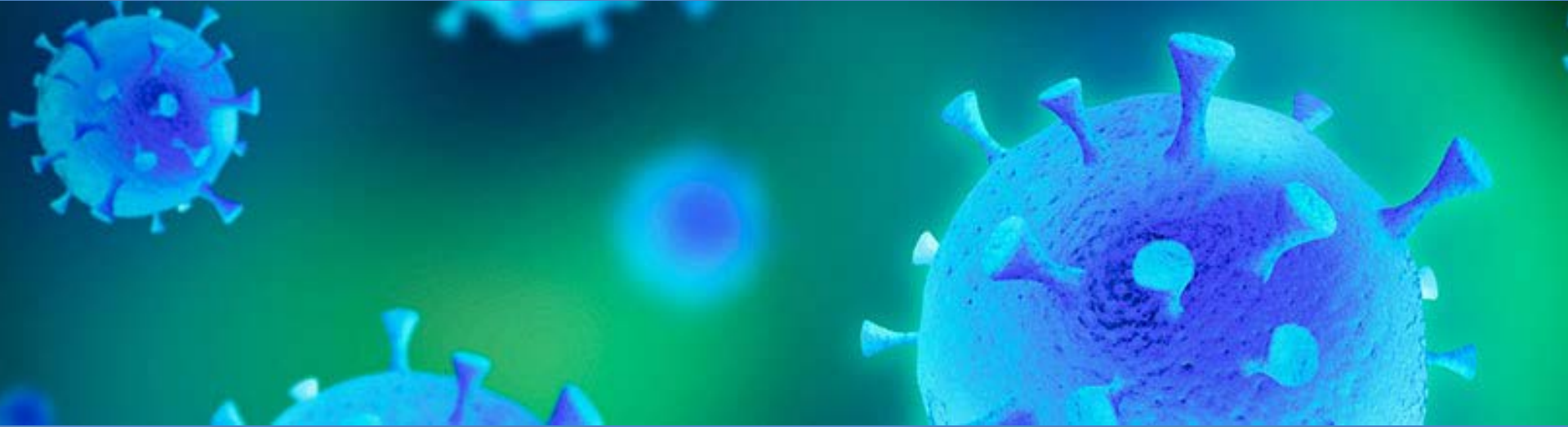


VCHIP / CHAMP / VDH COVID-19 UPDATES



Wendy Davis, MD FAAP - Vermont Child Health Improvement Program, UVM

Breena Holmes, MD FAAP – Director of Maternal & Child Health, Vermont Department of Health

April 10, 2020



Vermont Chapter

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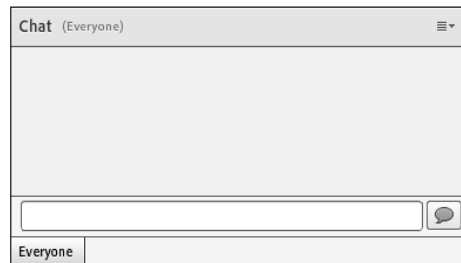
Technology Notes

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

- Situation update
 - ▣ Surveillance
 - ▣ Testing
 - ▣ Other updates/announcements: special Pediatric Grand Rounds via Zoom next Wednesday, April 15, 2020
- VDH Updates: fact sheets on promoting child safety/coping w/family stress; WIC shopping; specimen collection sites list
- Practice Issues: Mother/Baby Care
- Question and Answer

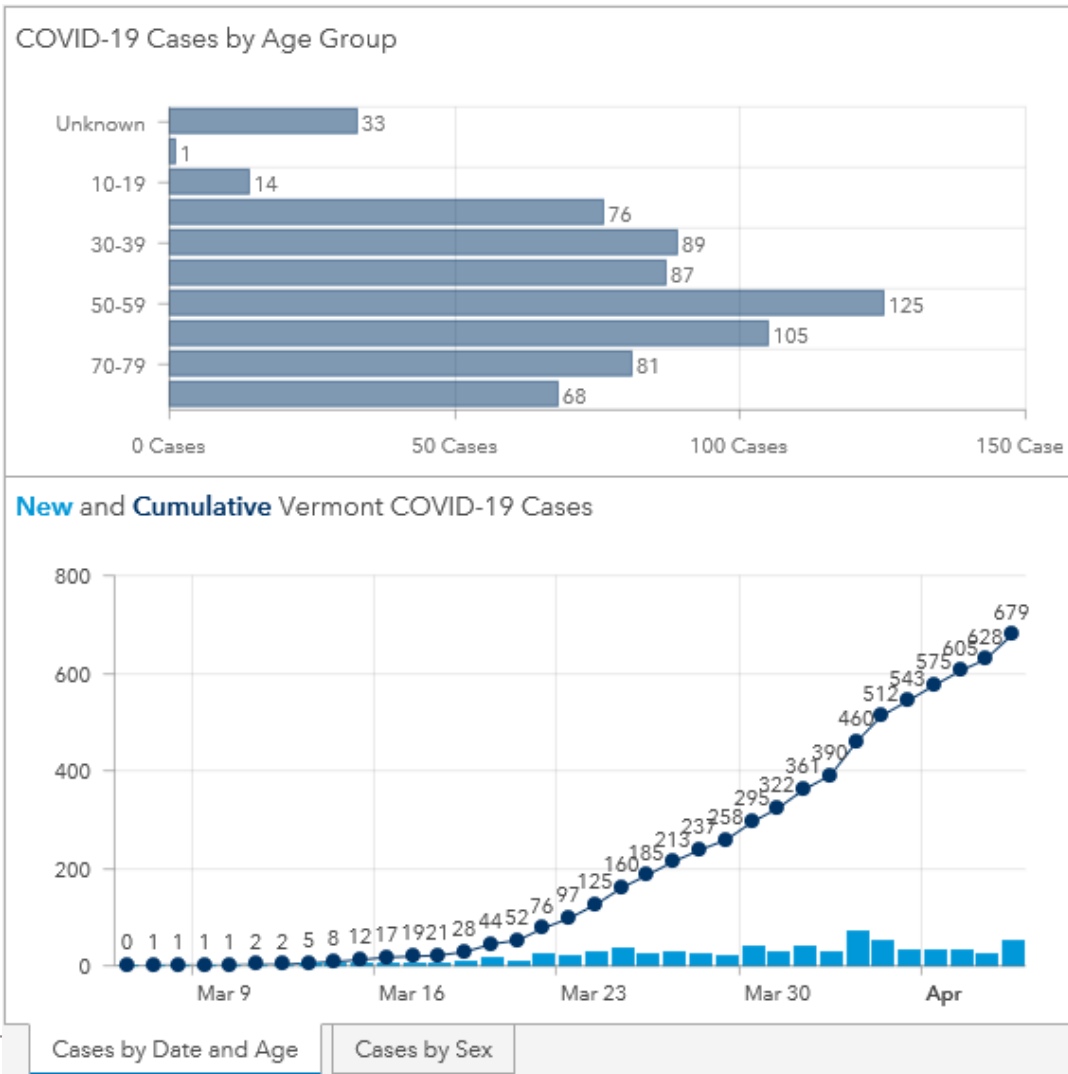
[Please note: the COVID-19 situation continues to evolve very rapidly – so the information we’re providing today may change quickly]

Situation update

Total Cases 679
Currently Hospitalized 32
Hospitalized Under Investigation 43
Deaths 24
Total Tests 8,657
People Being Monitored 44
People Completed Monitoring 781
Last Updated (M/DD/YYYY): 4/10/2020, 11:00 EDT

- Governor Scott extends State of Emergency through **May 15** (and all corresponding orders, etc.)
- Updated modeling
- NW State Correctional Facility inmate/staff tests pending
- 14 patients in ICU
- 8 on ventilators

Situation update (updated 4/10/20)



Special (Zoom) *Pediatric Grand Rounds* – 4/15/20

- **Date and Time:** Wednesday, April 15th, 8:00-9:00, via Zoom (login details to follow)
- **Title:** “COVID-19 Town Hall: The Non-Infectious Complications of This Virus.”
- **Goal:** Discuss the impact of the COVID-19 pandemic on children and families, including access to basic needs, behavioral issues, mental health, and child safety (brief presentations followed by Q/A)
- **Speakers:**
 - **Beth Forbes MD:** behavioral challenges and management strategies
 - **Haley McGowan MD, Courtney Fleisher PhD, Erica Marden MD:** supporting and promoting mental health
 - **James Metz MD, Tracey Wagner RN, Mary-Ellen Rafuse LICSW:** promoting child safety
 - **Kate Cappleman-Sinz, LICSW:** resources to help families meet basic needs

Other VDH Updates



- Laboratory testing locations:
 - ▣ VDH Public Health Laboratory (~60/day)
 - ▣ UVM MC (in-house) Laboratory
 - ▣ Outsourced tests will now to Broad Institute (MIT, Boston)
- Abbott POC (rapid) test machines update (Breena)
 - ▣ Concerns re: test sensitivity (~60%) & supply limitations
- VDH Fact Sheets to promote child safety
 - ▣ Child Safety During COVID-19 (focus on injury prevention)
 - ▣ Coping with Family Stress During COVID-19 (includes resource links)

<https://www.healthvermont.gov/response/coronavirus-covid-19/communities-families-and-individuals>

Other VDH Updates: WIC/Food Resources

- VT WIC Program has requested waiver to support phone transaction for WIC EBT
 - ▣ Likely for smaller stores/Coops if successful
 - ▣ Chain store online ordering does not accept WIC EBT
 - ▣ Pilot for online ordering for SNAP EBT nearing completion
 - ▣ USDA regulation requires WIC PIN to be entered in presence of cashier – designated proxy may enter (waiver?)
- Grocery shopping under “Stay Home – Stay Safe”
 - ▣ Designate proxy shopper OR order online/phone with proxy payment & pick-up
 - ▣ Vermont Grocers Association list of options

Other VDH Updates: Specimen Collection Sites



COVID-19 Specimen Collection Sites A Resource for Health Care Professionals

The Department of Health continues to work to expand COVID-19 testing to more Vermonters – including those who have mild to moderate symptoms – to help increase contact tracing efforts and prevent the virus from spreading. The table below lists the COVID-19 specimen collection locations in Vermont and provides instructions for making patient referrals.

County	Collection Facility Name	Instructions to Refer Patient for Specimen Collection
Addison	Porter Hospital	Fax referral to (802) 388-8866 or call (802) 388-8865; Porter providers via Epic
Bennington	Southwestern Vermont Medical Center	Call (802) 440-8844
Caledonia	Northeastern Vermont Regional Hospital	Fax referral to (802) 748-7383 or call (802) 748-7401
Chittenden	University of Vermont Medical Center (Essex Fairgrounds)	Call (802) 847-1170 (UVMHN Fanny Allen)
Essex	Northern Counties Health Centers - Island Pond	Fax referral to (802) 723-4544 or call (802) 723-4300
Franklin	Northwestern Medical Center	Call (802) 527-3670
Grand Isle	Champlain Islands Health Center - South Hero	Call (802) 540-8940
Lamoille	Copley Hospital	Call (802) 888-8298
Orange	Gifford Medical Center	Call (802) 728-7000
Orange	Little Rivers Health Care - Wells River	Call (802) 222-3000 ext. 324
Orleans	North Country Hospital	Fax referral to (802) 334-4163
Rutland	Rutland Regional Medical Center	Fax referral to (802) 747-6200
Washington	Central Vermont Medical Center	Call (802) 371-5310
Windham	Brattleboro Memorial Hospital	Call (802) 257-0341 ext. 8200
Windham	Grace Cottage Hospital	Call (802) 365-4331
Windsor	Springfield Hospital	Call (802) 885-7533
Windsor	VA Hospital - White River Junction	Call (802) 295-9363 Currently only testing Veterans
Windsor	Mt. Ascutney Hospital	Call (802) 674-7300

Practice Issues

Mother/Baby Care



THE
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Children's Hospital



What we are hearing . . .

- AAP guidance suggested strict separation. UVMMC flowsheet bifurcated at a strict separation vs. modified for parent preference. Community hospital RNs aware of WHO statement in favor of no separation, or at least less stringent, e.g.:
 - ▣ Breastfeed safely, with good respiratory hygiene
 - ▣ Hold your newborn skin-to-skin
 - ▣ Share a room with your baby
- RE: consideration of prioritization for rapid testing: can you suggest considering testing all laboring/possibly laboring mothers when they present to the hospital? The potential issues associated with someone contaminating the birthing center are huge...
- Interest (e.g., North Country and the other small hospitals) for use of Abbott POC testing on inpatients (which would include labor patients and newborns)

Mother/Baby Care: AAP Initial Guidance

- ❑ AAP INITIAL GUIDANCE: Management of Infants Born to Mothers with COVID-19 – released 4/2/20 (Puopolo, Hudak, Kimberlin, Cummings; COFN, SONPM, COID; “based on current limited evidence as of 3/30/20”)
 - ❑ Circulated through VDH HAN 4/3/20
 - ❑ “Congenital/perinatal transmission to newborns from infected women may occur” (but “considerable uncertainty exists”)
- ❑ Recommendations
 - ❑ Consider neonates born to women with COVID-19/testing pending as PUIs for infection (may not be univ. applicable; expect revisions)
 - ❑ Cont. HCP delivery room attendance per “normal center-specific policies” and/or reevaluate inst. mandatory attendance & allow “standby”
 - ❑ PPE if attendance required for infant stabilization: airborne/droplet/contact precautions

Mother/Baby Care: AAP (cont'd.)

AAP INITIAL GUIDANCE: KEY POINTS

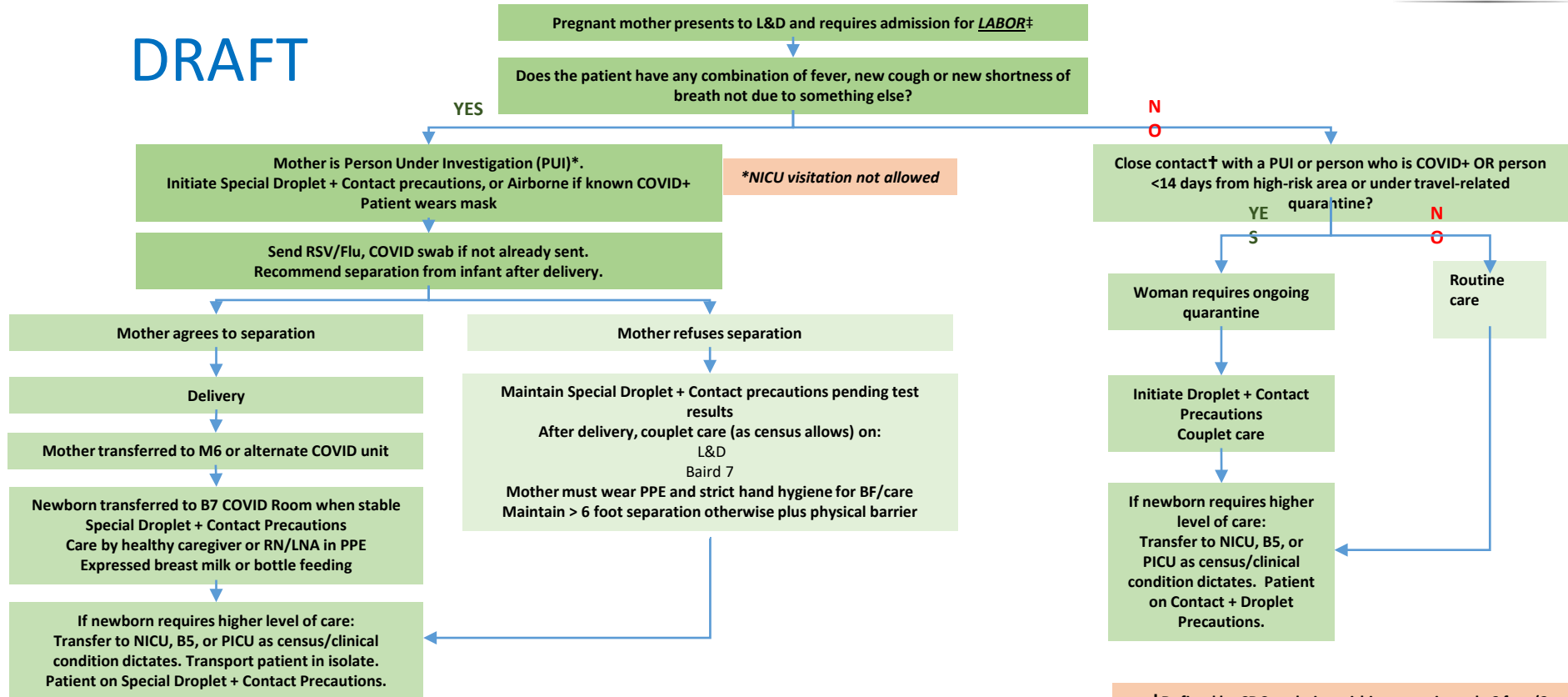
- ❑ Separate newborns from mos. with COVID-19 when physical environment allows (risk education if mo. chooses room-in)
- ❑ Mothers with COVID-19 can express breast milk to be fed by uninfected caregivers
- ❑ Test infants of infected mos. at 24 (and 48) hours after birth.
- ❑ Newborns with or at risk of COVID-19 require frequent outpatient follow-up through 14 days after D/C.
- ❑ Mother maintains separation after hospital D/C and uses mask/hand hygiene for newborn care until meets criteria.
- ❑ Infected mother whose newborn requires hospital care maintains separation per criteria.

Mother/Baby Care: UVM CH & MC (4/2/20)

LABOR & DELIVERY / MOTHER BABY COVID ADMISSION RUBRIC

Reviewed 3/26/20 by Karin Gray, Chuck Mercier, Marjorie Meyer, Shelley Robinson, Sandra Sperry, Leslie Young

DRAFT



**NICU visitation not allowed*

If mother delivers precipitously or PUI determination cannot be determined until after birth for any reason, initiate Special Droplet + Contact Precautions, send RSV/Flu and COVID swab, but continue couplet care as above

†Initial bed placement according to "COVID+ or PUI admission/evaluation" rubric. If presenting for C/S and patient meets criteria for PUI or is known COVID+, admission to M6 or alternate COVID unit. Post-delivery, placement as above depending on mother's decision re: infant separation

†Defined by CDC as: being within approximately 6 feet (2 meters) of a COVID-19 case (or PUI) for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room – or – having direct contact with infectious secretions of a COVID-19 case or PUI (e.g., being coughed on)

LABOR & DELIVERY / MOTHER BABY COVID ADMISSION RUBRIC

Reviewed 3/20/20 by Karin Gray, Chuck Mercier, Marjorie Meyer, Shelley Robinson, Sandra Sperry, Leslie Young

Discharge instructions if separated:

For COVID +: Continue separation until 7 days from symptom onset AND 72 hours after resolution of symptoms

For COVID test pending at discharge: Separation as above until results known, if negative, discontinue isolation

Discharge instructions if not separated:

For COVID+: Self-isolate together, monitor for symptoms in infant

For COVID test pending at discharge: Monitor for symptoms until results known

Asymptomatic but exposed to known positive: Continue self-quarantine together and isolation from contact

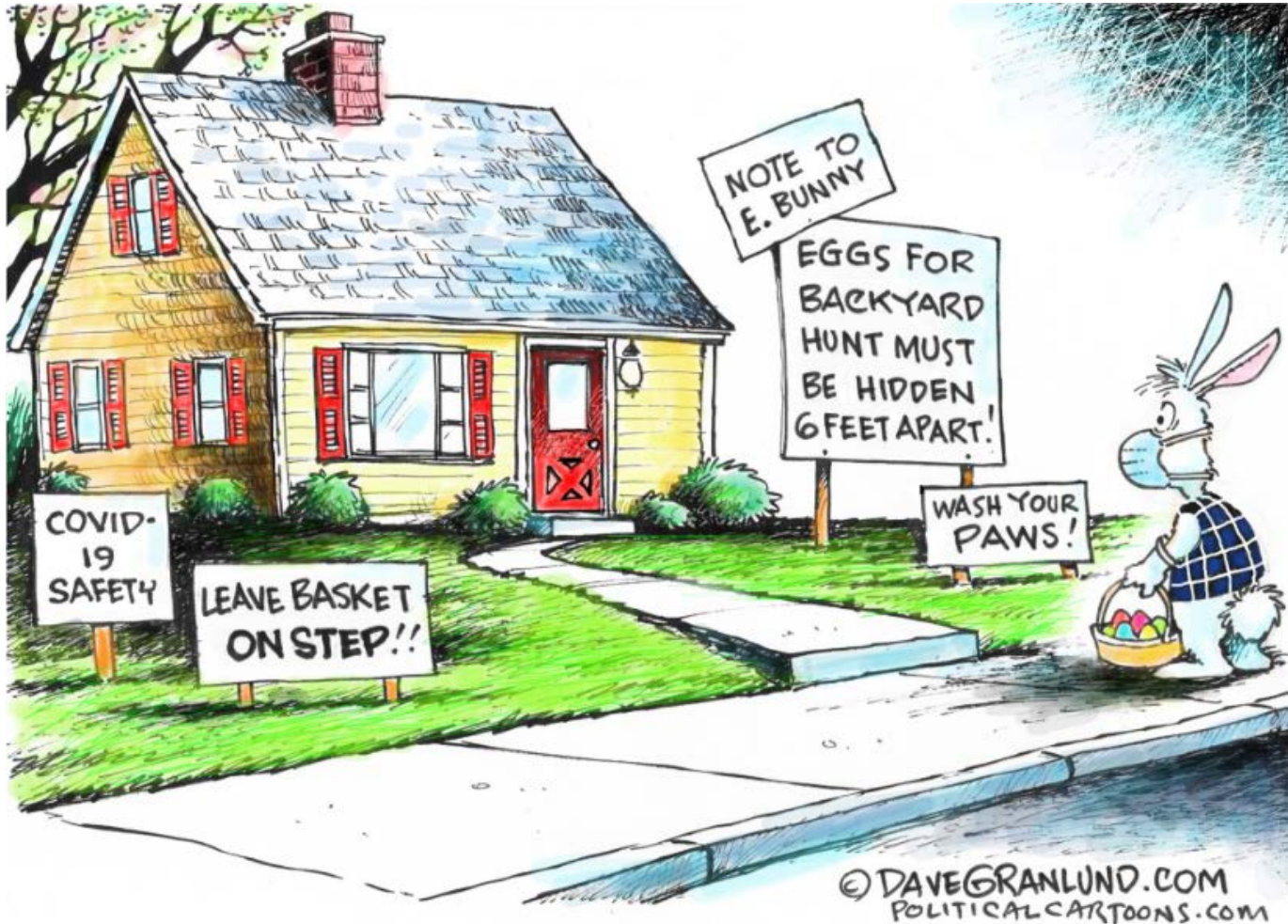
Mother/Baby Care: UVM CH & MC

- Our algorithm recommends separation (per AAP) but has a pathway for cohorting (per WHO). Our experience (e.g., influenza) is that most women would opt to room-in with their babies, and we support this choice, but would provide education around the choice.
- Updates: slight changes to the side of the algorithm for in-hospital quarantine (contact/droplet precautions; asymptomatic mother and baby remain together) as it was updated to add arrival within 14 days to Vermont.
- Current version not yet officially approved by Incident Command at UVM MC.
- Not recommending routine testing of healthy asymptomatic newborns at this time.

Upcoming topics

- Follow-up re: telehealth, telephone coverage

Today's Chuckle



Questions/Discussion

- 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: **Monday, April 13, 12:15-12:45** (same webinar/call information – invitation to follow)
- Please tune in to VMS call with Commissioner Levine:
Tuesday, April 14, 12:15-12:45
Phone: 1-802-552-8456
Conference ID: 993815551