

The Coronavirus Disease 2019 Situation

by Emergency Operations Center, Department of Disease Control

Thailand situation update on 9 July 2021

1. International Situation

	Total Number	Daily Increase	Case Fatality Rate (CFR)
Confirmed cases	186,364,135	470,213	
Deaths	4,027,009		2.16%

2.The Disease Situation in Thailand

Situation	Total Number
Total number of new cases	9,276
Cases found in quarantine facilities/centers (Imported)	23
Cases found in prisons	278
Cases infected in Thailand (Local transmission)	6,324
Cases found from active case finding (Local transmission)	2,651
Total number of confirmed cases	317,506
Total recovered and discharged from hospitals Newly recovered and discharged from hospitals	240,077 (75.61%) 3,928
Undergoing treatment	74,895 (23.59%)
Deaths New deaths	2,534 (0.80%) 72

Screening, Testing, and PUI	Total Number
Total number of people screened	
Ports of entry (Airports, ground ports, and seaports)	8,773,522
People renewing their passports at the Immigration Bureau, Chaeng Watthana	615,773
Total number of laboratory tests	2,830,606
People who met the PUI criteria	2,401,729



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Returnees in quarantine facilities/centers	83,143
People who did not meet the PUI criteria	345,734
Total number of people who met the criteria of PUI	2,401,729
Detected from ports of entry	6,101
Sought medical services on their own at hospitals (613,656 cases in private hospitals, and 1,781,884 cases in public hospitals)	2,395,540
Notified by hotel residences, the Erawan Medical Center, local universities, tour groups, and U-Tapao	88

Remark: *PUI (Patients Under Investigation)

Characteristics of Deaths (2,534 deaths)	Wave: 1 Jan - 14 Dec 2020 (60 deaths)	Wave: 15 Dec 2020 - 31 Mar 2021 (34 deaths)	Wave: 1 April 2021 - now (2,440 deaths)			
Case Fatality Rate (CFR) in each age group						
• 15 - 39 years old	0.20%	0.02%	0.11%			
• 40 - 59 years old	2.10%	0.02%	0.89%			
60+ years old	6.50%	2.60%	7.32%			
Under 1 year old (2 deaths)						
Percentage of COVID-19 deaths that consist of elderly patients, patients with underlying diseases including obesity, or pregnant patients						
	64%	100%	91%			
Average number of days between the onset of symptoms and the date of receiving treatment (Minimum-Maximum)						
	3.5 (0 - 19)	1.2 (0 - 8)	3.2 (0 - 19)			

3. Thailand Implementations

• The Ministry of Public Health (MoPH) cooperated with Bangkok Metropolis Administrator (BMA) in discussing methods to stop the spreading of COVID-19, for example, approving the use of Rapid Antigen Test, increasing number of beds to accommodate patients as many as possible by having The Department of Health Service Support assigned to design and select the places such as the passenger terminal 'Satellite' (SAT 1) in Suvarnabhumi Airport which has been authorized by the Ministry of Transport to be used as a location for setting up a field hospital similar to



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Bussarakham Hospital, and Having the National Institute of Emergency Medicine use their network of rescue vehicles to bring patients from home to the Nimibutr Pre-Admission Center for the primary treatment before referring them to places according to their symptoms level to alleviate the burden of the BMA.

- The Operating Center, Center for Covid-19 Situation Administration received an offer from the Ministry of Public Health to propose to the CCSA meeting with the Prime Minister as chairman. This new regulation that will come out will be effective only for the high-risk areas which is Bangkok Metropolitan Region, totaling 6 provinces, for a period of at least 2 weeks or 14 days. There is a restriction to leave home and go to risky places in order to reduce the movement of people. Also, work from home is required 100%, except for necessary service work or work related to utilities.
- The Disaster Relief Fund, Prime Minister's Office considered to support survival bags to people in provinces where the Provincial Communicable Disease Committee has ordered the closure of villages or communities, resulting in people and their families unable to provide consumer goods by assigning Inspector-General, Office of the Prime Minister to coordinate with the provincial governor in the area.

4. Risk Assessment of COVID-19 Situation

According to the COVID-19 situation between April 1 and July 9, 2021, 1,047 medical and public health personnel were infected (0.36 % of those infected during the period) and this trend is likely to continually increase although some of them received COVID-19 vaccines. 104 infected cases of medical personnel were found in April, 229 cases in May, and 423 cases in June. During July 1 - 9, 2021, 291 cases were found, 779 cases were female (74.4 percent), and average age was 36 years. The top 5 provinces with the most infected medical and PH staff are Bangkok (544 cases or 52 %), Songkhla (50 cases or 4.8 %), Trang (49 cases or 4.7%), Samut Prakan and Chiang Rai (35 cases each or 3.3%). It has also resulted in staff being quarantined for symptom monitoring and effected to the medical and public health services, therefore, medical and public health personnel are still considered as the highest risk group of infection due to their chance of being in close contact with COVID-19 patients. The risk can be reduced by emphasizing all infection prevention measures to prevent infection in hospitals and personal protective measures such as wear protective equipment, follow Universal precautions, especially personnel who have the opportunity to come into contact with patients without knowing the risk history including staff working in the emergency department, delivery room, operating room, hospital porter and PH officers who have to investigate patients or people exposed to high risk. All need to wash hands frequently both before and after touching the patients, regularly observe their own symptoms. If any suspected symptoms such as fever, cough, runny nose, sore throat, and loss of smell occur, one should get tested immediately and all are requested to get vaccinated as allocated to each hospital in order to reduce the risk of infection and severe symptoms. Any hospitals where infected staff were found should prepare a Business Continuity Plan in order to manage their manpower in dealing with absence of staff that are getting treatment and quarantined.