



April 28, 2020

New Information From Your CPMG Medical Directors... ... always interesting to us – hopefully useful to you!

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Subject: CPCMG/RCPMS COVID-19 Nightly Update 4/27/2020

Good Evening:

These are nightly updates for all CPCMG and RCPMS staff. Other valued community members which includes all CPMG affiliates and Radys Executives, as asked, have been included for the sake of collaboration. Please note that the information included herein is geared towards CPCMG & RCPMS staff and while generally useful to the broad community, all aspects may not always be applicable to your respective organizations.

Tonight marks 8 weeks straight that many of you have received nightly updates from me minus a few Saturdays for the purpose of sanity. Others came on board in the days and weeks that followed. With regards to these nightly updates, I am going to take the liberty to provide an excerpt that I just wrote to our Board of Directors for my CMO Board Report.

There has probably never been a greater transparency as to what the Medical Director of CPCMG has been focusing on given the nightly updates that you all have received. Our COVID-19 incident command team felt that it was critical to communicate frequently and consistently. In the spirit of transparency, early on in the evolving pandemic it was felt that we should be sharing with all community members asking for help. While there may be some small items that might have been considered trade secrets in the past, we believe that our team work and collaboration will serve to help the entire pediatric community beat COVID-19 and that it will ultimately shine brightly on our future. Currently, all of CPCMG, RCPMS, CPMG Affiliates, select Radys Executives, select San Diego County Medical Society governance, select San Diego Public Health governance and other pediatric and family practitioners are receiving the nightly updates. Frequently, we have been told that many practices have discarded the other updates that they receive from multiple sources and focus on the CPCMG update.

There may come a point in the future that nightly updates are no longer needed. This would be a welcome end for all of us if it meant that they could be discontinued. Until that time, we carry on...

RISK LEVEL

We remain at Risk Level 3.

- Access:
 - All sites remain open and all sites continue to see well and sick visits in a modified format.
- Self-monitoring: For fever twice daily for all staff and providers.
- Incident Command:
 - Regional Testing went live last week. Staff and/or providers have been referred to regional sites, but there have not been any known patient referrals to date.

CASES

CPCMG/RCPMS:

- Staff/Providers:
 - No positive cases for providers that have been tested.
 - No new staff cases
- Patients:
 - No new cases or updates

Riverside County:

- Saturday Evening 4/25: 2.8% increase-3,409 positive cases with 3.7% of the TOTAL cases being in children 0-17 y/o
- Sunday Evening 4/26: 4.3% increase-3,563 positive cases with 3.8% of the TOTAL cases being in children 0-17 y/o
- Monday Evening 4/27: 2.2% increase-3,643 positive cases with 3.8% of the TOTAL cases being in children 0-17 y/o

San Diego County:

- Saturday Evening 4/25: 4.0% increase-2,943 positive cases with 2.6% of the TOTAL cases being in children 0-19 y/o
- Sunday Evening 4/26: 3.3% increase-3,043 positive cases with 2.6% of the TOTAL cases being in children 0-19 y/o
- Monday Evening 4/27: 3.1% increase-3,141 positive cases with 2.8% of the TOTAL cases being in children 0-19 y/o

Statewide:

- Saturday Evening 4/25: 4.6% increase-41,137 positive cases with 2.5% of the TOTAL cases being in children 0-17 y/o
- Sunday Evening 4/26: 2.4% increase-42,164 positive cases with 2.5% of the TOTAL cases being in children 0-17 y/o
- Monday Evening 4/27: 3.0% increase-43,464 positive cases with 2.5% of the TOTAL cases being in children 0-17 y/o

Radys Community Pathogens Report (4/20/20-4/26/20)

- **RSV**: 1 case (3rd week in a row with only 1 case)
- Influenza: No Flu A or Flu B cases (4th week in a row with no cases. The last Flu A case was the week ending 3/29/20)
- **COVID-19**: 19 cases (724 tested)

MORE GOOD THINGS

- Post Partum Depression Screening Survey Reminder: Thank you for attending the
 Postpartum Depression lecture last week given by Dr. Azimi and for completing the presurvey! We will be sending out the post survey link and collecting responses until
 4/29/20. For CPCMG providers only: the link for the post-survey
 is: https://www.surveymonkey.com/r/S2777HF
- First Latch Lactation Training for NON-CPCMG Providers: I have dialogued with Juanita Spears, our contact for the Lactation training. They are willing to honor the special \$35 rate for those non-CPCMG providers that would like to do the training. You merely just need to email Juanita directly and reference the special CPCMG rate. In your email subject line, include "First Latch Training-CPCMG." Juanita will then send you the invoice which upon payment allows you access to the training. Juanita Spears: bfhi@lactationtraining.com

CALFRESH ONLINE

What is CalFresh? CalFresh is a program for low-income families and individuals that meet certain income guidelines. CalFresh is also known as the federal **Supplemental Nutrition Assistance Program (SNAP)**. CalFresh benefits help supplement the food budget and allow families and individuals to buy nutritious food. CalFresh benefits are accessed by using an Electronic Benefit Transfer (EBT) card. An EBT card is used the same way a debit or ATM card would be used. Eligibility and the amount of CalFresh benefits issued depend on household size, income and certain living expenses.

Beginning April 28th, CalFresh recipients can begin using their EBT card online at Walmart and Amazon. Please see the **attached** English and Spanish information flyers.

TESTING (repeated for reinforcement)

Clinicians should use their judgment to determine if the patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested.

More important than testing is the message that if a patient has mild symptoms, is to self-isolate.

San Diego Public Health is now following California Department of Public Health (CDPH) guidelines for testing priority. Priority levels 1 & 2 should be our top focus. In certain cases, testing of Priority 4 symptomatic patients without associated concerns can be considered. I would expect that Riverside County may follow similar guidelines, but each County may have their own specific guidance. For brevity, I am only including scenarios that pertain to us as pediatric providers.

Priority 1

- Symptomatic* Healthcare workers
- Persons identified for testing by Public Health (i.e. residents/staff of homeless shelters, etc.)

Priority 2

- Symptomatic* people having underlying conditions/risk factors
- Asymptomatic healthcare workers (particularly those in nursing facilities or hospital workers)
- Symptomatic* persons in essential health (not identified in Priority 1) and first responders
- Screening of vulnerable populations not identified above (symptomatic* and asymptomatic)
 - HIV/AIDS, homeless, those in rural areas, racial/ethnic groups, Native Americans, older adults
- Symptomatic* children being direct cared for by an older caregiver or caregiver with underlying conditions [Note: CDPH nor SDPH does not specifically identify this group but we feel that this falls into Priority 2 instead of Priority 4].

Priority 3

• Symptomatic* essential workers

Priority 4

- Symptomatic* patients/people who are low-risk (for community-based testing purposes)
- Surveillance testing of asymptomatic persons

*Symptoms= fever, cough, sore throat, nausea, vomiting, diarrhea, muscle aches, fatigue, loss of taste or smell. Note that elderly people (and children) might not develop fever.

IgG Antibody Testing

- There are now (4) antibody tests on the market that have received FDA Emergency Use Authorizations (EUA).
 - o One is the DiaSorin used at UCSD.
 - Another is the Abbott IgG is being run at Quest and at Radys and is felt to be very sensitive
 - It is highly suggested that samples are collected at least 14 days after the start of symptoms.
 - For the time being, specimens should be sent to Quest unless you are granted authorization by the ID/IC team at Radys.
 - As mentioned last week, patients can be sent to a Quest draw center at 1:00 PM or after daily.
 - Testing consideration at this time should be reserved for patients with a Hx of COVID-19 like illness or exposure to a COVID-19 contact AND either risk factors themselves or contact with other patients/caregivers at risk.

- Of the 4 antibody test products with an EUA, none have waived status (meaning that they cannot be performed in our offices).
- Note: there are now (3) Molecular/PCR tests with waived testing status (Abbott-ID Now, Mesa Biotech-Accula and the Cepheid-Xpert Xpress)
 - With molecular testing becoming more available in the community and opportunity to get our hands on the tests still months away, there is no major rush to need to provide this type of testing in our offices.

INFECTION PREVENTION & CONTROL-Contact & Droplet Precautions

No new updates

The following section is submitted by Dr. Michael Jacobson, CMIO

TELEHEALTH

The sign-up for all May CVC Video Visit sessions is now available from the Knowledge Base. Remember that all sessions except weekday lunchtime 2-hour sessions count towards your reduced FTE work schedule starting May 1. Please limit your sign-ups to one per day, meaning today you can go to SignUp Genius and sign up for one session. Then, tomorrow, you can you go in and sign up for another session. So by the end of this week, you can have a maximum of 5 sign-ups for the month of May.

KNOWLEDGE BASE (KB)

Please visit the CPCMG Knowledge Base for all sign-ups, knowledge articles, and tip sheets.

As a daily reminder to all staff and providers, if you have a fever (Temp \geq 100.0), please do not come to work! If you are not feeling quite right, it is best to stay home. Besides taking care of yourselves, we need to keep co-workers and patients healthy.

Thanks,

-KM

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