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# **HEALTH ALERT/UPDATE #166** COVID-19

#### TO: West Virginia Healthcare Providers, Hospitals and Other Healthcare Facilities

- FROM: Catherine Slemp, MD, MPH, Commissioner and State Health Officer **Bureau for Public Health** West Virginia Department of Health and Human Resources (WVDHHR)
- DATE: June 3, 2020

#### LOCAL HEALTH DEPARTMENTS: Please distribute to community health providers, hospital-based physicians, infection control preventionists, laboratory directors, and other applicable partners.

### OTHER RECIPIENTS: Please distribute to association members, staff, etc.

The West Virginia Department of Health and Human Resources (WVDHHR) and the West Virginia Bureau for Public Health (WVBPH) continue to respond to novel coronavirus disease (COVID-19) in West Virginia. WVBPH is working closely with state agencies, local and federal partners to monitor the ongoing risk of COVID-19 and to ensure the health and protection of state residents. Below is information pertaining to personal protective equipment (PPE) conservation efforts, laboratory and death reporting, online requests for testing through the WV Office of Lab Services, and Pediatric Multisystem Inflammatory Syndrome in Children (MIS-C).

#### Personal Protective Equipment (PPE) Decontamination Program

Intermediate term, the National Guard has identified an in-state solution for increasing supply of new product (N-95s and gowns). In the interim, the West Virginia National Guard (WVNG) is operating a Personal Protection Equipment (PPE) decontamination program in order to bridge the gap in the State's PPE supply shortage. The ongoing pandemic of COVID-19 has severely impacted the world-wide availability of PPE. In an effort to provide a sustainable stockpile in West Virginia, the WVNG and West Virginia University (WVU) developed a decontamination process involving vaporized hydrogen peroxide.

Health Care Providers (HCP) and first responders can contact their local Emergency Manager to identify the county pickup schedule and location for this WVNG service. The WVNG will operate trucks on routine, daily routes throughout the State in order to pick up "dirty" PPE dropped off by HCPs and first responders. PPE is transported to and processed through the vaporized hydrogen peroxide decontamination system designed specifically for this purpose. The WVNG process utilizes multiple validation tests including biological indicator control tests, batch sampling per test cycle, and chemical indicator strips. Following validation results, "clean" PPE is packaged and returned to the originating county drop off location by the WVNG for provider pick up and use. Please see procedure to follow in this WVNG N95 Respirator Decontamination Program Procedure document. Please address any questions or other requests to CPT Dwight Siemiaczko at dwight.a.siemiaczko.mil@mail.mil or call (304) 993-5633.

For additional PPE optimization information, visit: Strategies to Optimize the Supply of PPE and Equipment (CDC) PPE (COVID-19) Use and Conservation (NETEC)

Health Advisory: Provides important information for a specific incident or situation. May not require immediate action. Health Update: Provides updated information regarding an incident or situation. Unlikely to require immediate action.

This message was directly distributed by the West Virginia Bureau for Public Health to local health departments and professional associations. Receiving entities are responsible for further disseminating the information as appropriate to the target audience. Categories of Health Alert messages:

Health Alert: Conveys the highest level of importance. Warrants immediate action or attention.

# Case, Laboratory Results and Death Reporting

COVID-19 remains a Category I Reportable Condition in West Virginia, which means that health care providers and labs must report confirmed and suspected cases of COVID-19 to the local health department by phone immediately, followed by a written report. To improve efficiency and quality of electronic data reporting, WVDHHR is now waiving the requirement to notify local health departments by phone of suspected and confirmed cases. Below is a summary of required reporting for COVID.

1.) Positive COVID-19 cases are immediately reportable to the local health department.

<u>Case Reports</u>: Providers should fax case reports to the local health department of the patient's county of residence. Lab Reports: Laboratories not currently reporting electronically must fax positive reports to the local health department of the patient's county of residence.

- 2.) Negative COVID-19 Laboratory Results All labs are required to report negative COVID-19 results to the WVDHHR via electronic laboratory reporting.
- 3.) Deaths related to COVID-19 are reportable to the local health department for the patient's county of residence within 24 hours of the time of death by telephone or fax.
  - a. Instructions for Reporting COVID-19 Death
  - b. COVID-19 Death Report Form

## Diagnostic Testing; Online Testing Requests for Services Through the WV Office of Lab Services

COVID-19 testing capability throughout the state has been and is anticipated to continue increasing as hospitals advance in-house testing capacity, as supplies made available by the federal government and shared through the state laboratory increase, and via new commercial channels. Testing through clinical diagnostic labs can be based on clinical judgement and available supplies. As needed, <u>CDC priorities for testing</u> are available.

At present, testing arranged through the state Office of Lab Services (the state laboratory) is prioritized as per the <u>West Virginia Office of Lab Services Testing Criteria</u>. Providers may now request testing for COVID-19 for patients who meet public health testing criteria through the Office of Laboratory Services (OLS) using the <u>online form</u>. Approval for a COVID-19 test request through OLS can be authorized, or denied, within minutes.

Providers must answer specific questions regarding public health testing criteria to determine if their patient may be tested through OLS. If approved, the provider will be asked to complete information on the patient and the submitter. Once this is complete, an authorization number is provided on the following page, as well as instructions on specimen collection/submission and a button that provides the COVID-19 specimen form. The provided authorization number must be included on the COVID-19 specimen submission form. This form is required to be submitted with the specimen. Please be sure to follow the specimen collection and submission guidance to prevent any delays or issues. COVID-19 testing through the WVOLS is at no charge.

### Multisystem Inflammatory Syndrome in Children (MIS-C) Reporting

On May 14, 2020, the CDC issued an official <u>Health Advisory</u> in response to COVID-19-associated Multisystem Inflammatory Syndrome in Children (MIS-C). This advisory was based on the rapid emergence of pediatric cases of severe inflammatory syndrome with Kawasaki disease-like manifestations. The first U.S. cases were reported in early May in New York City. There is limited information currently available about risk factors, pathogenesis, clinical course, and treatment for MIS-C. The WVDHHR/BPH is requesting healthcare providers report suspected cases to the local health department immediately to better characterize this newly recognized condition in the pediatric population.

- An individual aged <21 years presenting with fever, laboratory evidence of inflammation, and evidence of clinically severe illness requiring hospitalization, with multisystem (>2) organ involvement (cardiac, renal, respiratory, hematologic, gastrointestinal, dermatologic or neurological); AND
- No alternative plausible diagnoses; AND
- Positive for current or recent SARS-CoV-2 infection by RT-PCR, serology, or antigen test; or COVID-19 exposure within the 4 weeks prior to the onset of symptoms.

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