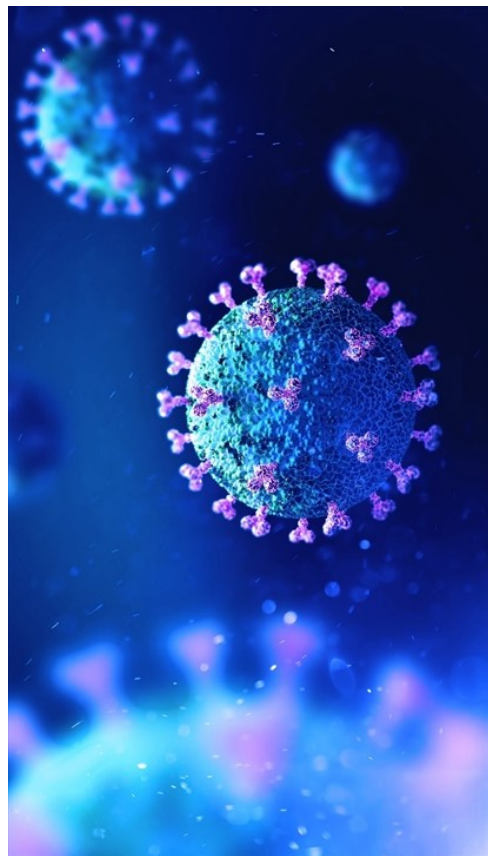




Parkland

SARS CoV2 Coronavirus The Straight Story

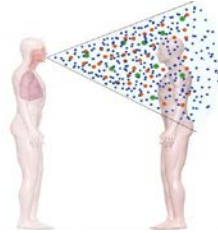
Parkland Health and Hospital System
Jennifer L. Rabaglia MD, MSc, FACS





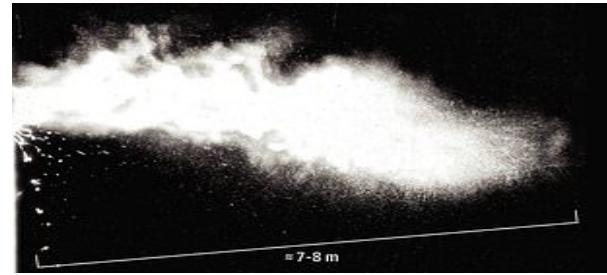
- **From person-to-person (predominantly)**

- Droplets in air from
 - coughs or sneezes
 - Exhaling
 - talking
- <6ft for >10min?
- Contact (hugs, handshake)



- **From surfaces**

- touching a surface or object and touching your face



- **Up to 50% have no symptoms when they test positive**

- **Data suggests people with COVID-19 are most infectious BEFORE they have fever and symptoms**



Think *Prevalence*
(how common is it in
the population at this
point in time)

Table 5. Respiratory virus testing by North Texas hospitals: March 22 – May 9, 2020 (CDC Weeks 13-19)

Week Ending		3/28/20	4/4/20	4/11/20	4/18/20	4/25/20	5/2/20	5/9/20
SARS-CoV-2 Novel Coronavirus	Positive	199	370	327	364	378	472	453
	Total Tests	1,816	2,736	2,920	3,221	3,409	4,171	4,151
	% Positive	11.0%	13.5%	11.2%	11.3%	11.1%	11.3%	10.9%



- 81% of cases in people ages 18 to 64
- **Conditions that represent high risk for infection, hospitalization and worse outcome include:**
 - Diabetes
 - Heart disease
 - Lung disease
 - Cancer and Immunocompromised
 - Kidney Disease
 - Pregnancy



- 18% hospitalization rate in Dallas County
 - 67% under age 65
 - 50% have NO underlying chronic conditions
 - 32% in ICU
 - 19% on mechanical ventilators
- Severity of illness & mortality greatest in:
 - Elderly (> 65 years of age)
 - Men > Women
 - People with 1 or more of the high risk conditions



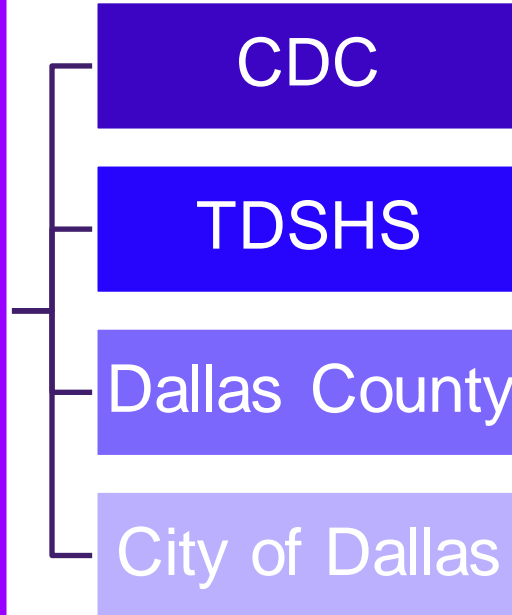
- **Multiple strains (mutations)**
 - New strains with ↑ infectivity
 - Possibility of new means of spread
 - Disrupts the concept of herd immunity, vaccine development
- ? Re-infection vs. lasting immunity
- **Role of pediatric population (prevalence, spread, etc.)**
 - Emergence of Multisystem Inflammatory Syndrome of children



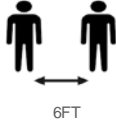




Mandate

Governor's
Executive Order

Guidance



ACTION	KEY STEPS
HYGIENE 	<ul style="list-style-type: none"> • Hand hygiene • Respiratory Etiquette • Environmental hygiene & high touch surfaces
SCREENING 	<ul style="list-style-type: none"> • Exposure (sick contacts) • Symptoms and temperature (late indicators)
DISTANCING 	<ul style="list-style-type: none"> • “6 foot Rule” likely not enough when exercising/exerting • Think 15-20ft – no definitive evidence (emerging research) • Physical barriers where needed
MASKING 	<ul style="list-style-type: none"> • A mask blocks 90% of droplets <i>if worn correctly</i> • <i>I protect you, you protect me</i> • Surgical masks (preferable) or double layer cloth – when appropriate
CULTURE 	<ul style="list-style-type: none"> • Conscientiously adhering to the rules • Being mindful of others • “We are all in the same storm, but not in the same boat”



- **Continue to leverage WFH options as much as possible**
 - Rotational schedules
- **Persons who become sick while at work**
 - Isolation and exit plan
 - Subsequent cleaning and sterilization of the space
- **For larger business and spaces where distancing is not as feasible**
 - Consider a dedicated resource to oversee adherence to organizational mitigation strategies
- **Outbreak at site or Increase in prevalence in community**
 - Be nimble...plan for toggling between phases or...
 - Possibility of temporary closure



- <https://www.cdc.gov/coronavirus/2019-ncov/downloads/php/CDC-Activities-Initiatives-for-COVID-19-Response.pdf>
- https://www.dallascounty.org/Assets/uploads/docs/hhs/2019-nCoV/COVID-19%20DCHHS%20Summary_051220.pdf
- *Amid the Coronavirus Crisis, a Regimen for Reentry.* Atul Gawande; New Yorker, May 13, 2020.