



11/05/2021

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

From: Morris, Kenneth MD <kmorris@rchsd.org>

Sent: Friday, November 5, 2021 3:29 PM

Subject: CPCMG/RCPMS COVID CHRONICLES (edition #191)

These are weekly updates for all CPCMG and RCPMS staff. Other valued community members which include 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.

Narrative

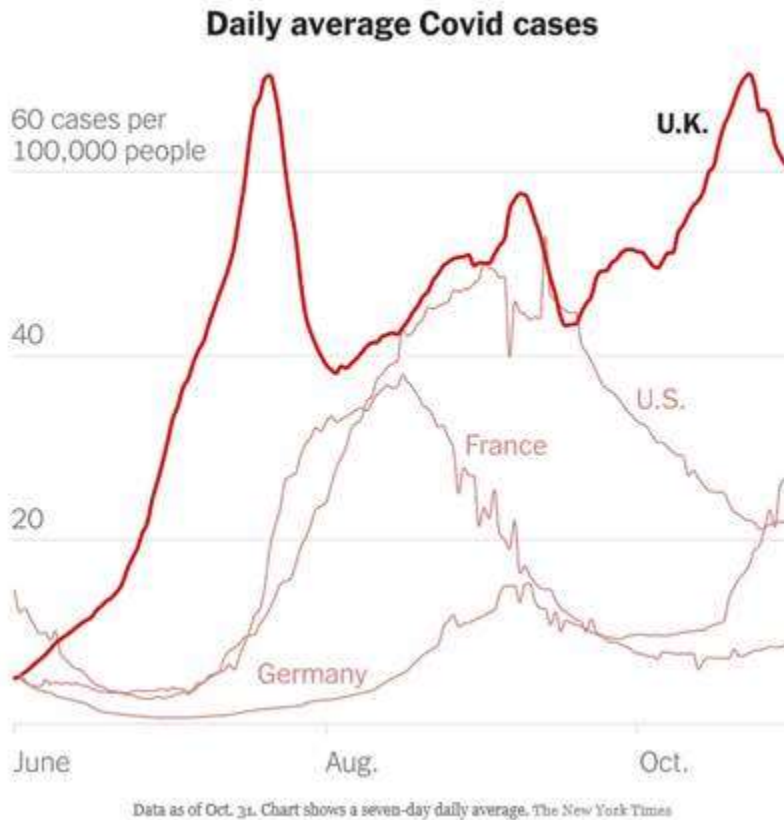
I'm venturing a guess that there isn't one of us that isn't ready to be done with Covid? Unfortunately, just because we are ready, it doesn't mean that Covid is ready. That has been a painful lesson for all of us on multiple occasions. Fool me once shame on Covid. Fool me twice, three, four, five times, isn't it shame on us? As cases start to fall, everyone is ready to toss aside their masks, develop brain fog as to why we need to vaccinate and resume our lives like they existed pre-pandemic. On Tuesday of this past week, the NY Times highlighted the cautionary tale of what happens when a country ignores Covid. It is a glimpse into our future, should we follow Britain's pathway.

Over the past year, Britain has seen some major victories against Covid. They have also had some significant failures. They were among the early leaders in the vaccination effort and were among the first to reimpose behavior restrictions this past winter. Both efforts led to a precipitous drop in cases. In the fight against Covid, it hasn't all been peaches and cream though. This summer, Britain essentially reopened the entire country virtually without restriction. The result, cases have surged this fall, more so than the rest of Europe, the US and many other countries and the government has been resistant to reimposing combative measures once again. While the reasons are not entirely clear, the following are likely strong contributors:

1. **Not Enough Vaccination Effort:** Despite early successes, Britain waited to approve the 12-15 y/o vaccine until September, weeks after many students had returned to school.
2. **Waning Immunity:** Recent evidence suggests that immunity likely lasts for at least 6 months for most people (not all). However, immunity appears to wane for both people who have had Covid and for those vaccinated against Covid. Given

Britain's early adoption of the Covid vaccine, it may mean that they are having more of a problem with waning immunity than other later adopting countries.

3. **Behavior Modifications:** No masks (particularly for indoor settings) and no distancing appears to be an open invitation for inviting Covid as an unwanted guest to your family party. How many times are you going to be fooled?



We have previously commented in the Chronicles about how the US vaccination rates are lower than most other high-income countries. We have also commented that while vaccination is not the panacea in the fight against Covid, high rates likely matter as much as anything else. It is going to be hard to change the mindset of those that are eligible, but still have not received their vaccine. With that said, our country was thrown another lifeline this week in the fight against Covid.

After many months of anticipation, the Pfizer Covid vaccine for 5-11 y/o's has obtained the necessary FDA, CDC and State approvals with vaccinations beginning on Wednesday of this week. CPCMG has begun receiving initial allotments of vaccine and plans to initiate vaccinations during the week of November 8th. We know that for many, this day could not come soon enough. Both Dr. Rachel Perkins (Sanford) and Dr. Sarah Lindbäck (Gateway) were among the first families in San Diego to have their 5-11 y/o children vaccinated (each had two children receive the vaccine). Both doctors had their children go first to send the strong message that **Covid vaccines are safe, effective, and necessary.**



The next month or so will be somewhat chaotic as families mobilize to get their children vaccinated. We know that families see our pediatricians, nurse practitioners and physician assistants as some of the most trusted sources when it comes to deciding regarding the COVID-19 vaccine for their children. It is critical that we all have a consistent and unified message that the COVID 5-11 y/o vaccine is safe, effective, and necessary. We expect that the community is going to look at all the medical groups in San Diego and Riverside to get their COVID-19 vaccinations and CPCMG is no exception. We need all of you to help make this a reality. If there is one thing that we are exceptionally good at, it's providing immunizations. Let's get shots in arms!

Quick Hitters

- Grim news of the week: While the US has passed the 750,000 mark for Covid related deaths, the world has now passed the 5 million mark. Unfortunately, the totals are undoubtedly much higher...
- *What if I already had Covid, why do I need to be vaccinated?* This is a question that has been asked by many and used by many more in their justification to not get vaccinated. The short answer is that in a study of hospitalized patients with a COVID-19 like illness, unvaccinated people with a previous Covid infection were 5x more likely to have a positive COVID-19 test compared to vaccinated people with no previous Covid infection. The take home message is that the data from the study suggests that **vaccines are more protective than a previous infection against symptomatic COVID**. See the CDC [MMWR Report](#) released last week for more information on the topic.
- I hope everyone had a happy and safe Halloween. I would like to report that CPCMG & RCPMS now have their own Dr. Fauci working for us! Please see Float PSR, Jessica Porter's award-winning rendition of one our nation's icons.



The Quest for Immunity

- Immunity after a COVID-19 infection or COVID-19 vaccination is now said last at least 6 months with each group having a low risk of subsequent infection within that time frame (note: risk is not zero %). See the following [CDC science brief](#) for more information on the topic.
- **Covid Vaccine in 5-11 y/o**
 - Full FDA EUA & CDC Approval on Tuesday, November 2nd
 - Game Changer: vial of the 5-11 y/o vaccine is now good for **12 hours** instead of 6 hours once opened. It is also good for 10 weeks in the 'Fridge until opening.
 - Regarding the “tweeners” right before or after 12 y/o
 - If a child is due, they should get the vaccine that is available to them at the time
 - If they get their first dose at 11 y/o and then turn 12 y/o before the 2nd dose is due:
 - Dose #1: 5-11 y/o vaccine
 - Dose #2: 12 y/o and above vaccine
 - Vaccine to be given is based on age and not weight. There is no indication to give a “petite” 12 y/o the 5-11 y/o vaccine and nor is there an indication to give a husky 11 y/o the 12 and above vaccine
 - As with other vaccines, the Covid vaccine can be given for those with mild to moderate sx's assuming that they have been tested and are not due to Covid
 - The vaccine can be given in tandem with other vaccines, prior to other vaccines or after other vaccines with no minimal interval
 - Re myocarditis. With the lower dosing and with the experience that myocarditis in general is substantially lower in the 5-11 y/o age group, it is likely that an even lower-case rate of vaccine associated myocarditis will be observed
 - Symptoms After Vaccination & Schools
 - Based on the studies and reports so far, side effects after vaccination of the 5-11 y/o age group are significantly less
 - Back in February, Dr. Howard Taras created a letter (**attached**) about vaccine side effects and when students could return to school
 - Per Dr. Taras, our county health department is reviewing this letter themselves. It may be that they will permit students with typical

vaccine side effects to go to school if they feel well. They are going to get back to him soon with regards to this permission. In the meanwhile, Dr. Taras suggests that we can still follow the original letter.

- More information re the 5-11 y/o Covid vaccine in the Radys Town Hall section below.

Cases & Numbers (as of 11/5/2021)

- Nationally
 - Interestingly, much of the South which had been under siege from the sheer volume of cases this summer is now in the Substantial (Orange) tier. 10 States (no longer including CA) plus DC are now at the substantial transmission (orange) level with the remaining being at the high transmission (red) level.



- State
 - At the state level, average daily case numbers slightly decreased (5,683 vs 5,711) compared to the week prior (as did the test positivity of 2.5% à 2.4%).
 - CA slipped back to the “High Transmission” (Red) tier.
- Local
 - In San Diego, average daily cases slightly decreased (484 vs 533) compared to the week prior when they increased.
 - San Diego appears to have climbed back to the “Substantial Transmission” (Orange) tier after (2) weeks in the High Transmission (Red) tier.
 - In Riverside, cases decreased slightly (337 vs 367) looking at the daily average compared to the week prior.
 - Riverside remains in the “High Transmission” (Red) tier.
- Since last week’s Chronicles, we have had 1 new case in a staff member and no new cases in providers.

My Words of Wisdom message:

- **Don’t Wait—It’s not too late—Please Vaccinate!**

CDC & Public Health Words of Wisdom:

- **Avoid Crowds, wear masks if crowds cannot be avoided**
- **Do NOT come to work with any symptoms**
- **If unvaccinated, don't travel**

In today's edition, we have some updates on new and existing topics for the following:

- Vaccimeter
- Covid Cases (**NEW** case)
- COVID Hospital Admissions & MIS-C Hospital Admissions @ RCHSD
- School Decision Tree (updated 11/5/21)
- Rady Town Hall News
 - Physicians Town Hall Held 11/3/2021 re the 5-11 y/o Vaccine
 - ACIP Presentation Slides of Interest
 - Proportion of Pediatric Covid Cases in San Diego (0-17 y/o)
- SARS Co-V-2 Strain Mutations (updated)
 - AY.4.2 Sub Lineage
- Covid Testing Options (repeated)
- The Quest for Immunity-Vaccination Information (repeated)
- Monoclonal Antibody Regional Centers (MARC's)

RISK LEVEL-INCIDENT COMMAND

- Risk Level: 4
- Updates:
 1. Indoor Masking: mandatory regardless of vaccination status.
 2. High Volume Scheduling: now effective

COUNTY COVID-19 TRIGGERS

- Please click the Triggers [Scorecard \(SD County\)](#) to see how San Diego is doing with all 13 of the criteria metrics across the 3 categories. As of 11/3/21 (now updated weekly), San Diego is now failing 3 metrics.
 - **Community Outbreaks**: >7 new outbreaks in community settings in a 7-day period: **33 (up from 25 last week)**
 - **Case Rate**: >1.9 per 100,000 for the 7-day average case rate: **14 (up from 12.2 last week)**
 - **Influenza Like Illness**: Upward trajectory of influenza-like illnesses (ILI) reported within a 14-day period: **3.4% (up from 3.3% last week)**
 - **Testing Positivity**: Greater than 8% of positive tests as a percent of total tests, measured using specimen collection date in a 7-day period with a 7-day lag: **3.0% (up from 2.8% last week)**

VACCIMETER (as of 11/5/2021)

	% of Pop Fully Vaccinated	% ≥12 y/o 1 or More Doses	% ≥12 y/o Fully Vaccinated	Comments
CPCMG	100.0%			Last unvaccinated provider is now completed
RCPMS	93.7%			>20% increase from

				8/5-10/5
National CDC Vaccine Tracker	-----	78.4%	68.1%	
California CA Vaccine Tracker	-----	81.2%	73.3%	The CDC site appears to show higher numbers
San Diego SD Vaccine Rate	-----	90.9%	82.4%	
Riverside RS Vaccine Rate	-----	67.1%	60.3%	

COVID CASES (as of 11/5/21)

- **CPCMG (Provider) COVID Positive cases (confirmed): 24**
 - 0 NEW Provider Cases:
- **RCPMS (Staff) COVID Positive Cases (confirmed): 128**
 - 1 NEW Staff Cases:
 - A fully vaccinated PSR (no booster dose received) woke with mild headache and sore throat symptoms after a prolonged external exposure to a significant other who had tested positive 3 days prior. Contact tracing did not reveal any high-risk exposures.
 - 4 of 127 positive cases that are possibly work-related exposure (worker to worker). Two cases in question have identified breaks in PPE or social distancing protocols and a third is yet to be determined but is suspected to be a brief break in PPE.
- **CPCMG Patient COVID Positives & Interesting Cases**
 - As of 11/1/2021: >6,163 (↑42 in the past week). This number does not include patients testing positive at County sites or hospital labs outside of the Rady, Quest or Lab Corp network.

Riverside County Weekly Update Total Covid Cases: 366,725 (as of 11/4/21)

Riverside County Total Pediatric (0-17 y/o) Cases: 55,748 (15.2% of cases)

average # of new daily cases over the previous week	367
average # of new daily cases over the past 2 weeks	337↓

7 Day Test Positivity Rate: 5.0% (↑from 4.3%)

San Diego County Total Covid Cases: 373,181 (as of 11/4/21)

San Diego County Total Pediatric (0-19 y/o) Cases: 68,403 (18.3% of cases)

average # of new daily cases over the previous week	533
average # of new daily cases over the past week	484↓

7 Day Test Positivity Rate: 3.2% (↑from 3.1%)

Statewide Total Covid Cases: 4,680,273 (as of 11/4/21)

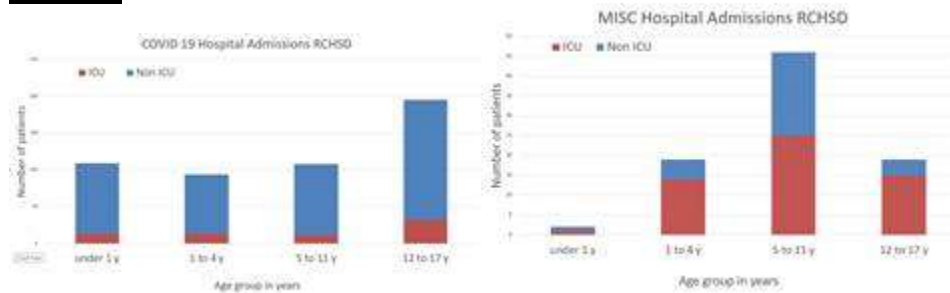
Statewide Total Pediatric (0-17 y/o) Cases: 695,940 (14.9% of cases)

average # of new daily cases over the previous week	5,711
average # of new daily cases over the past week	5,683↓

7 Day Test Positivity Rate: 2.4% (↓from 2.5%)

MIS-C: 690 (↑13) total cases as of 11/1/2021

COVID HOSPITAL ADMISSIONS & MIS-C HOSPITAL ADMISSIONS @ RCHSD



- Take home point: MIS-C highest in the 5-11 y/o age group

SCHOOL DECISION TREE (last updated 11/5/21)

The school decision tree is linked as follows: See [COVID-19 > Health Practices > Guidelines for Schools \(sdcoe.net\)](#). It has been last updated November 5th with a few key changes.

RADYS TOWN HALL NEWS (courtesy of Dr. Bradley/Dr. Pong/Chris Abe) Physicians Town Hall Held 11/3/2021 re the 5-11 y/o Vaccine


- Dr. John Bradley, Dr. Alice Pong, Dr. Mark Sawyer, and Chris Abe
- Please see the **attached** PPT from the Radys Town Hall focusing on the 5-11 y/o vaccine

ACIP Presentation Slides of Interest

Benefits and risks of Pfizer-BioNTech COVID-19 vaccine for children 5–11 years of age

Benefits

- Prevention of COVID-19 cases
- Likely prevention of hospitalizations, MIS-C and deaths and post-COVID conditions
- Possible prevention of transmission
- Greater confidence in safer return to school and social interactions



Risks

- Myocarditis or other rare events after mRNA vaccines?
- Short-term reactogenicity

SARS-CoV-2 epidemiology in children aged 5–11 years

- **Children are at least as likely to be infected with SARS-CoV-2 as adults**
 - Over 1.9 million reported cases; seroprevalence estimated ~38% among 5–11 years in Sept 2021
 - Infections in children less likely to be reported as cases than infections in adults
- **Children 5–11 years of age are at risk of severe illness from COVID-19**
 - >8,300 COVID-19 related hospitalizations as of mid-October
 - Cumulative hospitalization rate is similar to pre-pandemic influenza seasons
 - Severity comparable among children hospitalized with influenza and COVID-19, with approximately 1/3 of children 5–11 years requiring ICU admission
 - MIS-C most frequent among children 5–11 years
 - Post-COVID conditions have been reported in children
- **Secondary transmission from young school-aged children occurs in household and school settings**

Other pediatric vaccine preventable diseases: Hospitalizations per year prior to recommended vaccines

	Hepatitis A ¹	Varicella ² (Chickenpox)	Influenza ³	COVID-19
Age	5–14 years	<20 years	5–17 years	5–11 years
Time period	2005	1988–1995	2003–2007	Oct 2020–Oct 2021
Hospitalization Burden (per 100,000 population)	<1	4–31	30–80	25

¹<https://www.cdc.gov/nczod/dnzs/immunization/000001.htm>

²Meyer RK, Seward JF, Johnson KL, Whitman MC. Hospitalizable measles before vaccine licensure in the United States, 1975–1994. *J Infect Dis*. 2000;282(2):348–356. doi:10.1093/infdis/282.2.348

³<https://www.cdc.gov/nczod/dnzs/immunization/000001.htm>

Other vaccine preventable diseases: Deaths per year prior to recommended vaccines

	Hepatitis A ¹	Meningococcal (ACWY) ²	Varicella ³	Rubella ⁴	Rotavirus ⁵	COVID-19
Age	<20 years	11–18 years	5–9 years	All ages	<5 years	5–11 years
Time period	1990–1995	2000–2004	1990–1994	1966–1968	1985–1991	Oct 2020–Oct 2021
Average deaths per year	3	8	16	17	20	66

¹Age Thor, Stone ME, Bell BP, Threlkeld J. Declining hepatitis A mortality in the United States during the era of hepatitis A vaccination. *J Infect Dis*. 2017;215(12):1977–1982.

²National Notifiable Diseases Surveillance System with additional meningitis and tubercle data from Empirical Meningococcal Infection Surveillance for 2019–2020.

³Meyer RK, Seward JF, Johnson KL, Whitman MC. Hospitalizable measles before vaccine licensure in the United States, 1975–1994. *J Infect Dis*. 2000;282(2):348–356. doi:10.1093/infdis/282.2.348

⁴Wright TM, Murphy TH. Historical comparison of mortality and morbidity for vaccine-preventable diseases in the United States. *JAMA*. 2010;303(12):1492–1499.

⁵Wright TM, Kogut EG, Johnson KL, et al. The epidemiology of rotavirus diarrhea in the United States: surveillance and estimates of disease burden. *Clin Infect Dis*. 1998;26(1):14–20.

Estimated benefits for every million Pfizer-BioNTech COVID-19 vaccinations in children 5–11 years of age using pandemic-average incidence

Recent Epidemiology 5–11 years	Pandemic Average 5–11 years
58,204 COVID-19 cases prevented	18,549 COVID-19 cases prevented
226 hospitalizations prevented	80 hospitalizations prevented
132 MIS-C cases prevented	42 MIS-C cases prevented
72 ICU admissions prevented	26 ICU admissions prevented

Assumptions: Benefits accrue over 100 days (8 months) of against asymptomatic COVID-19; 90% of against hospitalization; 90%

Data Sources: COVID-19 Tracker <https://www.cdc.gov/covid-data-tracker/>; FluSurvilliance <https://www.cdc.gov/flu-surveillance/>; COVID-19 Data Tracker <https://www.cdc.gov/covid-data-tracker/>

Source: <https://www.cdc.gov/covid-data-tracker/>

Recent epidemiology data from the week ending on 9/15/2021. Figures are approximate and are averaged for the entire pandemic through the week ending on 10/16/2021.

Summary

Since beginning of the COVID-19 pandemic, among U.S. children 5-11 years of age, there have been

1.9 million cases
8,300 hospitalizations
2,316 MIS-C cases
94 deaths

COVID-19 is now
vaccine preventable

Proportion of Pediatric Covid Cases in San Diego (0-17 y/o)

- In the past 3+ months, the proportion of pediatric cases has jumped from 14.1% à 27.8%

Episode Date	Disease week	Total Confirmed Cases (all ages)	Total Confirmed Cases 0-17 years	Percentage (%) 0-17 years
July 4-10	27	2002	282	14.1%
July 11-17	28	3355	591	17.6%
July 18-24	29	5185	895	17.3%
July 25-31	30	6858	1214	17.7%
August 1-7	31	8641	1475	17.1%
August 8-14	32	9323	1802	19.3%
August 15-21	33	8881	1760	19.8%
August 22-28	34	8008	1776	22.2%
August 29-Sept 4	35	6843	1695	24.8%
Sept 5-11	36	5187	1290	24.9%
Sept 12-18	37	4417	1001	22.7%
Sept 19-25	38	3631	771	21.2%
Sept 26-Oct 2	39	3458	780	22.6%
Oct 3-9	40	3134	834	26.6%
Oct 10-16	41	2529	703	27.8%

Source: Dr. Seema Shah, San Diego Public Health Medical Director of Epidemiology

SARS CO-V-2 STRAIN MUTATIONS (updated)

There is now a new variant classification from the CDC:

- [Variants Being Monitored \(VBM\)](#) – Includes: Alpha, Beta, Gamma, Eta, Iota, Kappa, Epsilon, Zeta and Mu
- [Variant of Interest \(VOI\)](#) – Currently-None
- [Variant of Concern \(VOC\)](#) – Includes the Delta variant (B.1.617.2 & sub lineages)
- [Variant of High Consequence \(VOHM\)](#) – Currently-None

Origin/Lineage Name: Variants Being Monitored (VBM)	Name
British-B.1.1.7	Alpha
South Africa-B.1.351	Beta
Brazil-P.1	Gamma
CA-B.1.427/B.1.429	Epsilon
Brazil-P.2	Zeta
Multiple-B.1.525	Eta

Philippines-P.3	Theta
NY-B.1.526	Iota
India-B.1617.1	Kappa
Peru-C.37	Lambda
Colombia-B.1621	Mu

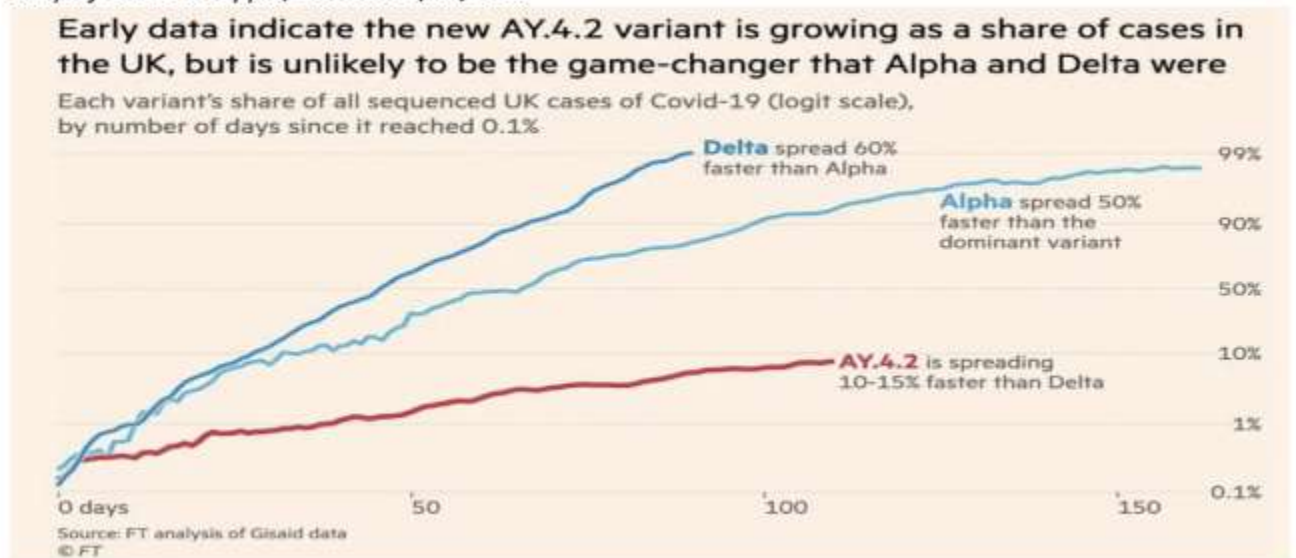
CA Variant [Tracker](#) & [Outbreak.info](#) & [CDC CA Breakdown](#)

CA Variants as of 11/4/21	AY.44 (Delta+)	AY.3 (Delta+)	AY.20 (Delta+)	AY.25 (Delta+)	AY.26 (Delta+)	B.1.617.2 (Delta)	(Other Lineages)
Lineage % (over 30 days)	22%	7%	4%	12%	4%	40%	10%

AY.4.2 Sub Lineage

- Some increasing press on this variant
- Two notable spike protein mutations
- 10% of cases in the UK, only 4 cases in the US to date
- May be more infectious than the original Delta variant, but likely not the reason for the increase in COVID-19 cases in the UK

Graph from Eric Topples, Twitter 10/18/2021



COVID TESTING OPTIONS

[State of CA COVID-19 Testing Sites](#)

[San Diego County Testing Sites](#)

[Riverside County Public Health Testing Sites](#)

[County of Riverside Funded Testing Locations](#)

Rady Children's:

- **COVID Drive Through Testing**
 - 8001 Frost Street (parking lot near the vaccine clinic)
 - Hours are 7 a.m. to 3 p.m., seven days a week
 - Complete an order for your patients in Epic OR have your patient self-order: <https://redcap.rchsd.org/surveys/?s=XXPXJTT9MD>
 - Call 858-966-8399 Monday-Friday 8:30am-5pm for a drive through appointment
- **Walk in Testing at the MOB**
 - 3030 Children's Way; San Diego, CA 92126
 - Hours are 7:30-5:00 M-F, 9-1 on Saturday
 - Wait times have been as long as 2-3 hours
- Fill out the testing request form first then call 858-966-8399 Monday-Friday 8:30am-5pm
- Patient filled out request: <https://redcap.rchsd.org/surveys/?s=XXPXJTT9MD>

We also learned that the Private Covid Clinic: www.covidclinic.org is offering no-cost testing for people that have been exposed and cannot easily get an appointment with CPCMG or one of the State/County offerings. Some CPCMG providers have gone themselves and there has not been a charge for PCR testing.

THE QUEST FOR IMMUNITY-VACCINATION INFORMATION

San Diego County COVID-19 Vaccine Web Page: [San Diego County Public Health COVID-19 Vaccines](#)

CA COVID-19 Vaccine Web Page: <https://covid19.ca.gov/vaccines/>

CDC COVID-19 Vaccine Web Page: <https://www.cdc.gov/vaccines/covid-19/index.html>

CDC V-Safe Registration: <https://vsafe.cdc.gov/>

CDC COVID-19 Vaccine Special Considerations: [CDC Interim Clinical Considerations](#)

CA My Turn: <https://myturn.ca.gov/> (use google)

CA Digital COVID-19 Vaccine Record: <https://myvaccinerecord.cdph.ca.gov/>

CDC COVID-19 Vaccine Errors/Deviations: [CDC Covid Vaccine Errors/Deviations](#)

CDC COVID-19 Vaccine Info for Parents of Children &

Teens: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/recommendations/adolescents.html>

CDC Pediatric Professional COVID-19 Vaccine Tool

Kit: <https://www.cdc.gov/coronavirus/2019-ncov/vaccines/toolkits/pediatrician.html>

Regional Covid Clinic Clinical

Direction: <https://cpcmg.knowledgeowl.com/help/covid-vaccine-administration-guidelines>

MONOCLONAL ANTIBODY REGIONAL CENTERS (MARC'S)

Refer COVID-19 patients at high-risk for disease progression for monoclonal antibody treatment as early as possible in their disease, for greatest effectiveness while their symptoms are still mild or moderate.

- **San Diego:** To access, have you or your patients call: **619-685-2500**.
 - Of note, the MARC in Escondido closed this past Friday, 10/22.
- **Riverside:** No MARC's, but Riverside University Health System, phone number 951-486-6520 has been able to accommodate.

THE FOLLOWING TOPICS HAVE REPEATED GUIDANCE FROM PREVIOUS COVID CHRONICLES EDITIONS (thanks to Dr. Jacobson, they are now hyperlinked)

- **School Covid Decision Tree:** [COVID-19 > Health Practices > Guidelines for Schools \(sdcoe.net\)](#)
- [TESTING-FALSE POSITIVE EVALUATION \(last 12/11/2020\)](#)
- [NEWBORNS & COVID-19 POSITIVE MOTHERS \(last 7/31/2020\)](#)
- [IN CLINIC ALBUTEROL & NEBULIZER GUIDANCE \(last 9/4/2000\)](#)

Knowledge Base

Please visit the [CPCMG Knowledge Base](#) for all sign-ups, knowledge articles, and tip sheets.

Thanks,

-KM

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