

## VCHIP VDH COVID-19 Q&A Chat June 1, 2022

### Antigen Testing Under 2 years of age

C: I will say we have seen families who do antigen testing on the under 2s at home, are popping positive on PCR.

C: We have been doing PCR testing at our office since the beginning, but the parents test their kids in the car, while we watch through the window.

C: I have started telling families that, "I can't recommend that you use them under 2 because they are not approved, but if it were my kid I would". They all get the message ;- ) and I do count Ag positive as positive. Do not request PCR confirmation.

C: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: Personally, I would be cautious interpreting antigen tests in children under 2. It is not approved. I do not know any data. Positive and negative results have implications for childcare, etc.

**Q: It may not be approved and we counsel for not for under 2's but parents are still testing and then call us with the positive result. So, do we count those as a positive and not retest with PCR?**

A: Ilisa Stalberg, Vermont Department of Health: Regarding reporting as positive, I can find out re antigen test for <2yo.

### Vulnerable Population Access

C: We are really reducing access for our most vulnerable population, unvaccinated children 0-5. As a mom of a 1.5 year old, I use antigens tests weekly on her.

### Antigen Test Supply

C: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: We can also re-order antigen tests free from the federal government. They arrive very quickly.

C: We run a state testing site (NCHC- FQHC) and the utilization has been very low for the last few months (like just a few people per day).

C: Stephanie Winters, Vermont Medical Society: <https://www.covid.gov/tests>

### Antigen Tests for Summer

**Q: Do we know what will happen with the antigen tests at school for the summer? Will families still be able to access these in some other way this summer?**

A: Ilisa Stalberg, Vermont Department of Health: Re summer access to testing: It is possible that schools will distribute, but many will not do this over the summer.

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### PCR Sample Collection in Office

C: We also continue to collect samples in our office (since they became available). To be honest, it's easier as we don't end up having to go through lots of hoops to get the results. When families go to the SVMC testing site, the order entry person does not accurately enter us as PCP and then we don't get the results. SVMC has not been able to fix the problem. It requires us knowing testing was done and then having to access the SVMC Meditech system remotely (not always easy).

C: We are also doing PCR in office, but usually in the context of a visit. Would need to find different mechanism if we were to offer PCR "walk in testing" without visit. Not sure how we would make that work.

### School Nurse Communication Forms

C: Just a side note, thank you for the Pediatric practices who are responding to School Nurse communication forms. Unfortunately, I have heard feedback from several School Nurses that a few offices are not receptive when the Nurse sends the communication form that the student/patient has COVID. Not sure how to fix this. The School Nurses are supposed to be communicating with the primary providers and they are now mandated to let the health department know.

C: Personally, I have not gotten a request from a school nurse or family for a "communication form" since January.

### Vaccine/Booster Status and Decisions to Treat

**Q: Sorry if I missed it, but did you address if vaccination/booster status influences your decision to treat?**

A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: I do consider vaccination status; the guidelines do allow for that.

### PPV vs NPV Antigen Testing

**Q: it worth a quick review in the comments or the email to follow about PPV vs NPV for antigen tests?**

**Q: Brena Holmes, MD, VCHIP: do you mean for Ag testing under age 2 or in general? I am not aware of studies of PPV or NPV in under 2 for antigen testing.**

A: Right.

A: Brena Holmes, MD, VCHIP (verbally): Would love for Bill and Ben to come back and talk about antigen testing in the future, especially with these shifts in variants. Let's keep this on the to do list.

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### Vaccine Availability & Data

**Q: Do we know if we will have either or both vaccines available? Are data stronger for one or the other (Pfizer vs Moderna)?**

A: Monica Ogelby, Vermont Department of Health (verbally): Yes, we've been told that there will be equal quantities available if the EUA is approved. Practices and clinicians will need to decide which products they want to carry, if you want to order both or just one. Our objective is to honor what you want so if you want to order both, you will get both.

A: Monica Ogelby, Vermont Department of Health (verbally): It feels premature to comment on the data especially with the wild card 3<sup>rd</sup> dose of Moderna.

### Moderna Booster in Teens

**Q: From Raszka, William V to Everyone 12:54 PM: @Monica: do you have any idea if the Moderna vaccine will receive EUA for a booster dose in teens?**

A: Monica Ogelby, Vermont Department of Health (verbally): That conversation will be held June 14<sup>th</sup>.

### Timing of Boosters

**Q: Getting 2 common questions from families – (1) If my vaccinated x 2 child has recently had COVID (past 2-3 months) - should I wait to give a booster? (2) Should I wait to give my child the booster until the late August in hopes of providing them the most coverage during the school year.**

A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: I generally recommend waiting three months after infection for a dose of the vaccine. I think the data supports a very nice response if waiting three months.

A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: Waiting until the school year for the booster is interesting. One issue is access. Secondly, it probably does not matter too much. I think the timing of the boosters is a bigger issue for older patients (e.g. over 55) as the impact is relatively short.

A: Monica Ogelby, Vermont Department of Health (verbally): No one has made changes to their policy, especially around the up-to-date definition. We'll be listening for any changes that may affect demand.

Monica Ogelby, Vermont Department of Health and William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics (verbally): It is a personal decision and circumstances may affect your decision.

A: Ilisa Stalberg, Vermont Department of Health: It's also possible that summer camps may require boosters.

**Q: Should there be any hesitation to getting a booster within the 3 months of having Covid?**

A: William Raszka, MD, UVM Medical Center Children's Hospital & Larner COM Department of Pediatrics: No. You certainly can give it earlier (but not during the illness).