

VCHIP VDH COVID-19 Q&A Chat March 9, 2022

Shifting Away from Protocols and Moving To Managing Symptoms

C: Breena Holmes, MD, VCHIP (verbally): As Vermont shifts away from testing protocols for illness symptoms and schools, we need feedback on how to manage children and mild symptoms.

Your feedback is important in this next phase of COVID.

Here are some preliminary thoughts:

- We continue to support the message: stay at home when sick and return when you have symptom improvement*
- We (re)empower school nurses to use their pre-pandemic infectious disease protocols and clinical decision making in determining who shouldn't come to school/be sent home from school*
- Should we supply school nurses/delegates will LAMP testing (and maybe antigen tests) to do rapid testing for children who arrive to school with mild symptoms (not encouraged but happens) or develop mild symptoms while at school?*
- Students with mild symptoms who test negative can remain in school*

Vaccine Dashboard Update

C: Nathaniel Waite, RN, Vermont Department of Health: Dashboard just updated at 12:08, Wendy.... those three percentages are the same as the data on the slide, <https://www.healthvermont.gov/covid-19/vaccine/covid-19-vaccine-dashboard>

Eating Disorder Training Topics

C: Erica Gibson, MD, UVM Medical Center, Pediatric Primary Care (Burlington) & VCHIP: Please email me or type into chat any eating disorder topics you'd like to learn more about! This will be a multidisciplinary training including providers, dietitians, and mental health providers. Erica.Gibson@uvmhealth.org Thanks!

Ukraine: Attack on Pediatric & Maternity Ward

C: Attack on pediatric & maternity ward - <https://www.bbc.com/news/live/world-europe-60657155>.

Recommendations for Children Under 5

Q: Are there different recommendations for daycare centers that have children under 5?

A: Breena Holmes, MD, VCHIP (verbally): The DCF child development division put out a brief saying that when mask mandates go away, they go away everywhere, including childcare. There is a difference between private providers of childcare and those that receive state funding and in the state funding arena, that group will follow the no mask requirement. Private providers can set forth their own protocols with masking.

Locating Antivirals



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C: We use this website to find pharmacies that have antivirals available, <https://covid-19-therapeutics-locator-dhhs.hub.arcgis.com/>.

LAMP Testing

C: We do have a good supply of LAMP and rapid antigen tests in school nurse offices, and the indication from the AOE has been that we can expect the supply to be stable.

C: LAMP tests are so very helpful to have on hand in my school health office. I hope we continue to have tests next year. It does help when sending students home sick or this "grey zone" of mild symptoms. It also helps families with high needs for them to get tests from schools.

C: From school health perspective, it would be very helpful to be able to use the LAMP tests at school to rule out COVID and then be able to send kids back to class. Currently our AOE/VDH guidance is that all with symptoms must go home, even if LAMP or antigen test at school is negative.

C: Breena Holmes, MD, VCHIP (verbally): Right, we want sick kids home. This is a very specific clinical situation where they are not ill but have symptoms. It's very subjective and there is interest in making it more objective if that's possible.

Q: Has VDH talked about LAMP or rapid tests being available in PCP offices?

C: Agree - incredibly helpful to have LAMPS tests in my school health office.

C: From an environmental angle: LAMP tests are very wasteful (plastic, batteries, etc.).

C: My daycare provider has used LAMP tests and has had a kid test positive. This is a group where all the kids are unvaccinated and a few unmasked (under 2). No one else in the group became sick! She was extremely thankful she had them. I know we aren't talking about distributing LAMP to daycares but we should think about it.

Q: Sorry one more - are LAMP tests approved for under 2? My understanding is not approved yet.

A: Ilisa Stalberg, Vermont Department of Health: No

A: Becca (Rebecca) Bell, MD, UVM Medical Center: No, they are not. There are no options for at home testing for under 2.

Testing Supplies

C: We are PCR testing and have a very small supply of antigen tests.

Children with Symptoms



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C: Still encouraging kids with symptoms to rapid test or PCR test - but many daycares are taking kids back with continued rhinorrhea and cough as long as rapid test negative - because many of those symptoms are lasting 7-14 days after initial development of symptoms.

C: Sick children/teens need to stay home from school, no matter what the symptoms, because otherwise students are passing viral URIs/influenza & than situation of trying to figure out if anyone may have Covid becomes more challenging.

C: If we are going to continue to exclude children/teens with cough/nasal congestions - we need to change what provide to kids when they are absent. Lots of kids missing LOTS of school.

C: Agree - the very mild symptoms are the ones we'd like to be able to send back to class.

Q: Any new data on reliability of rapid under age 2? We do PCR in office or do still refer some.

A: Breena Holmes, MD, VCHIP (verbally): The issue, to my knowledge, is not reliability but that they are not approved for use.

Protocol for Clearing for Return

C: 1 rapid versus 2 rapids versus a PCR - dependent on school/daycare.

C: School protocol is 2 rapids at least 24 hours apart are needed to clear child from COVID (and symptoms must be resolved/significantly improved).

Guidance on Recently Post-COVID Infection

Q: Any guidance on recommending PCR testing for symptoms in people who are "recently" post-Covid within 90 days or less? (Who are not being seen by Dr.)?

A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: This should still be handled on a case-by-case basis. Omicron breakthroughs in people with recent Delta infection were quite common.

C: Lots of kids who had COVID within past 90 days - and now have runny noses/cough.

A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: One option is to use antigen testing in that scenario, as the likelihood of persistent positives with antigen tests are far lower than with PCR testing.

Allergies

Q: And, of note we will add spring allergy symptoms to the mix soon?...

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A: Benjamin Lee, MD, UVM Children's Hospital & Larner COM Dept. of Pediatrics: As far as I am aware there is no spring allergy season in VT. My son is allergic year-round! I don't think his nose has stopped running since we moved here in August 2015.

C: Me too, Ben!