

Infection Control and Public Health Weekly Meeting

Thursday, January 20, 2021; 12:30 – 1:05 pm

COVID-19 and Public Health Updates (Health Commissioners)

- Region Six ... **1033** COVID-19 hospitals (47% inpts) / 212 ICU (20%) / 140 vents
- **33.5%** test results returned positive in 14 county region, highest so far in the pandemic
- Difficult to keep up with vaccine / booster requests due to staffing, including schools
- Hamilton County vaccine clinics down from 400 per day to around 100 per day, surprising lack of interest given the surge. Middletown has 16 scheduled today.
- Learning to live with the virus. Stigma of COVID may be behind us.

Percent of hospitalized patients who are COVID positive (7 day moving average)



COVID-19 Co-Infections

- Increasing number of patient with WITH Covid rather than FOR Covid, which complicates isolation and post-acute placement.
- Meta study found > 25% of all coinfections in COVID-19 patients were related to S. aureus, more than half of which were MRSA.
- Kettering doing MRSA swab if more than five days and nasal decolonization if positive. TriHealth routinely decolonizes for ICU / central line patient. UC screening for MRSA as well as COVID. Christ has seen more MRSA than usual. TriHealth case of MRSA bacteremia.
- Following co-infections in NHSN including MRSA and what point of admission
- Anecdotal evidence of patients receiving immune modulators, MRSA nasal screen and nasal bacitracin with chlorhexidine wash admission to ICU. Prolonged ventilation, BAL culture.
- Most significant factor is length of stay and immunosuppressing medications. Hospital acquired infection rates have increased in relation to COVID numbers.
- Emerging shortage of mupirocin. May use Nozin (alcohol based nasal sanitizer) for nasal decolonization.

Omicron Greater Risk for Young Than Other Variants?

- South Africa data show admission rate 49 percent higher amid omicron for children under age 4 compared to delta surges.
- Results may be affected by pediatric vaccination rates in South Africa. Until early November, children 12-17 years weren't eligible for vaccination, and those below 12 still aren't eligible.
- Local anecdotal observations do not correlate with greater severity of disease but many more mildly symptomatic cases.
- Issue of lack of vaccination for pediatrics or true increased severity with Omicron? Possible role for immune system response such as MIS-C.

CMS Final Rule COVID Vaccine Requirements

- 100% first dose, or 80% compliance by 2/14/22 with plans to get 100% compliant within 60 days
- 90% compliance by 3/15/22 with plans to get 100% compliant within 30 days
- 100% compliance by 4/15/22
- Starting **February 14**, federal, state, accreditation, and CMS-contracted surveyors will begin monitoring for full compliance subject to roll-out plan.

COVID-19 RT-PCR “No Cost” Ohio National Guard Testing Sites (Tiffany Mattingly)

- Crossroads Church in Mason (Jan 10, 900 tests / day) 7a – 7p
- UC MRI Center (Jan 11, 1,000 tests / day) do not need appointment
- Riverbend (Jan 12, Ethos Labs) 7a – 7p
- Montgomery (Jan 20) 8a – 4p
- Crossroads Church in Eastgate (pending, possibly Jan 24) anticipated 7a – 7p

Rotating Cincinnati Sites (800 tests walk-up per week)

One Gravity site shut down.

There are several non-approved testing sites. All sites on Test and Protect website have been vetted.

CDC Document for Ohio Long-Term Care Facilities (Chris Chirumbolo)

- Collaboration with CDC / ODH / Governor’s office for “communities with high risk transmission”
- Recent quarantine and isolation (general public guidance not applicable to residents who are unable to wear masks)
- Return of healthcare workers using CDC contingency / crisis staffing criteria
- Long term care facilities not permitted to reduce visitors. CMS does not allow limiting visitation.
- Almost half of residents / patients tested positive from visitation.
- 61% of positive staff cases fully vaccinated / most boosted

Outpatient Treatment Recommendations (in order of preference)

1. Paxlovid (nirmatrelvir 300 mg plus ritonavir 100 mg) orally twice daily for 5 days. Supply exhausted in the region (about 20 courses per health system)
2. Sotrovimab 500 mg, administered as a single intravenous (IV) infusion. Minimal doses until next Wednesday.
3. ~~Remdesivir 200 mg IV on Day 1, followed by remdesivir 100 mg IV on Days 2 and 3~~
4. Molnupiravir 800 mg orally twice daily for 5 days. Available through health system retail pharmacies. Using NIH triage priority.

Evusheld (tixagevimab / cilgavimab IM) for Immunosuppressed

- Dosing tixagevimab 150 mg / 1.5 ml IM injection PLUS cilgavimab 150 mg / 5 ml IM injection.
- Pre-exposure prophylaxis for whom vaccination not effective or not recommended
- Doses available locally.

OHSA Definition of Aerosol Generating Procedures

Bronchoscopy and BAL	Tracheal intubation/extubation
CPR	Sputum Induction
Manual ventilation	High Flow oxygen
Noninvasive ventilation (e.g., BiPAP, CPAP)	Nebulizer treatments
Open suctioning of airways	Tracheostomy
Medical/surgical/postmortem procedures using oscillating bone saws	Dental procedures involving: <ul style="list-style-type: none">○ Ultrasonic scalers, High-speed dental hand pieces, Air/water syringes, Air polishing, and air abrasion.

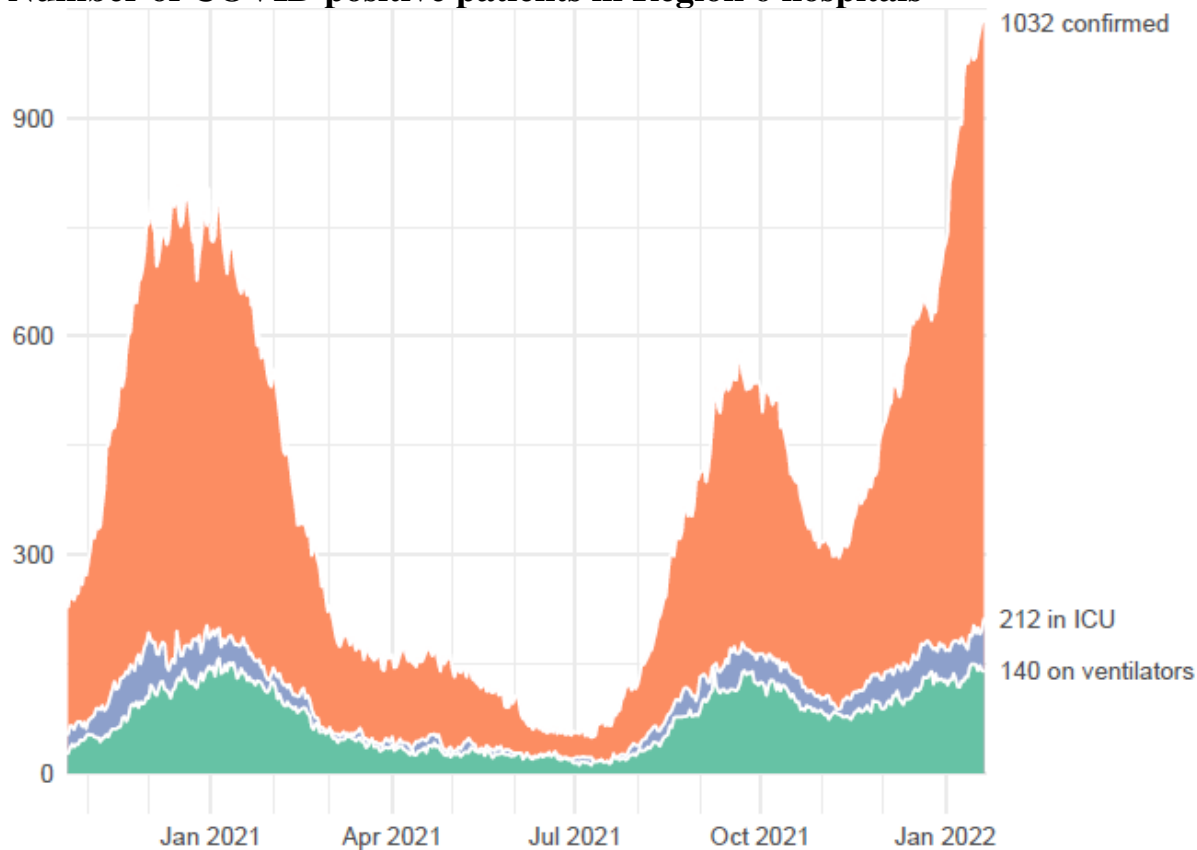
CDC Masking Guidance to Reduce Transmission

- CDC reported methods to increase medical procedure mask performance with 96% reduction in transmission / cumulative exposure
- Double masking: wearing a three-ply cloth mask over a three-ply medical procedure mask.
- Knotting and tucking: bringing together the corners and ear loops on each side, knotting the ear loops together where they attach to the mask, and then tucking in and flattening the resulting extra mask material to minimize side gaps.

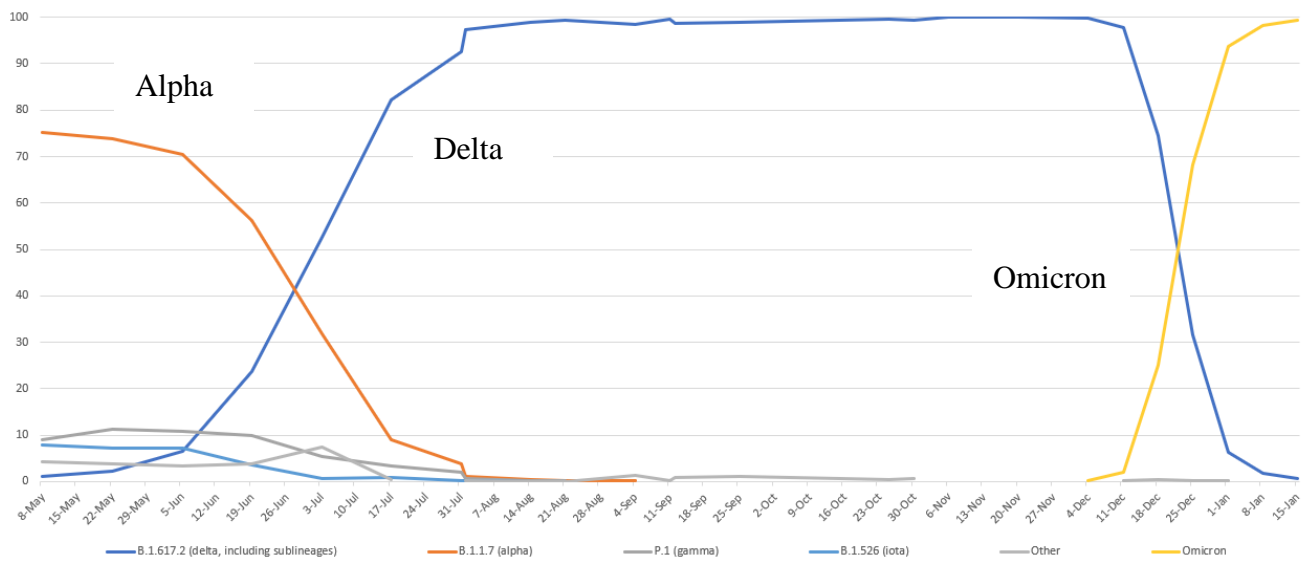


Next Zoom Call ... **Thursday, January 27** (12:30 – 1:00 pm)

Number of COVID positive patients in Region 6 hospitals



CDC Region 5 – Nowcast Variants (OH, MI, IN, IL, WI, MN)



Daily COVID-19 cases per million people

7-day average; Nov. 1, 2021, to Jan. 17, 2022

