

## 7-15-21 COVID-19 Update for Local Partners Q&A

<p>Will hospitals be getting results of variants for individual specimens that we send to KDHE or other reference labs?</p>	<p>Currently most laboratories performing sequencing analysis (which is the only definitive method to determine if a sample is a variant) are not able to report variant/sequencing results directly to providers based on CMS guidelines. This result is always provided to the state epidemiological surveillance system and results can be discussed with the state epidemiology team.</p>
<p>We have had some vaccinated staff members test positive and expose others in their department. Hypothetically if this had happened in a patient care area how should we deal with potential patient exposures? Patients are not currently required to wear masks unless in common areas. Would you recommend having patients wear masks while in their hospital room to avoid exposures?</p>	<p>If someone worked while they were infectious, you would have to assess for close contacts regardless of mask usage. Mask usage is great; I would encourage patients to wear masks to reduce their risk of getting sick. But, regardless of mask usage you would have to look at who would have been in close contact of those infected individuals. Among the close contacts, if they aren't fully vaccinated, then they should quarantine. You can work with the local health department so that everyone is on the same page about how long of a quarantine.</p>
<p>We've been getting asked lots of questions about booster doses.....do we have any information regarding these? Such as when, will it just be 1 dose, do you have to get the same brand as what you've had previously?</p>	<p>ACIP will be discussing clinical considerations for booster doses in immunocompromised individuals during their meeting on July 22. The ACIP meeting agenda can be found here: <a href="https://www.cdc.gov/vaccines/acip/meetings/downloads/agenda-archive/agenda-2021-07-22-508.pdf">https://www.cdc.gov/vaccines/acip/meetings/downloads/agenda-archive/agenda-2021-07-22-508.pdf</a></p>
<p>Is there any updated quarantine guidance for those that are exposed to an individual who tested positive for the Delta variant? For example, do they have to quarantine for 14 days instead of just the 10 days if they remain asymptotic.</p>	<p>The guidance for shortened quarantine can be found here: <a href="https://www.coronavirus.kdheks.gov/DocumentCenter/View/1640/Shortened-Quarantine-Guidance-PDF---3-10-21?bidId=">https://www.coronavirus.kdheks.gov/DocumentCenter/View/1640/Shortened-Quarantine-Guidance-PDF---3-10-21?bidId=</a>. The recommendation is for a full 14-day quarantine. It's up to the local health department to decide if they will recommend the full 14 day or still allow a shortened quarantine.</p>
<p>Will the "Biweekly Vaccine Update" be updated? The last update I see is June 24th. <a href="https://www.kansasvaccine.gov/157/Availability">https://www.kansasvaccine.gov/157/Availability</a></p>	<p>This document will be updated as more significant changes occur such as new vaccines or changes in recommendations.</p>
<p>Samples have to be PCR only? No antigen?</p>	<p>We need to have the PCR extract in order to run the sequencing, which is why we are asking for positive PCR samples. If you have a positive antigen, you can reflex and get a PCR test first and then send it to us.</p>
<p>What does a sample of CT value &lt;30 mean? How is it determined?</p>	<p>CT means the cycle threshold number. It is inversely related to the amount of viral particles. So if there are a lot of viral particles, you'll see a lower CT value; if you have a case that is either in very early stages or at the tail end of infection, you may have less viral particles and it will therefore have a higher</p>

	CT value. We must have enough viral load from the sample in order to do genomic sequencing, so we prefer samples with CT values of 30 or less.
Is Missouri now on the travel restriction/quarantine list?	No, Missouri is not on the list. Mainly, Kansas has gotten a bit worse so Missouri doesn't meet the cutoff of rates 3 times worse than ours.
Myron, there was a drop from ~13% sequenced to ~7.5%, is that from a sharp rise in positives, different performing labs, fewer samples being sent, change in reporting period (there was mention of July) - or some combination?	You are correct. As cases increase and our capacity to sequence is stable, then the percentage of samples sequenced will go down. The reporting period discussion is really about when CDC updates their system.
Is there any statistics to show what vaccine individuals have been vaccinated with that have tested positive?	We are working on that analysis. Not published yet.
I am joining late so I apologize if this has already been discussed. If we send KHEL a sample for sequencing, do we continue with the genosequencing form or just the regular PCR requisition now that you are sequencing all samples?	You can just use the regular way of sending in samples and if they meet criteria (high viral load/low CT) we will try to sequence them. As positive cases grow, we may not be able to sequence every sample, so if there is a specific concern (such as hospitalization or vax breakthrough) let us know so that we can prioritize that sample.
Did all hospitals get this sequencing slides already, or do we need to send it out? And who do they call if they have questions?	We sent out a HAN to all laboratories, hospitals, etc. Hopefully they are aware but if you send your samples to them, you can certainly discuss it with them. Questions can go to the lab or to the EPI team.
Any word on stopping the front door screening for outpatient medical clinics yet?	There are no changes from CMS on this guidance yet.
When an individual does an at home COVID test, are they expected to report it to the LHD?	We encourage people who test at home to report to the LHD or KDHE and that those results be entered. Because these tests fall outside of CLIA, there is no obligation on part of individuals to report though. So, not mandatory but encouraged.
Can we rely on getting an adequate supply of the Moderna COVID-19 vaccine in the coming weeks so that we can immunize the students, faculty & staff @ K-State in late July, August & September?	Yes, KDHE continues to have COVID-19 vaccine available. COVID-19 enrolled providers can place orders through the SurveyMonkey vaccine order link ( <a href="https://www.surveymonkey.com/r/3QY82P6">https://www.surveymonkey.com/r/3QY82P6</a> ). If you have questions regarding COVID-19 vaccine ordering you can email <a href="mailto:kdhe.vaccine@ks.gov">kdhe.vaccine@ks.gov</a> .
Lacey - do you know of any rural health equity resources to use in our social media sites?	There is a library from the National Rural Health Association with resources specifically for vaccination (which can be found here: <a href="https://www.ruralhealthweb.org/programs/covid-19-pandemic/covid-19-vaccine-resources">https://www.ruralhealthweb.org/programs/covid-19-pandemic/covid-19-vaccine-resources</a> ). This also might help: <a href="https://www.ruralcenter.org/drchsd/communications-toolkit">https://www.ruralcenter.org/drchsd/communications-toolkit</a> , as well as this from Colorado: <a href="https://coruralhealth.org/covid19">https://coruralhealth.org/covid19</a> .

<p>Has the state recognized any trends specific to Native American communities?</p>	<p>Everything we have is online. Case data is here: <a href="https://www.coronavirus.kdheks.gov/160/COVID-19-in-Kansas">https://www.coronavirus.kdheks.gov/160/COVID-19-in-Kansas</a>. You might also explore the tab called SVI Explorer. We also have vaccination data here: <a href="https://www.kansasvaccine.gov/158/Data">https://www.kansasvaccine.gov/158/Data</a>. I haven't looked at the Native American data specifically in a while but it is all here.</p>
<p>We had a patient report he had both doses of COVID vaccine at the VA in Topeka, but the vaccines were not listed on WebIZ. Pt did provide us a copy of his card and it did have all the documentation on the card so did seem to be a valid card. Wasn't sure if this is an issue that it wasn't on webIZ</p>	<p>Vaccines provided at federal facilities are not being reported to states at this time. This is an issue we have been trying to get resolved for some time. The feds are working on this issue.</p>
<p>Is there a time frame for when KDHE will be providing School guidance for the Fall?</p>	<p>KDHE and KSDE recently met to discuss this topic and we will be releasing something soon that will likely line up with the CDC's updated Guidance for Schools from July 9.</p>
<p>Is Moderna going to allow 12 to 18 to get the vaccine.</p>	<p>The FDA is scheduled to review this request in the near future.</p>
<p>We test most of our patients with the Abbott ID Now PCR testing. Do you want us to send all positive samples to KDHE for variant testing?</p>	<p>Yes, but it would need to be a separate sample since the original sample is consumed in the test. I have heard that some labs are taking the sample out of the Abbott cartridge and performing an extraction and sequence on that. This would require more validation to know that it would be stable and detectable that way.</p>
<p>we do not send samples to our hospital, because we don't do the actual test , we send people to our local hospital and they test, Would it be okay to send this information out to the hospital?</p>	<p>Absolutely. Thank you.</p>
<p>Will KDHE be providing new guidance for hospitals?</p>	<p>Right now most hospital guidance is from CMS with reference to CDC (screening, masking, etc). KDHE does survey hospitals using the CMS guidance that is place. If there is a specific guidance you are asking about that would be specific to Kansas, let us know.</p>
<p>Is the Moderna vaccine effective against the Delta variant?</p>	<p>I understand that all COVID-19 vaccines will make those that get the Delta variant much less sick and likely won't need to be hospitalized. This may change as additional data is gained.</p>
<p>Re: Boosters, is it possible discussion of boosters for &gt;80yo be added to immunocompromised?</p>	<p>This will probably be discussed at the ACIP meeting on July 22nd.</p>

<p>Is there an ACIP document somewhere that says we can give COVID vaccine to 12 and older the same time we give other vaccines?</p>	<p>The CDC Interim Clinical Considerations for use of COVID-19 Vaccines has a section on coadministration of other vaccines.  <a href="https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html">https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html</a></p>
<p>Do you have any information on seeing a presentation of Rhinovirus and/or RSV during this time of year when we do not usually have those cases?</p>	<p>Yes, we are seeing an uptick in RSV through our syndromic surveillance data. This seems to be in line with what is happening around the rest of the country, too. Please contact <a href="mailto:Gabe.Haas@ks.gov">Gabe.Haas@ks.gov</a> if you are interested in learning more about syndromic surveillance data.</p>
<p>We use the Cepheid PCR testing platform, KDHE told our lab manager that we can send the same swab to KDHE for genome testing rather than collect 2 different samples, is that incorrect? Do we need to collect 2 swabs?</p>	<p>The Cepheid point of care machine is different from the Abbott ID Now; the Cepheid still has an original sample since you use only part of it to run the test, so a separate sample is not required with the Cepheid platform.</p>