)
Deaths New deaths	1,609 (0.75%) 32



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Screening, Testing, and PUI	Total Number
Total number of people screened	
Ports of entry (Airports, ground ports, and seaports)	8,651,251
People renewing their passports at the Immigration Bureau, Chaeng Watthana	593,739
Total number of laboratory tests	2,602,262
People who met the PUI criteria	2,173,772
Returnees in quarantine facilities/centers	82,756
People who did not meet the PUI criteria	345,734
Total number of people who met the criteria of PUI	2,173,772
Detected from ports of entry	5,886
 Sought medical services on their own at hospitals (526,784 cases in private hospitals, and 1,641,014 cases in public hospitals) 	2,167,798
Notified by hotel residences, the Erawan Medical Center, local universities, tour groups, and U-Tapao	88

Remark: *PUI (Patients Under Investigation)

Characteristics of Deaths (1,609 deaths)	Wave: 1 Jan - 14 Dec 2020 (60 deaths)	Wave: 15 Dec 2020 - 31 Mar 2021 (34 deaths)	Wave: 1 April 2021 - now (1,515 deaths)			
Case Fatality Rate (CFR) in each age group						
• 20-39 years old	0.20%	0.02%	0.10%			
• 40-59 years old	2.10%	0.02%	0.91%			
60+ years old	6.50%	2.60%	7.41%			
Percentage of COVID-19 deaths that consist of elderly patients, patients with underlying diseases including obesity, or pregnant patients						
	64%	100%	91%			
Average number of days between the onset of symptoms and the date of receiving treatment (Minimum-Maximum)						
	3.5 (0 - 19)	1.2 (0 - 8)	3.3 (0 - 19)			



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3. Thailand Implementations

- The Center for COVID-19 Situation Administration relaxed the measures for filming television programs, dramas, movies and videos as follows:
 - 1. Require permission to use the filming area.
 - 2. Abide by the screening measures according to the guidelines.
 - 3. Arrange a timeline of participants of at least 7 days before the filming date.
 - 4. Require diagnostic testing for COVID-19 (SARS-CoV-2) by RT-PCR method within 72 hours of filming.
 - 5. The total number of participants cannot be more than 50 people.
 - 6. All operators and participants must wear masks at all times, except for in-scene actors in drama programs, contestants in a designated area in singing contests, only one participant can take off their mask at a time in game shows, and announcers who must have a partition and keep a distance of at least 2 meters from others or as determined appropriate by a public health officer.
 - 7. In public areas, all operators and participants are required to wear masks at all times in all cases.
- The Center for COVID-19 Situation Administration has reduced State Quarantine (SQ) facilities and Alternative Quarantine (AQ) facilities. The existing SQ facilities are provided for vulnerable groups so others will be quarantined in AQ facilities. The government of Thailand will provide Thai people free COVID-19 tests only, and the cost of quarantine accommodation must be paid by the person in quarantine. This will come into effect on July 1, 2021.
 - 1) The Ministry of Labor will determine the area and period of quarantine, and coordinate with the private sector regarding Thai workers working abroad.
 - 2) For groups of Thai nationals residing abroad who wish to return to Thailand and who are not able to handle expenses for quarantine facilities, the government will provide Organizational Quarantine (OQ) for people returning via land at border provinces in which SQ was supported by the government. Those who travel through air and sea will be quarantined in AQ at their own expense.

4. Risk Assessment of COVID-19 Situation

The global COVID-19 situation shows that there are more than 178 million cases with the number likely to decline to below 400,000 people per day. Thailand's situation showed that 185,586 COVID-19 patients have been confirmed. The daily number of infections in the community has tended to be around two thousand per day. Today, there were 3,200 new locally transmitted cases confirmed from 60 provinces and 435 new cases from prisons. The number of deaths from this outbreak wave has reached 1,515 with a mortality rate of 0.82% so the provinces should manage risk by preparing a coordinating center to refer to patients classified according to the disease severity for treatment in hospitals, field hospitals or appropriate specialized hospitals. For primary care health services for patients with mild symptoms, if the patient is over 60 years old or has underlying diseases such as high blood pressure, diabetes or obesity, there should be prompt treatment and close monitoring to prevent severe symptoms. The hospitals should organize a system to quickly refer patients



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with severe symptoms to hospitals that are appropriately equipped. Hospitals that can support intubation for patients should allocate resources, wards, isolation rooms, ventilators, and healthcare workers to provide health services for COVID-19 patients. These hospitals should designate certain wards or sections to separate COVID-19 patients from patients without COVID-19 to reduce the chance of spreading the infection in the hospital. The public health emergency operations centers in each area should facilitate allocation of resources within their jurisdiction to reduce heavy workloads on any specific hospital. Furthermore, there must be an emphasis for healthcare workers to strictly practice preventive measures while working in hospitals and to prevent personal infections outside of working hours to reduce the risk of infection to others.