



DENVER - HEALTH ALERT NETWORK BROADCAST

MESSAGE ID: 20200601 1530

FROM: DENVER PUBLIC HEALTH and Colorado Department of Public Health and Environment

SUBJECT: D-HAN Update – COVID-19 Update

RECIPIENTS: Denver County: Family Med, IM, IP, ID, Hospitalist, Lab, Coroner, Pulm, Critical Care, Peds, OB/GYN, ED, UC, & Denver OEM

RECIPIENT INSTRUCTIONS: Please distribute to healthcare providers

HEALTH UPDATE

COVID-19 Update

Monday, June 1, 2020

******Health care providers: Please distribute widely in your office******

KEY POINTS:

- CDPHE guidance on testing of asymptomatic individuals can be found below.
- CDC has updated their guidance on health care worker exposures. In areas with minimal to no community transmission of SARS-CoV-2, sufficient resources for contact tracing, and no staffing shortages, facilities are encouraged to perform risk assessment of exposed health care workers and work exclusions for those with certain exposures. Details can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>
- As COVID-19 continues to circulate, individuals who have previously tested positive for COVID-19 may be re-exposed. While many questions about immunity and reinfection remain, it is reasonable for most people to not be quarantined if their new exposure occurs within one month of their initial symptom onset (or date of positive test if asymptomatic); this should only be applied to individuals who tested positive by PCR during their initial infection and may not apply in the context of managing an outbreak. People who live or work in high-risk settings such as long-term care or correctional facilities may be quarantined following a new exposure in the month after their illness onset out of an abundance of caution. These recommendations are likely to change as additional information becomes available.
- CDC is currently conducting a study on clinician-suspected cases of SARS-CoV-2 reinfection to help determine whether these cases represent reinfection versus intermittent shedding of viral RNA; more information is below.
- CDC has issued new resources and guidance on serology. Please see below for further details.
- Please continue to report all possible cases of Multisystem Inflammatory Syndrome in Children to CDPHE; these can be reported to alexis.burakoff@state.co.us via encrypted email or through the disease reporting line at 303-692-2700 or 303-370-9395 (after hours).
- CDC has issued new guidance on contact tracing at <https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/contact-tracing.html>. This guidance defines a close contact as any individual who was within 6 feet of an infected person for at least 15 minutes starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to positive specimen collection) until the time the patient is isolated.

FOR MORE INFORMATION, PLEASE CALL: Denver Public Health Disease Investigation at 303-602-3614

- CDPHE is asking providers to strongly encourage patients over age 65 and those with high-risk comorbidities (<https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-at-higher-risk.html>) to continue to maintain high levels of social distancing despite changes in state and local regulations. Furthermore, please remind all patients to wear cloth face coverings while in public (<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html>)
- Recent work by a CU/CSU modeling team demonstrates the public health importance of both strategies in suppressing transmission:
<http://www.ucdenver.edu/academics/colleges/PublicHealth/coronavirus/Pages/Modeling-Results.aspx>

Background information:

As of May 31, 2020 CDPHE has reported 26,378 cases of COVID-19. This count includes both lab-confirmed and probable cases. Case counts are updated daily and can be found at <https://covid19.colorado.gov/covid-19-data>.

Recommendations/Guidance:

Testing of asymptomatic individuals for COVID-19 by PCR

In addition to the testing priorities outlined in the May 15th HAN update, as testing capacity continues to expand, providers may consider testing asymptomatic individuals in high-risk professions, such as health care workers and first responders in areas where resources allow. The goal of this testing is to identify positive individuals who are presymptomatic or asymptomatic. These results should be interpreted carefully, as a negative test cannot clear someone from quarantine or guarantee that they are not in their incubation period. A positive test should be treated as a case of COVID-19 and investigated and isolated appropriately; however, a negative test does not guarantee that a person will not develop COVID-19 at any point in the future. Some health care facilities and other congregate settings such as prisons may consider serial testing of staff on a case-by-case basis.

Testing of asymptomatic individuals as part of contact tracing may also be warranted in order to identify presymptomatic or asymptomatic cases. When possible, consider testing approximately 7 days after the exposure occurs. It is important to note that a negative test has no impact on the duration of quarantine. A positive result should be treated as a case and investigated and isolated appropriately. As testing resources continue to increase, businesses may consider testing other asymptomatic public-facing workers a part of their workplace screening and prevention strategies in coordination with health care professionals who are able to provide appropriate interpretation of test results.

COVID-19 testing in Denver

City and County of Denver provides free testing to individuals in our community. Visit <https://www.denvergov.org/content/denvergov/en/covid-19/recovery-guidance/testing.html> for additional information and to register for any of the following testing opportunities:

- Drive-up testing site on the parking area of the Pepsi Center. Anyone **experiencing COVID-19 symptoms** or **who has been exposed to someone who tested positive** can register to be tested, particularly if they don't have access to a healthcare provider.
- Mobile testing to homebound individuals through the *Wellness Winnie*.



To help protect patients, staff and community while following city and state guidelines, Denver Health is testing all patients who are admitted to the hospital for COVID-19. For all non-hospitalized patients, testing is available with an order from a provider and an appointment. All patients entering a Denver Health facility can expect to have their temperature taken and be given masks to wear. Walk-in COVID-19 testing is not available at any Denver Health location. To schedule an appointment, call the Denver Health appointment line at 303-436-4949.

Individuals may search the 211 website to locate other COVID-19 testing sites in Denver and surrounding areas. For details, please visit: https://search.211colorado.org/search?terms=COVID19%20Testing&page=1&location=Colorado&service_area=colorado.

If your office is interested in becoming a community testing site for COVID-19, please contact Dr. Sarah Rowan of Denver Public Health at sarah.rowan@dhha.org.

CDC reinfection study

CDC's COVID-19 Clinical Team is working with the Emerging Infections Network (EIN, Operated by Infectious Disease Society of America) to identify clinician-suspected cases of COVID-19 reinfection in adults aged ≥ 18 years who meet the following criteria: lab-confirmed COVID-19 (SARS-CoV-2 PCR-positive) disease with clinical recovery for approximately 10 days after symptom onset or diagnosis (if asymptomatic) and subsequently had any of the following: 1) two documented negative PCR tests results followed by a positive result; 2) recurrence of symptoms with positive PCR results, or 3) positive PCR results for ≥ 30 days (without any recurrence of symptoms). Clinicians can submit information to: <https://ein.idsociety.org/surveys/survey/125/>.

CDC serology guidance

CDC has published new Interim Guidelines for Antibody Testing in Clinical and Public Health Settings which can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antibody-tests-guidelines.html>. These guidelines acknowledge that serologic testing can be offered **in addition to PCR** to help diagnose COVID-19 in individuals who present 9-14 days after illness onset. This will maximize sensitivity as the sensitivity of nucleic acid detection is decreasing and serologic testing is increasing during this time period. However, CDC also acknowledges the wide range of test performance of individual serologic assays. FDA now requires commercially marketed serologic tests to receive Emergency Use Authorization (EUA). Serologic assays that have EUA are preferred for public health or clinical use since their test performance data have been reviewed by FDA (<https://www.fda.gov/medical-devices/emergency-situations-medical-devices/eua-authorized-serology-test-performance>).

It is important that a provider understands both the sensitivity and specificity of the test being ordered, as well as the overall prevalence of disease in their community. The positive predictive value of each test (the likelihood that a positive test result is a true positive) can vary dramatically based on community prevalence rates. Furthermore, the guidelines emphasize that the **presence of IgG should not be interpreted as proof of immunity**.

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Serologic test results should not be used to make decisions about grouping persons residing in or being admitted to congregate settings, such as schools, dormitories, or correctional facilities. In addition, serologic test results should not be used to make decisions about returning people to the workplace.

Serologic testing **should** be offered as a method to help establish a diagnosis when patients present with late complications of COVID-19 illness, such as Multisystem Inflammatory Syndrome in Children.

Until more information is available about the dynamics of IgA detection in serum, testing for IgA antibodies is not recommended.

Information for patients about serology is available at:

<https://www.cdc.gov/coronavirus/2019-ncov/testing/serology-overview.html>

Additional information about serology testing is at:

<https://www.cdc.gov/coronavirus/2019-ncov/lab/serology-testing.html>

Other new or updated guidance of note:

- Updated dental guidance <https://www.cdc.gov/coronavirus/2019-ncov/hcp/dental-settings.html>
- Updated pharmacy guidance <https://www.cdc.gov/coronavirus/2019-ncov/hcp/pharmacies.html>
- Screening guidance at homeless shelters or encampments
<https://www.cdc.gov/coronavirus/2019-ncov/community/homeless-shelters/screening-clients-respiratory-infection-symptoms.html>
- Guidance for group homes for individuals with disabilities
<https://www.cdc.gov/coronavirus/2019-ncov/community/group-homes.html>
- Interim Testing Guidance in Response to Suspected or Confirmed COVID-19 in Nursing Home Residents and Healthcare Personnel <https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-testing.html> and Considerations for Performing Facility-wide SARS-CoV-2 Testing in Nursing Homes <https://www.cdc.gov/coronavirus/2019-ncov/hcp/nursing-homes-facility-wide-testing.html>
- Special populations: Caring for Newborns
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/caring-for-newborns.html>

For More Information:

- CDPHE COVID-19 web page: <https://covid19.colorado.gov/>
- CDC COVID-19 web page: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- Health care provider FAQs from CDC: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html>
- List of updated CDC guidance: <https://www.cdc.gov/coronavirus/2019-ncov/whats-new-all.html>
- Members of the public may contact CO Help at 303-389-1687 or 1-877-462-2911 with questions about COVID-19 to receive answers in many languages including English, Spanish (Español), Mandarin (普通话) and more, or email COHELP@RMPDC.org (for answers in English only).
- For questions about COVID-19 in Colorado, call the CDPHE Disease Reporting Line: 303-692-2700 or 303-370-9395 (after hours) or Denver Public Health 303-602-3614.