

January 20, 2022 Update for Local Partners Q&A

| | |
|---|--|
| When should someone get tested for COVID once they start having symptoms (day symptoms start = day 0)? | If someone becomes symptomatic, they can be tested immediately. |
| Why do healthcare workers have a stricter quarantine period especially during staffing shortages? If the hospital does not care for known COVID patients, can the General Population guidelines be used? | We are following the CDC guidance for health care workers and recommend that all healthcare settings follow that guidance. |
| I know our total case counts do not include the positive "home" tests as they are not reported. Any estimate how many of those cases are out there? The advice being given now is if your home test is positive and you are symptomatic, no need to PCR confirm, correct? | No idea how many are out there! Correct, if someone is exposed or symptomatic and they get a positive on a home test, they should just isolate themselves and no need for a confirmation. The only thing we tell people is that public health can't provide them work release letters based on home tests in case their employer requires it. |
| I have a quick question, we have a child who was diagnosed with MISC back in Sept. 2019 at Children's Hospital before COVID was identified. She just tested positive for COVID-19 last Wednesday. What should I be looking at or considering in her case? Is she more susceptible to another case of MISC? What has anyone seen in kids with prior MISC, have any been diagnosed a 2nd time during COVID? | I don't know that I have seen much on reinfection MISC cases. If you can email this question into the EpiHotline then the epi that oversees the MISC cases can either answer it or maybe send on the CDC expert. |
| Are we still expected to report outbreaks? Is it still 5 cases or more? | Yes, if you have identified an outbreak please let KDHE epi know. |
| Link to the updated Isolation/Quarantine guidance? | <p>Isolation/Quarantine Guidance: https://www.coronavirus.kdheks.gov/DocumentCenter/View/134/Isolation--Quarantine-Guidance-and-FAQs-PDF---11922</p> <p>Isolation Quarantine Release Graphic: https://www.coronavirus.kdheks.gov/DocumentCenter/View/1086/Isolation-Quarantine-Release-Graphic-KS-PDF---11922?bidId=</p> |
| Is there any concern if the antigen test is positive on day 10 and patient is asymptomatic? Do they need to continue to isolate? Do they need to continue to test? | They would not need to continue isolate. If they don't have symptoms they can be released from isolation. No need to test further. |
| If a business (not healthcare provider) is thinking of using Covid-19 POC tests (BinaxNOW), for day 6 testing of employees either quarantined or in isolation, are they required to report all test results performed, both positive and negative, to KDHE? | If the business is using the point of care product and is administering the test as a CLIA waived lab, then yes. If they are allowing employees to test themselves with OTC versions of the test, then it is not reportable. |
| Has there been any changes to the length of hospital isolation for positive Covid? | I'm not sure exactly what you mean here. If you are asking about the isolation period for severely ill people like those who would be hospitalized it would be 10-20 days. |

| | |
|---|--|
| Is there a reinfection after you finish an infection period(D or O)? Does it matter if it is Delta or Omicron? So, If you are infected with Delta, can you become re infected with Omicron? Can it be at the same time, different time? Does it matter? | Yes, you can be re-infected with a different variant. So, infection with Delta and then a reinfection with Omicron we are seeing. Not seeing "at the same time" among the whole genome sequencing data. |
| We have a positive case that has two jobs, this person works for a daycare and has another job working at a restaurant. Are we expected to investigate this case two different ways because the isolation times differ from both jobs? | I would think that this person, if they meet criteria, can be released from home isolation after 5 full days but CANNOT return to work at the daycare until they are done with 10 full days. Meaning, if they mask, they can return to work at the restaurant on days 6-10 but cannot work at the daycare. |
| The quarantine period for the household contact is now potentially as little as 10 day in home quarantine then mask for 5 days? (as long as they HHC is asymptomatic and willing to wear mask) | Correct |
| If students return to school in days 6-10 of infection if resolving, should they be participating in close-contact activities at school? Example - sports, school dances, etc. Especially with many wearing cloth masks or wearing masks incorrectly? | If they can wear a mask consistently and correctly for days 6-10, they can participate but you are correct that it would be safer if they don't participate. |
| If KDHE is no longer doing contact tracing, especially in schools, how or who will be telling the public how long they must quarantine, and how or who will be monitoring compliance? | We are moving into a phase of the pandemic response where individuals will be educated on what it means to be a case and what it means to be a close contact. If a case investigation is done and the case possibly exposed people in a high risk setting like a daycare, the case investigator (Public Health) will let the facility know about the exposure so the facility can identify the close contacts and let them know about their exposure. But, with the surge in cases, Public Health is not going to get to every case in time so we are trying to educate people so they can take personal responsibility to let people know if they were exposed. |
| Will public health still be inquiring a positive case about their household contacts? | If a case is being investigated, we will talk to them about what their infectious period looks like and encourage them to tell their close contacts (instead of getting the names and PH contacting the contacts). If they work, reside or attend a high risk setting like a daycare, Public Health will inform the setting of the exposure. |
| How is the availability of Kansas testing supplies? If possible, are supplies available to order? | Any of the proprietary cartridges or systems seem to be low on supplies. I have heard of Roche and Hologic having trouble. The state does not have either of the supplies you are requesting. It seems that kits and loose reagents are available so most of the commercial labs are doing OK. We recommend looking for an alternative testing platform to help get through the shortage. |

| | |
|--|---|
| Can I get a link or the Memo for schools on their testing now or the next 30 days? | https://www.coronavirus.kdheks.gov/DocumentCenter/View/2413/Memo-on-close-contact-identification-in-K-12-settings---Signed-01172022?bidId= |
| If an individual has two household members that are COVID positive, lab confirmed cases, and the individual is now exhibiting COVID symptoms is there any reason for being tested? It would appear with the transmissibility of omicron the test provides little benefit. | A test would not be necessary. This person would be epi linked to a case and is symptomatic so they would be considered a probable case. |
| How are we supposed to know the prevalence of Omicron vs Delta in our county / region? | We have been trying to get through counties so that there is a geographic representation, but at this time, based on the counties and locations we have seen, it is most likely that the majority are omicron. |
| Were the quarantine/isolation guidelines for close contact that were just reviewed only for the general public or do they apply to healthcare as well? | Farah went over the Isolation and Quarantine Release graphic which is for the general public https://www.coronavirus.kdheks.gov/DocumentCenter/View/1086/Isolation-Quarantine-Release-Graphic-KS-PDF---11922 |
| Are boosters being noted to increase the ability to create more neutralizing antibodies? | The study that Farah went over was specifically talking about whether it was more effective to mix and match your primary vaccine and booster or not. The finding was that mixing and matching between the mRNA vaccines didn't make the immune response better. Where it was more effective was for people that got Johnson and Johnson for their primary series and then mRNA for boost. |
| Discrepancy Article link presented within Phil Griffin's presentation. | https://www.usnews.com/news/health-news/articles/2021-12-21/uneven-reporting-raises-doubts-about-cdc-vaccination-numbers |
| Omicron Literature on Farah Slides states, "the combination of original vaccine and booster vaccine did not impact the amount of neutralizing antibody against Delta or Omicron with the exception of patients that received the Janssen as the original and booster vaccine had lower neutralizing antibodies than other groups". I guess I'm just confused regarding this statement since right now if you haven't been boosted after your 5-month window you're considered unvaccinated? Can someone please explain this? | The study describes an experiment where they looked to see if there was a difference in the antibodies that a person developed if they mixed and matched their booster or not. The study showed there wasn't any particular advantage to mixing and matching your booster EXCEPT for people that took Johnson and Johnson, that group did benefit from getting an mRNA booster rather than a Johnson booster. |

| | |
|---|--|
| How many months after boost dose are you able to get a 4th boost dose? What is the month span in between? | <p>A booster dose of COVID-19 vaccine is recommended for everyone ages 12 years and older (Pfizer-BioNTech for ages 12–17; an mRNA vaccine preferred for ages 18 years and older):</p> <p>At least 5 months after completion of an mRNA vaccine (Pfizer-BioNTech or Moderna) primary series.</p> <p>At least 2 months after completion of a Janssen COVID-19 Vaccine primary dose.</p> |
| Where is KDHE at with getting testing supplies for the CTP program? | We are looking for a delivery this week that will enable us to provide some supplies to our partners. Please reach out to Autumn the coordinator of Community Testing Partners and she can let you know where we are with that. |
| Can the links for the webinars about the new gray cap Pfizer vaccines be shared again? | https://www.pfizermedicalinformation.com/en-us/medical-updates |
| News is reporting N95 and KN95 masks to be sent to pharmacies and community health centers from federal government for the public to pick up next week. Do you know anything about it? | President Biden announced this yesterday, but the masks have not been made available yet. These are coming from the National Stockpile and will be placed in pharmacy chains but that is all the details we have right now. |
| Are hospitals able to get the oral treatments? | Not at this time. KDHE is implementing the oral antiviral distribution strategy which does not engage hospitals at this time. |
| What was the max per facility of sotrovimab this week? Previously it was maxed at 12 per facility. | A majority of facilities are still receiving 6 or 12 but a couple received a higher allocation due to the calculation methodology. |
| Any news on oral antiviral availability for health-systems with outpatient pharmacies? Thank you. | KDHE is implementing the oral antiviral distribution strategy which does not engage hospitals at this time. |
| How often is the KDHE Variants page updated on KDHE Covid page? | It is updated every Monday, Wednesday, and Friday excluding state holidays. |
| I believe in the past tests were mentioned that would identify both Covid and influenza. Are these available? | Some antigen tests for this do seem to be available. Quidel or BectonDickenson are a couple. |
| Is it possible to bring pressure on insurance companies to cover Remdesivir, or at least provide quicker coverage decisions? | There are discussions going on at the federal level about coverage but is unclear where it stands currently. |
| We received more bam/ete and Regeneron-CoV this week. With being all omicron, will distribution of these agents stop? If we can no longer use, is there an option to send back or distribute to countries with Delta? | If you would like to stop allocations to your facility, please email Michael McNulty at mike.mculty@ks.gov |
| Can you post the link for the weekly reporting needed? | https://teletracking.protect.hhs.gov/ |

| | |
|--|---|
| Is there any chance that Remdesivir will be used in post exposure prophylaxis? | Understanding is that it is currently treatment only as an off-label use. More information is available on HHS therapeutics webpage. |
| Is someone who gets a booster considered immune immediately? If so, can someone in home quarantine get a booster and use it to get out of home quarantine. | Per CDC they are considered immune immediately, although in reality it does take a few days for your immune system to respond. No, you cannot use getting boosted as a way out of quarantine because exposure has already occurred. |
| I've had nursing homes tell me that they do not have to report cases to state any longer, so they are not calling us or notifying us of cases. They are still being entered into EpiTrax system, so I see the address and find out that way. There has not been a change in this guidance correct? | All test results are still reportable to KDHE so we should still know about all cases. They need to report any point of care results through the Reportable Disease Portal or LabXchange. |