VCHIP / CHAMP / VDH COVID-19 UPDATES

Wendy Davis, MD FAAP - Vermont Child Health Improvement Program, UVM
Breena Holmes, MD FAAP – Director of Maternal & Child Health, Vermont Department of Health
May 13, 2020
1) **All participants will be muted upon joining the call.**  
   If you dialed in or out, unmute by pressing #6 to ask a question (and press *6 to mute).

   Presenters: Please avoid the use of speakerphone and make sure your computer speaker is muted if you dialed in via phone.

2) **To ask or respond to a question using the Chat box, type your question and click the icon or press Enter to send.**
Overview

- Celebrating Dr. Jerold Lucey!
  - Also National Cough Drop Day
- Situation update
  - Surveillance
  - Testing
  - Other updates
- Today’s media briefing
- Practice Issues:
  - VDH (Pediatric) Updates
- Question and Answer

[Please note: the COVID-19 situation continues to evolve very rapidly – so the information we’re providing today may change quickly]
Situation update

- VDH Public Health Lab: 160 tests 5/12; 28 tests 5/10
- UVMMC: 748 total across 3 platforms
  - Includes large batch from NYS (public health lab had long turnaround time)
- Hospitalized patients: 1 patient in ICU, 1 patient on ventilator

Reminder: “Total People Recovered” based on the number of confirmed positive cases (VT residents & non-VT residents who tested positive in VT; does not include deaths or patients currently hospitalized).
Deeper level of demographic/other detail: testing trends, outbreaks, pre-existing conditions and prevalence of symptoms
Testing update

- Requirement to submit practice staff testing plan to Testing Task Force – interest in developing standardized guidance? (thank you, Paul Parker!)
- REMINDER – NOT ELIGIBLE for Pop-Ups: patients with symptoms
  - Continue to call health care provider to get a referral for testing at other testing sites
  - Symptomatic patients can be sent to testing sites set up by hospitals OR primary care can do anterior nares testing (without PPE only if patient can collect his/her own specimen) – swab shipment arrived!
- NOTE: absolutely NO requirement to test any child for entry to childcare or summer camp.
Testing: Pop-Up Site Schedule

- This week - **anyone without symptoms** (especially HCWs, 1st response, child care providers serving essential workers. (swab, **not** serology):
  - Tuesday, 5/12 Bennington **[ALL 9 am – 3 pm; locations are at registration site]**
  - Thursday, 5/14 Brattleboro (BUHS)
  - Saturday 5/16 Hartford & Colchester (Upper Valley Aquatic; VDH Public Health Lab)
  - Monday 5/18 – Rutland (Rutland HS)
  - Tuesday 5/19 – Barre (location to be confirmed)
  - Wednesday 5/20 – Middlebury and St. Albans (Amer. Legion Post; Collins-Perley)
  - Thursday 5/21 – Newport (location to be confirmed)
  - Friday 5/22 – Springfield and Morrisville (location to be confirmed)
  - Saturday 5/23 – St. Johnsbury (location to be confirmed)

- **Registration required**: [https://humanresources.vermont.gov/popups](https://humanresources.vermont.gov/popups)
Under discussion between VDH and Vermont colleges/universities (also with BTV city administration)

- Anticipating possible influx of returning students related to June 1st lease date
  - Returning students must self-quarantine at home prior to travel or here upon arrival
  - Colleges have communicated this guidance to students. They are also reviewing option to test at day 7 (and end quarantine if negative)
  - Testing logistics under review: possible need for high-volume testing noted.
  - Friends/family (parents) should stay only for the day and then leave; NO lodging available for family/friends in helping with the move.
Pediatric Multi-System Inflammatory Syndrome

- Increasing case reports (#s gleaned from news reports):
  - NYC: 82 cases; 53 COVID-19 positive by antibody testing; one death.
  - CT (Yale-New Haven Hospital and CT Children’s Hospital): 6 cases
  - 14 states
- **DRAFT** CDC (VDH) case definition (next slide)
DRAFT CDC Case Definition - Pediatric Multisystem Inflammatory Syndrome (PMIS)

- An individual aged < 21 years presenting with fever¹, laboratory evidence of inflammation², and evidence of clinically severe hospitalized illness such as single or multi-organ dysfunction (shock, cardiac, respiratory, renal, gastrointestinal or neurological disorder) AND
- Exclusion of any other microbial cause, including bacterial sepsis, staphylococcal or streptococcal shock syndromes AND
- SARS-CoV-2 PCR positive, or PCR negative with COVID-19 exposure in the past 4 weeks, or serology positive
- ¹Fever >38.4°C for ≥24 hours
- ²Including, but not limited to: lymphopenia, neutrophilia, elevated CRP

Additional comments:
- Recommended testing for a patient with suspected PMIS includes: Respiratory Viral Panel, blood culture
- Some children may fulfill full or partial criteria for Kawasaki Disease
- Consider suspected PMIS in any SARS-CoV-2 pediatric deaths
Governor Scott:

- Disturbing incident of possible bias involving VT family recently relocated from NY
  - Citizens w/home/family in VT and necessary travel to VT are welcome!
  - Travel guidance is clear (14d. quarantine)
- Masks/cloth face coverings: guidance vs. mandate (e.g. retail customers) – “seems to be working”; continue to monitor.
- Friday: expect extension of State of Emergency
Today’s Media Briefing

Commissioner Levine:

- **“Masks”/cloth face coverings**: evidence accumulating to support that they reduce respiratory droplet transmission – but compliance must be **high** (protect others from our droplets, including during pre-symptomatic phase).

- Correction/clarification re: recommendations
  - **RECOMMENDED FOR** pregnant women
  - **NOT RECOMMENDED** for children under two & those w/difficulty breathing

- Monitoring international experience (Germany, Sweden, Asia)

- CDC MMWR: WA state choir (1 ill person infected 52/61 at 2-hr. practice: no masks, “high density, prolonged exposure)”
Today’s Media Briefing

Commissioner Levine (cont’d.):

- **Good news:**
  - Numbers of new cases continues to drop
  - Rate of positive tests dropping
  - Health care system capacity is good
  - Testing/contact tracing capacity is good

- Activities that are “here to stay”:
  - Physical distancing & facial covering
  - Temperature and symptom checks upon entering the workplace
  - Routine testing here to stay – special sectors AND general population, with more user-friendly methods (including saliva)

- Activities that will look different: summer concerts, sporting events
Practice Issues

Vermont Department of Health Updates

Breena Holmes, MD FAAP, MCH Director, VDH
VDH MCH Updates

- New HAN updates: summaries of patients testing positive and deaths (May 13, 2020)
- Child care and school guidance
- Overnight camp guidance – in development
- Serology Work Group update
Upcoming Topics

- Continue to follow developments in telehealth/telephone coverage
- Health care “restart” details
- Summer camps/other recreational activities – following emerging guidance
- OneCare Vermont all-payer model adjustments
- Testing of HCWs and other asymptomatic individuals
- **School reopening/reentry**; adolescent well care; IZ catch-up (flu)
- Pediatric Multi-System Inflammatory Syndrome
Q & A Goal: monitor/respond in real time – record/ disseminate later as needed (and/or revisit next day).

For additional questions, please e-mail:

- vchip.champ@med.uvm.edu
- What do you need – how can we be helpful (specific guidance)?

VCHIP CHAMP VDH COVID-19 website:
https://www.med.uvm.edu/vchip/projects/vchip_champ_vdh_covid-19_updates

Next CHAMP call: **Thursdays, May 14, 12:15-12:45** (same webinar/call information – invitation to follow) – **please stay tuned re: Friday, May 15**

Please tune in to VMS call with Commissioner Levine:

*Tuesday, May 19, 12:15-12:45*

Phone: 1-802-552-8456

Conference ID: 993815551