

LEST WE FORGET – a tribute

APIC-NM 2023

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Nothing to disclose

Take us on a journey through time for the last 3 years

Offer a tribute of thanks to every one of you

Briefly present COVICON – a clinically informed, data driven temporary project piloted for tiered respiratory protection



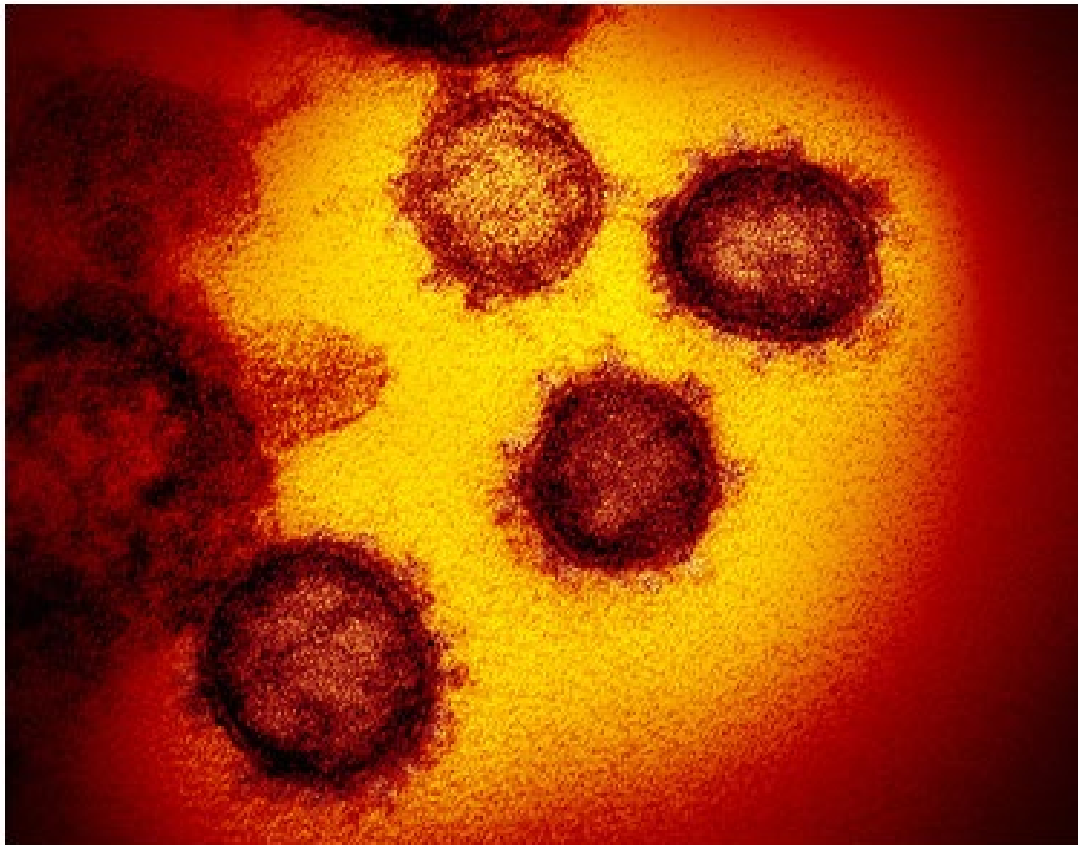
“A devastating epidemic can start in any country at any time, and kill millions of people, because we are not prepared”

Tedros A. Ghebreyesus,
WHO

Long before COVID

Jan. 11

China reported its first known death from an illness caused by the coronavirus. The patient was a 61-year-old man in Wuhan.



12 January 2020

China publicly [shared](#) the genetic sequence of COVID-19.

Jan. 30

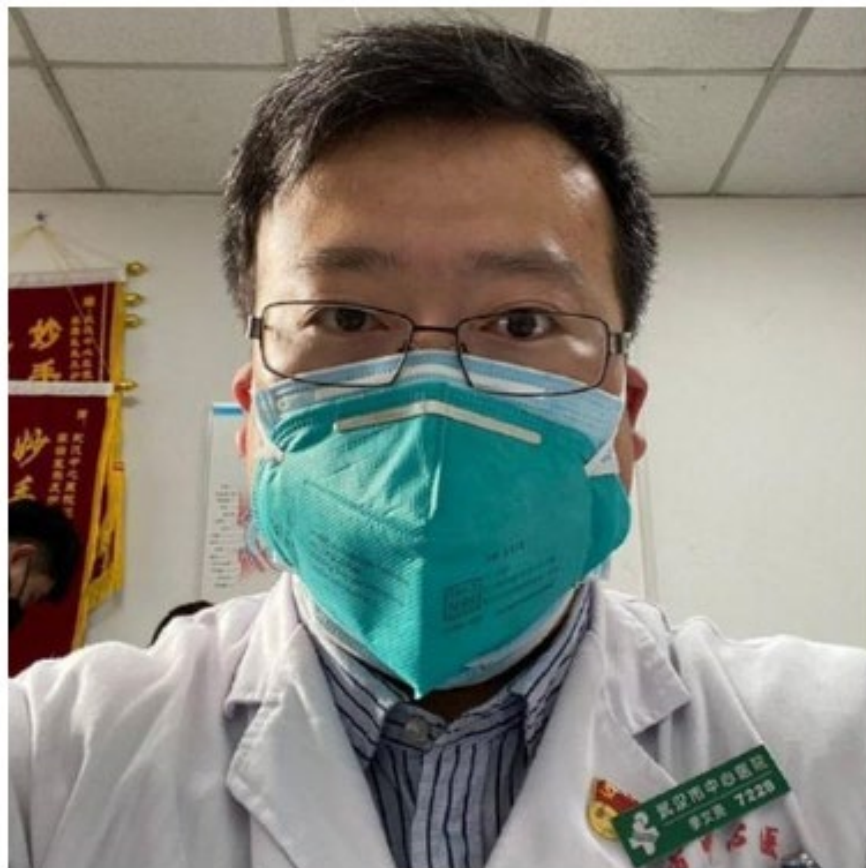
WHO declared the outbreak a global public health emergency as more than 9,000 cases were reported worldwide, including in 18 countries beyond China.

[Read more](#)

Feb. 7

Dr Li Wenliang, a Chinese doctor who issued a warning about the coronavirus outbreak before it was officially recognized, died in Wuhan. Li became a hero in China and his death sparked a wave of public mourning.



[Read more](#)



March 11

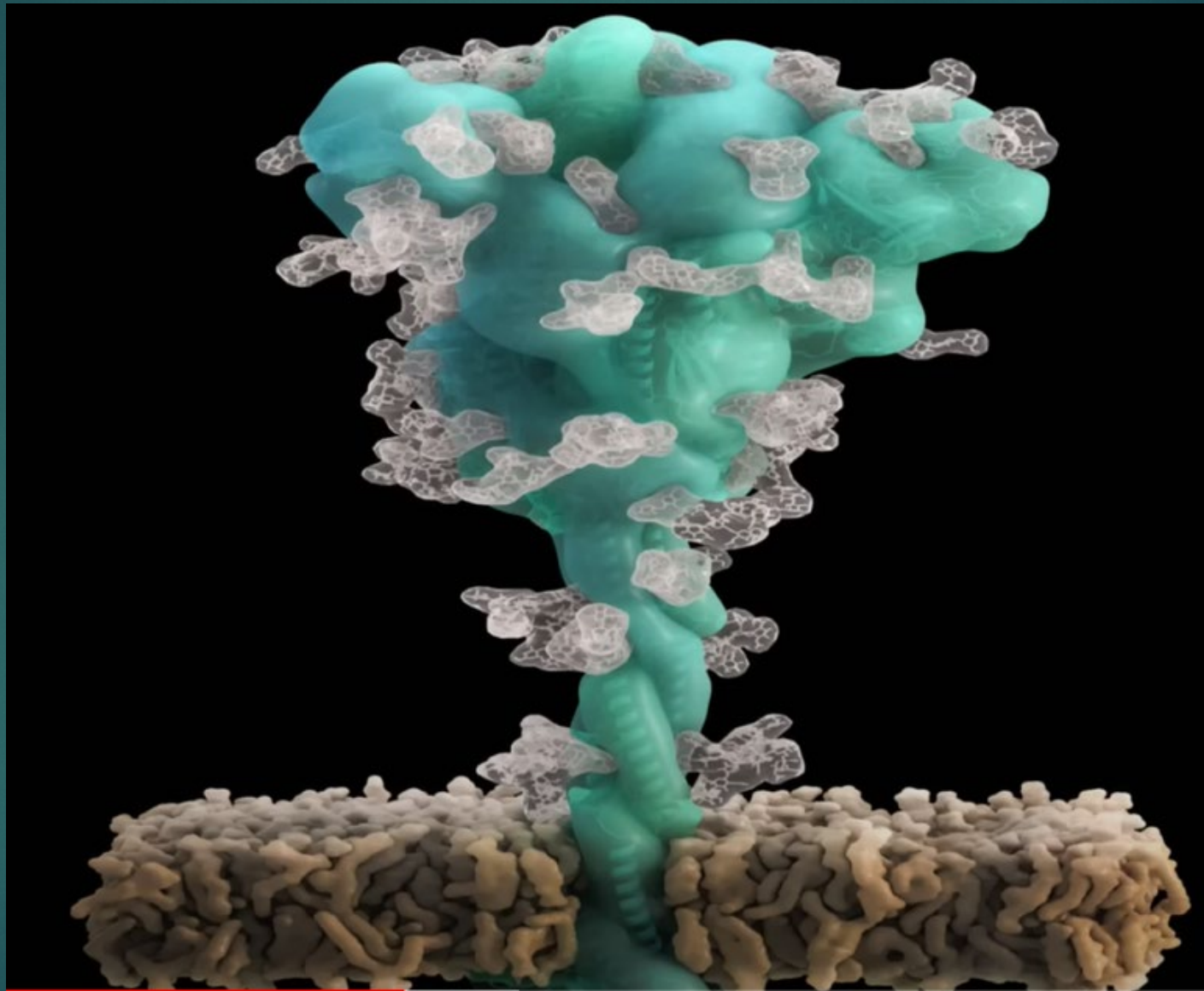
The World Health Organization declared that the coronavirus outbreak “can be characterized as a pandemic,” which is defined as worldwide spread of a new disease for which most people do not have immunity.

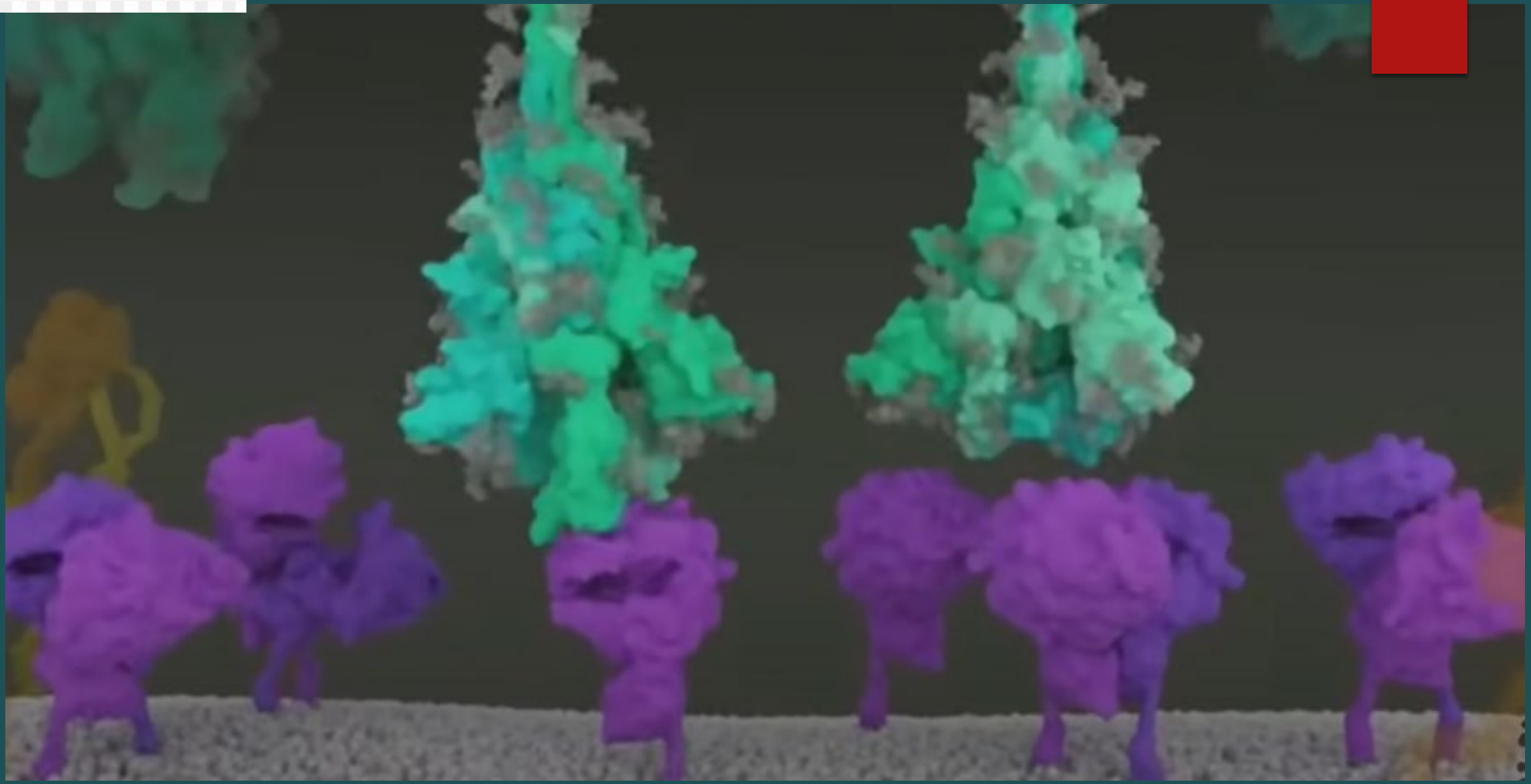
[Read more](#)

 BREAKING 

“We have therefore made the assessment that #COVID19 can be characterized as a pandemic”-@DrTedros #coronavirus
pic.twitter.com/JqdsM2051A

– World Health Organization (WHO)
(@WHO) [March 11, 2020](#)





**A MYSTERIOUS
NEW ILLNESS**

Images appear of Wuhan in lockdown, where officials attempt to contain a mysterious virus. Soon after, new cases of and deaths related to (what's later named) COVID-19 surge in Europe.

**THE WORLD
SHUTS DOWN**

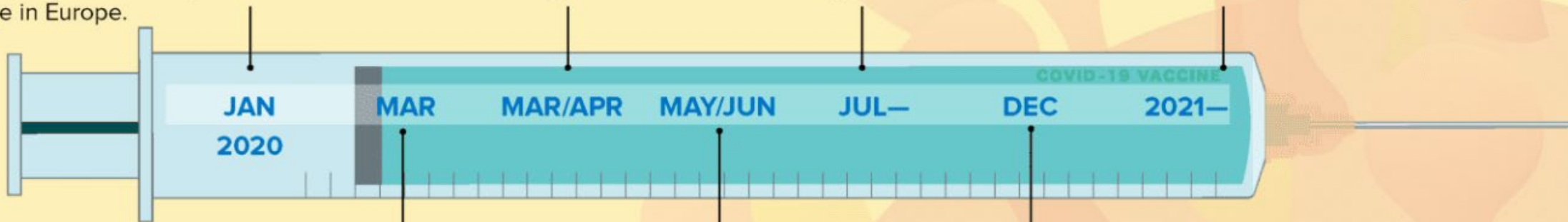
Countries seal borders; sports teams cancel seasons; schools close and employees go home. People start wearing masks and "social distancing."

**UPTICK IN MENTAL
HEALTH ISSUES**

People struggle as continued unemployment and/or working from home without childcare/school takes its toll. U.S. break records for daily cases/deaths.

**LIGHT AT THE END OF
THE TUNNEL?**

2021 begins with a race to vaccinate. Cases and deaths begin to fall. But the variants are still a threat, vaccine rollout is uneven, and we are still wearing masks.



**THE VIRUS SPREADS,
CASES MULTIPLY**

The Grand Princess cruise ship, docked outside of San Fran, has passengers with COVID-19; Bay Area is first in the U.S. to announce shelter-in-place orders; hospitals become overwhelmed as cases grow; there is a nationwide shortage of PPE.

**FLATTENING THE CURVE—
FOR A WHILE**

After "flattening the curve," cases begin to skyrocket again as states "reopen" in different phases. Researchers continue to race to identify treatments and make vaccines.

**NEW HOPE,
NEW MUTATIONS**

The FDA authorizes two vaccines. Major variants begin to circulate, some of which might impact the effectiveness of vaccines.







► Infection preventionists at the elbow with frontline staff



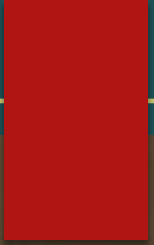
Work never ended

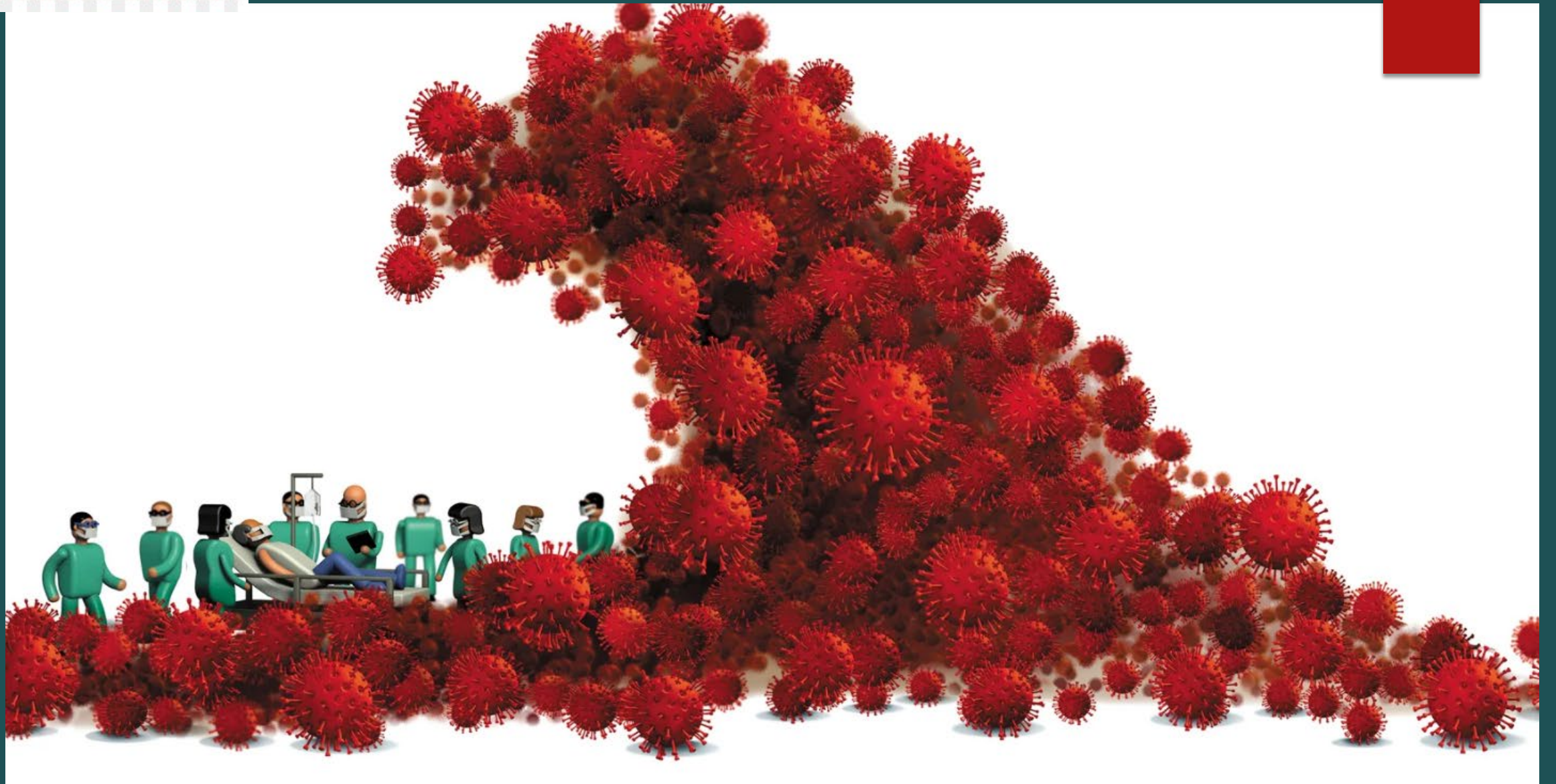


Endless
protocols and
flowcharts























COVID-19

[Your Health](#)[Vaccines](#)[Cases & Data](#)[Specific Settings](#)[Healthcare Workers](#)[Health Depts](#)[Science](#)[More](#)

🏠 Healthcare Workers

[Testing](#) +[Clinical Care](#) +[Infection Control](#) -[Infection Control Guidance](#)[Postmortem Guidance](#)[Potential Exposure at Work](#)[Optimizing PPE Supplies](#) +[Managing Operations](#) +

Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the Coronavirus Disease 2019 (COVID-19) Pandemic

Updated Sept. 23, 2022 [Print](#)

For healthcare personnel, see [Isolation and work restriction guidance](#). For strategies to mitigate healthcare personnel staffing shortages, see [Contingency and crisis management](#). For healthcare professionals advising people in non-healthcare settings about isolation for laboratory-confirmed COVID-19, see [Ending Isolation and Precautions for People with COVID-19](#).

Summary of Recent Changes

We are better prepared in

2023



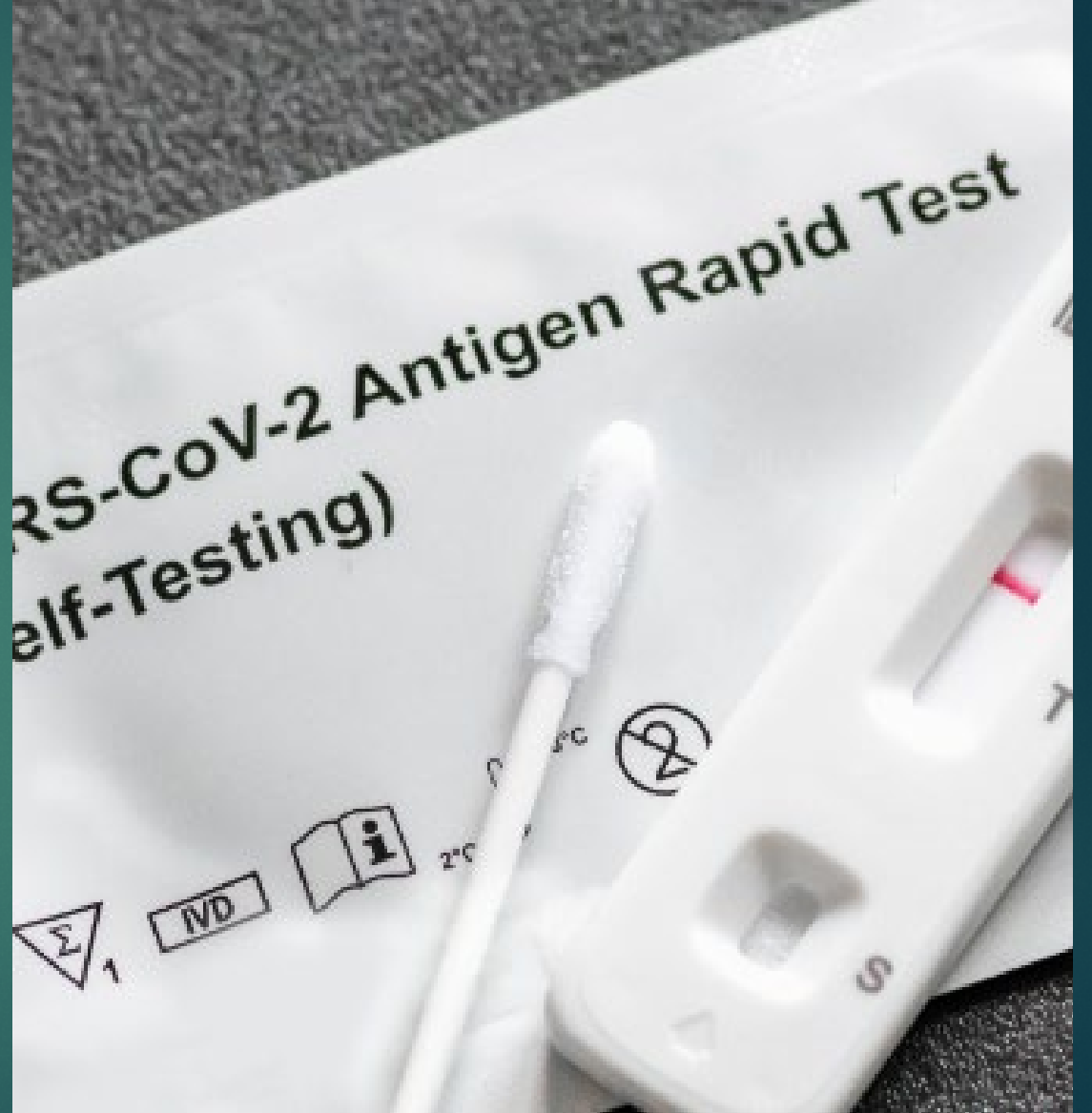
Layered health and safety measures will help us maximize full-time, in-person learning and reduce disruptions for students, staff and families. Every layer matters and helps keep students in class. The virus can pass through one or two layers but not all.

That's why every layer matters starting with vaccinations.



High quality masks work







Community Level Criteria*

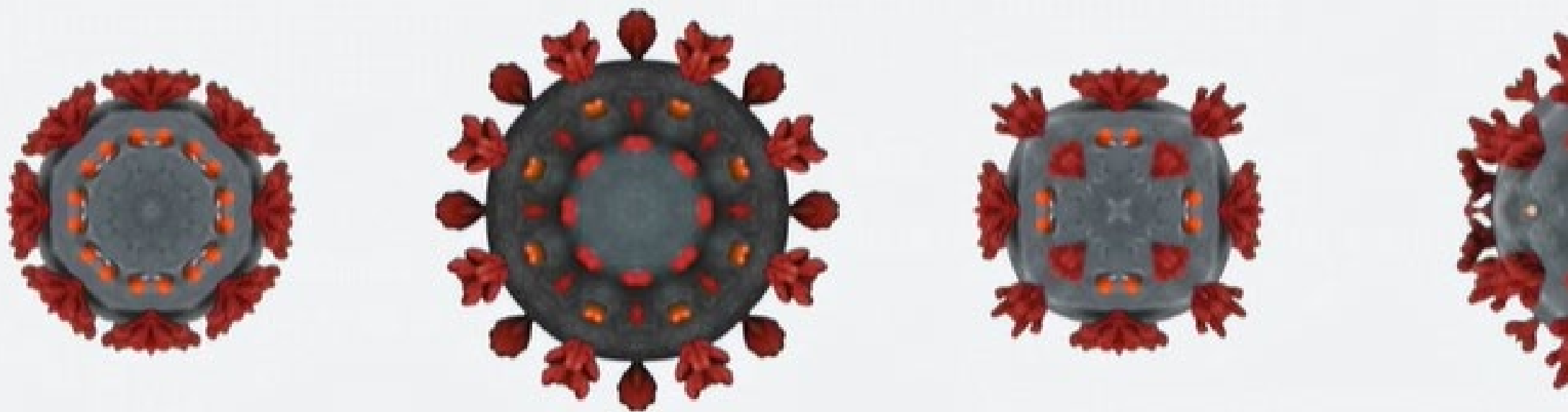
- Upon a detailed analysis of the positivity rates and consultation with experts, we have arrived at the following criteria

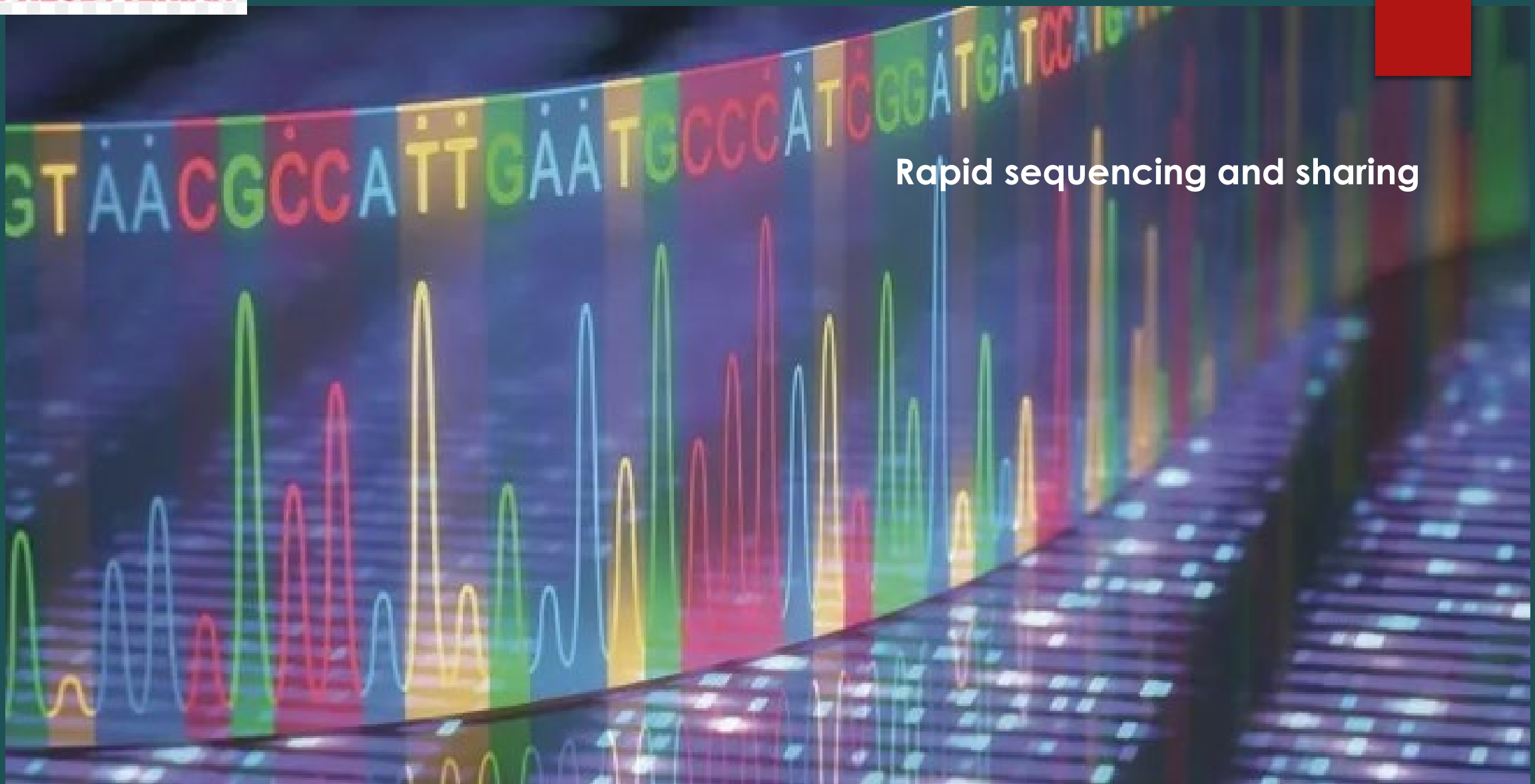
Community Level Criteria Based on COVID-19 Hospitalization Rates			
Indicators	COVICON Low	COVICON Medium	COVICON High
COVID-19 Hospitalization Rates	< 5%	≥5.0 % and < 13.0%	≥13.0

COVID-19 Emergency Response Plan Framework

		Pandemic in Effect			
		COVICON High	COVICON Medium	COVICON Low	Endemic
Safety	Health Care Provider Masking	<ul style="list-style-type: none"> Respirator and eye protection in all patient care areas Universal masking with procedural mask in all healthcare facilities¹ 	<ul style="list-style-type: none"> Respirator for COVID and other patients requiring airborne isolation Procedural mask in all areas of patient care facilities¹ including all administrative offices within hospitals and clinics 	<ul style="list-style-type: none"> Respirator for COVID and other patients requiring airborne isolation Procedural mask in all clinical/direct patient care areas¹ and high occupancy/shared/poorly ventilated indoor spaces (admin) 	<ul style="list-style-type: none"> Respirator for patients requiring airborne isolation according to CDC Universal masking for non-vaccinated staff against respiratory pathogens (e.g. COVID, flu)²¹
	Distancing	<ul style="list-style-type: none"> Virtual meeting solutions only 6 feet in all areas by those using only procedural masks 	<ul style="list-style-type: none"> Virtual meeting solutions preferred with limited in person occupancy for mission critical events 6 feet in all areas by those using only procedural masks 	<ul style="list-style-type: none"> Consider virtual meeting solutions 6 feet in areas where there is incomplete masking¹ 	<ul style="list-style-type: none"> Avoid crowded, high occupancy, poorly ventilated indoor spaces during respiratory season. Consider virtual meeting solutions
Surveillance	Administrative testing	<ul style="list-style-type: none"> All admissions/observations to inpatient, BH, hospice, etc. All surgeries and procedures^{2,3} 	<ul style="list-style-type: none"> All admissions/observations to inpatient, BH, hospice, etc. All surgeries and procedures^{2,3} 	<ul style="list-style-type: none"> Admissions to inpatient or observation with respiratory symptoms Admission to congregate settings such as inpatient BH where undetected infection can cause unit closures and/or there is incomplete masking 	<ul style="list-style-type: none"> Symptom directed diagnostic testing
	Pre-procedural testing	<ul style="list-style-type: none"> Universal testing within 72 hours prior to procedure except if documented COVID-19 infection within 30 days⁴ All inpatient procedures (tested upon admission and 24 hours prior to procedure) All outpatient, HOD/ASC, ambulatory AGPs⁵ COVID+ patients who can proceed with surgery using appropriate precautions⁶: <ul style="list-style-type: none"> o CEST-1 	<ul style="list-style-type: none"> Universal testing within 72 hours prior to procedure except if documented COVID-19 infection within 30 days⁴ All inpatient procedures (tested upon admission and 24 hours prior to procedure) All outpatient, HOD/ASC, ambulatory AGPs⁵ COVID+ patients who can proceed with surgery using appropriate precautions⁶: <ul style="list-style-type: none"> o CEST-1, 2, 3 o outpatient, HOD/ASC, ambulatory AGPs 	<ul style="list-style-type: none"> Testing 72 hours prior to AGPs except if documented COVID-19 infection within 30 days⁴ If positive, proceed with appropriate precautions⁶ 	<ul style="list-style-type: none"> Symptom directed diagnostic testing

What lies ahead for the next pandemic?





Rapid sequencing and sharing

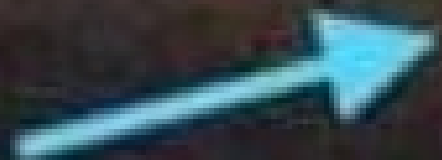
Rapid
deployment of
mRNA
technology





Global Cooperation

An Uphill Battle



Look again at that dot.
That's here.
That's home.
That's us.

Carl Sagan, 1934-1996