



Update 18 - COVID-19 – From Office of the Medical Director 05 MAY2020 0800

To All EMS Personnel in the EMS System for Metropolitan Oklahoma City & Tulsa

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Key Content:

- **Educational Resource – COVID-19: The CIDRAP Viewpoint – Part 1**
- **Is it one and done? What’s the evidence for immunity post COVID-19?**
- **Safety in Returning to Healthcare Work after COVID-19 - CDC**
- **Infection Control in the Home and Beyond - CDC**
- **Educational Resource – The Osterholm Update – Episode 6**

Despite many feeling we’ve transitioned from the “end of the beginning” to the “start of the middle,” it’s important to remember that we don’t really have enough validated data to confidently answer our many questions about the curve.

It’s just a fact that even with some wearing masks and being thoughtful in physical distancing, human face to face interactions are rising dramatically in our communities as “safer at home” and isolation restrictions are loosened and lifted. Be prepared for an increase in COVID-19 in our communities, including among us. This is not the time to slack off in PPE actions, handwashing, or post-work infection control. The weather is getting much nicer (apart from those classic Oklahoma thunderstorms and tornadoes) but SARS-CoV-2 doesn’t take a summer holiday.

As much as I enjoy sharing thoughts and “take away” points from resources, sometimes it’s simply best to guide you to valuable sources and let you take them in for yourself. All of these are personally vetted, being applicable to our local situations. I encourage you to read these for more than you working as a medical professional. Read them for your family – especially your older loved ones to help advise them how to stay as safe as possible and your kids to help them put what is happening in perspective, having a more accurate view of what happens over the months ahead. Read these for your co-workers to help us stay safe, holding each other accountable in a supportive way, and promoting us staying physically well and mentally as upbeat as we can in this marathon of an infectious disease outbreak. Read these for your patients for their health, remembering why we signed up to serve.

AND importantly, then read these for you as a super valuable person apart from your job duty. These can be some emotionally trying days and nights. It doesn’t take thousands of COVID-19 patients in your line of sight to bring stress. We are still in a new unknown, though answers are emerging and will sharpen in accuracy over time. True expert teachings you can access now bring some certainties amidst the chaos and disruption. Some of these resources may take longer than 10-15 minutes to read and reflect. That’s a short sacrifice of time compared to the weeks behind us and the months ahead of us.

Please invest the time in you. I absolutely know you are worth it! So, here's those recent teachings for you, your loved ones, and your patients...

Educational Resource – COVID-19: The CIDRAP Viewpoint – Part 1

Dr. Michael Osterholm, Director of the Center for Infectious Disease Research and Policy at the University of Minnesota, his team of accomplished public health professionals, and some talented guests of theirs are now bringing us a new periodic resource: *COVID-19: The CIDRAP Viewpoint*. This is apart from their wonderful podcast (see below) and shouldn't be considered a substitute for it. There are some overlaps, but it's exciting to see great minds working collaboratively to bring us new insights based on impressive sources of research. John Barry (author of *The Great Influenza* recommended in Update 16) from Tulane University School of Public Health and Tropical Medicine joins in with the CIDRAP crew on this one.

I find the three models of what could be ahead as outlined in this report to be helpful in planning contingencies. No question that anytime we get relief from the "peaks" of disease, we should be working harder than ever to make sure we are as prepared as we can be for the next one, especially the dreaded Fall 2020 prediction model peak. It's important we strengthen PPE manufacturing capacities, improve supply chain management, and our local organizations' ability to get those needed safety products delivered in over the summer. Check out the first issue here:

https://www.cidrap.umn.edu/sites/default/files/public/downloads/cidrap-covid19-viewpoint-part1_0.pdf

Is it one and done? What's the evidence for immunity post COVID-19?

While we all understandably would like to think that once we have COVID-19 (and in the course of this pandemic, it is more likely when not if you and I get a case of this) we're protected ahead, the data just isn't there. Hopefully, it will be, but I wouldn't count on such until some proof emerges. The collective of infectious disease experts for now *think* the majority of COVID-19 patients that recover will have *some* degree of immunity, but for how long? Months, a few years, permanently? No one knows. We're still way too early in the global experience to have history on our side for the answers we seek.

For now, caution from the World Health Organization (WHO) in a statement focused on this topic, released on April 24th: <https://www.who.int/news-room/commentaries/detail/immunity-passports-in-the-context-of-covid-19> and in a nice framework for discussing it from National Public Radio (npr) at: <https://www.npr.org/sections/coronavirus-live-updates/2020/04/25/844939777/no-evidence-that-recovered-covid-19-patients-are-immune-who-says>

Safety in Returning to Healthcare Work after COVID-19

The Centers for Disease Control (CDC) updated guidelines for us as healthcare professionals to follow when evaluating the safety of returning to work after COVID-19 illness. Here's that link: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>

A key part of this guidance, updated April 30th, is this:

“Symptom-based strategy. Exclude from work until:

At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,

At least 10 days have passed since symptoms first appeared”

The key change is extending the time away from the workplace from a minimum of 7 to 10 days since symptom onset. This factors additional research findings that indicate this virus is hanging around in a contagious state longer than initially estimated.

Infection Control in the Home and Beyond – CDC

We spent some deserved time in Update 11 talking about ways to decrease the risk for COVID-19 in your home, among your family. With “reopening” of many businesses, even more important to think through your family’s strategies to keep Summer 2020 as infection free as it can be. The CDC has updated this resource for us to use in our work areas, our homes, and many other specific locations: https://www.cdc.gov/coronavirus/2019-ncov/community/reopen-guidance.html?deliveryName=USCDC_2067-DM26911

Educational Resource – The Osterholm Update – Episode 6

Dr. Michael Osterholm has gifted us with the sixth episode of The Osterholm Update – The Question of Immunity, posted on the CIDRAP website with release date 29 APR.

You can access it at this link: <https://www.cidrap.umn.edu/covid-19/podcasts-webinars/episode-6> or The Osterholm Update is available on Spotify, Apple Podcasts, or Google Play.

With so many interested in “getting this virus to get it over with” and the belief “we just need to get everyone infected for ‘herd immunity,’” I encourage you to invest the 37 minutes in this latest compilation of knowledge and insight from Dr. Osterholm.

Okay, that’s several links and I don’t want to overwhelm with any one Update, so we’ll close this one down. Don’t worry, lot’s more on the way to satisfy information hunger on COVID-19, particularly staying as safe as we can from it. As always, happy to answer questions you may have at jeffrey-goodloe@ouhsc.edu. I’ll do my best to work them into future Updates for the benefit of all.

Vigilance. Safety. Evidence-Based Service to Others.

Let’s be careful out there.

Dr. Goodloe