



# Kentucky Hospital Research & Education Foundation Emergency Preparedness Update for February 27, 2020

**CDC confirms the first US coronavirus case of 'unknown' origin.**

***Patient was hospitalized for days before getting tested... because she didn't meet criteria***

(CNN) A California patient being treated for novel coronavirus is the first US case of unknown origin, CDC officials said. The patient didn't have any relevant travel history nor exposure to another known patient. It may be the first US case of "community spread" of the virus officials said.

The Solano County resident was admitted to UC Davis Medical Center last week but wasn't tested until Sunday, according to a letter sent to UC Davis staff and obtained by CNN.

How the person was exposed to the virus is still unknown, the CDC said. The agency said it has not yet ruled out that the patient was exposed to a returned traveler who was infected.

The patient is one of 60 confirmed cases of the virus in the US, Health and Human Services Secretary Alex Azar announced Wednesday. Forty-two cases are former passengers on the Diamond Princess cruise ship, the site of a recent virus outbreak. The other 15 were either travelers coming back from China or spouses of travelers. Three others were repatriated from China.

See video report and read more: <https://www.cnn.com/2020/02/27/health/us-cases-coronavirus-community-transmission/index.html>

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## **President addressed nation on coronavirus**

(USA Today) President Donald Trump and top U.S. health officials addressed the nation Wednesday evening as governments worldwide worked to combat the spread of [the new coronavirus](#). Their comments came as the U.S. saw its first instance of infection in a person without relevant travel history or exposure to another patient known to have the virus.

With more than 81,300 cases worldwide and spreading rapidly beyond China to South Korea, Italy and Iran, the U.S. Centers for Disease Control and Prevention [warned Tuesday the virus would spread in the United States](#) and cause "severe" disruptions across the country.

Read more: <https://www.usatoday.com/story/news/nation/2020/02/26/coronavirus-trump-addresses-nation-amid-first-case-community-spread/4883728002/>

## **Related: Trump picks Pence to lead coronavirus response**

Read more: <http://www.cidrap.umn.edu/news-perspective/2020/02/trump-puts-pence-charge-covid-19-response>

## **CDC Coronavirus (COVID-19) Main Website:**

<https://www.cdc.gov/coronavirus/2019-ncov/>

----- *Recent updates from CDC site* -----

**CDC Guidance for Businesses & Employers on COVID-19** (Updated Feb 24th)

<https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/guidance-business-response.html>

**CDC - Interim Infection Prevention and Control Recommendations for Patients with Confirmed Coronavirus Disease 2019 (COVID-19) or Persons Under Investigation for COVID-19 in Healthcare Settings** (Updated Feb 21st)

<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>

**CDC - Healthcare Infection Prevention and Control FAQs for COVID-19** (Updated Feb 25th)

<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/infection-prevention-control-faq.html>

**CDC - Strategies for Optimizing the Supply of N95 Respirators** (Updated Feb 25th)

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirator-supply-strategies.html>

**CDC - What Healthcare Personnel Should Know about Caring for Patients with Confirmed or Possible COVID-19 Infection** (Updated Feb 25th) <https://www.cdc.gov/coronavirus/2019-ncov/hcp/caring-for-patients.html>

**CDC - Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease 2019 (COVID-19)** - (Updated Feb 25th)

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

**CDC - Male Facial Hair and Respirator Fit - *Picture shows the good, and not so good*** >

Full chart: <https://www.cdc.gov/niosh/npptl/pdfs/FacialHairVmask11282017-508.pdf>



The Kentucky Hospital Association website has a quick-list in our [Toolbox and Bookshelf](#) of CDC COVID-19 references:

<http://www.kyha.com/toolbox-and-bookshelf>

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**Schumer Proposes \$8.5 Billion in Emergency Coronavirus Funding**

(The Hill) Senate Democratic Leader Chuck Schumer (D-NY) released a detailed proposal for \$8.5 billion in emergency funding in Emergency Funding for CDC, the Public Health and Social Services Emergency Fund, USAID, and NIH to fight the spread of coronavirus.

The spending request is more than three times the \$2.5 billion requested by the Trump administration. Trump's request included \$1.25 billion in new funding, with the rest to be taken from existing health programs, including \$535 million from fighting Ebola. The [funding would include](#) \$1.5 billion for the Centers for Disease Control and Prevention, \$3 billion for the Public Health and Social Services Emergency Fund and \$2 billion that would reimburse states and local governments for money they spend related to the coronavirus.

It also would include \$1 billion for vaccine development at the National Institutes of Health and \$1 billion for an emergency reserve fund under the U.S. Agency for International Development.

Full story: <https://thehill.com/homenews/senate/484679-schumer-requesting-85-billion-in-emergency-funding-on-coronavirus>

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**NPR: Can Face Masks Prevent Coronavirus? Here's What Medical Experts Say**

Learn more: <https://www.npr.org/sections/goatsandsoda/2020/01/29/800531753/face-masks-what-doctors-say-about-their-role-in-containing-coronavirus>

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**Kentuckians urged to prevent coronavirus  
by same protocols as influenza; virus can spread rapidly**

(KyForward News) The Kentucky Medical Association (KMA), the Kentucky Foundation for Medical Care (KFMC) and the Foundation for a Healthy Kentucky are urging Kentuckians to practice known flu prevention protocols in light of Tuesday's Centers for Disease Control (CDC) warning that the novel coronavirus is expected to spread within communities in the United States.

"While novel coronavirus presents a low risk currently to the majority of populations within the U.S., we do know that the virus can spread rapidly and is transmitted primarily through tiny air droplets and close contact with an infected person," said KMA President and Foundation for a Healthy Kentucky Board Chair Brent Wright, M.D.

"However, the good news is we already know how to prevent the spread of such a virus, since protocols for it are nearly identical to those for the flu, which remains a much greater threat to public health currently."

KMA, the KFMC and the Foundation for a Healthy Kentucky partnered for the 2018-2019 public health campaign, Focus on Flu, which seeks to mitigate the spread of influenza across the state by encouraging Kentuckians to get their flu vaccines, consult their physicians if they think they have the flu, and help prevent the spread of the illness by implementing a number of known prevention techniques.

Full story: <https://www.kyforward.com/kentuckians-urged-to-prevent-coronavirus-by-same-protocols-as-influenza-virus-can-spread-rapidly/>

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**ACIP: Offer Ebola Vax to Healthcare Workers with Exposure Risk  
Unanimous vote by CDC committee included debate about Ebola vaccine in pregnant women**

(MedPage Today, Feb 26) The CDC's Advisory Committee on Immunization Practices (ACIP) voted unanimously to recommend vaccination against Ebola for certain healthcare personnel and laboratory workers, including but not limited to those responding to outbreaks. In a 14-0 vote, pre-exposure vaccination with rVSV?G-EBOV-GP vaccine was recommended for adults ages 18 or older who are at potential risk of exposure to Zaire Ebolavirus who are responding to an outbreak of Ebola; work as healthcare personnel at federally-designated Ebola Treatment Centers in the U.S.; and those working as laboratorians or other staff at U.S. biosafety-level 4 facilities.

This vaccine was approved by the FDA in December 2019 as Ervebo, a single-dose live attenuated vaccine indicated for adults age 18 and older to protect against Zaire Ebolavirus infection.

Full story: <https://www.medpagetoday.com/meetingcoverage/acip/85106>

**Update on Ebola Treatment Center Costs and Sustainability, United States, 2019**

(*Emerging Infectious Diseases*) In 2014, a tiered network of facilities to manage patients with Ebola virus disease (EVD) was established in the United States (1). The Centers for Disease Control and Prevention designated 56 hospitals as Ebola treatment centers (ETCs), each equipped with specified capabilities to provide safe high-level isolation care for patients with EVD.

Of the surveyed 56 Ebola treatment centers (ETCs) in the United States, and identified costs incurred since 2014 (\$1.76 million/ETC) and sustainability strategies. ETCs reported heavy reliance on federal funding. It is uncertain if, or for how long, ETCs can maintain capabilities should federal funding expire in 2020. Since 2016,

more ETCs reported using their unit for routine use when not activated (76% vs. 58%), offsetting operational costs. Full CDC report: [https://wwwnc.cdc.gov/eid/article/26/5/19-1245\\_article](https://wwwnc.cdc.gov/eid/article/26/5/19-1245_article)

In Australia, a female nurse was knocked unconscious and left pulseless by an attack from an elderly patient. (Australian 7News story) <https://7news.com.au/business/workplace-matters/nurse-assaulted-at-modbury-hospital-prompting-urgent-calls-for-action-c-719165>

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**New Interact for Health poll indicates an uptick  
in misuse of prescription pain medication in Kentucky**

(KyForward News) More Kentuckians report knowing someone who is misusing prescription pain medication, according to a new poll. Colleen Desmond, a researcher at Interact for Health, the group that conducted the survey, said the findings indicate prescription drug misuse continues to be a persistent problem statewide, despite the fact that overdose deaths have dropped.

“We saw a slight uptick this year,” she said. “We saw about four in 10 Kentuckians who reported that they know someone who’s had a problem as a result of using or abusing prescription pain relievers. ... That’s up from 30% in 2018.”

Nearly 10 million Americans age 12 and older have misused prescription pain relievers, according to [federal data from 2018](#).

For help finding addiction treatment, visit [findhelpnowky.org](http://findhelpnowky.org).

The poll is online at [healthy-ky.org](http://healthy-ky.org), Kentucky overdose-death data is at [odcp.ky.gov](http://odcp.ky.gov), and 2018 federal data is at [samhsa.gov](http://samhsa.gov).

Full story: <https://www.kyforward.com/new-interact-for-health-poll-indicates-an-uptick-in-misuse-of-prescription-pain-medication-in-kentucky/>

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**Article from February 2020 Issue of Domestic Preparedness Journal  
Police as Medical Responders in Active Threat Events**

In the aftermath of the 1999 Columbine High School mass shooting, there was a paradigm shift in the way police in the United States responded to active shooter events. In short order, rapid law enforcement deployment using the first responding officers to enter the crisis site and engage the killer(s) became the new paradigm. Officers deployed into the crisis site to provide 360-degree protection as they moved through the target to confront the threat.

In the old model, officers would establish a perimeter, contain the suspects, and await SWAT teams to resolve the issue. The next evolution of active threat response and care saw the development of the Rescue Task Force (RTF). RTFs combine law enforcement and fire/EMS into a single unit with the purpose of pushing into the warm zone and providing life-saving patient care and evacuation, before the target location is secure.

The advent of the RTF model and its increasing acceptance by police and fire/EMS departments is laudable and should continue to be developed and nurtured. However, the people charged with developing responses to active shooter/threat events must consider how to deliver emergency medical care at the same time. One of the drawbacks to the RTF model is that it takes time for both police and fire/EMS units to arrive and stage. To counter the time delay between wounding and initial medical care, law enforcement needs to take on the mantle of providing [life-saving medical care](#). It has been demonstrated that police officers providing initial medical care in the active threat environment, prior to the assembly and deployment of RTFs, equates to [increased survival of victims](#) who otherwise may not survive.

Read the full story in the Dom Prep Journal: <https://www.domesticpreparedness.com/journals/february-2020/>

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The KHREF Emergency Preparedness Update is assembled several times a week. When events make it necessary, the Update may be sent out several times a day to keep our hospital and the healthcare community advised on preparedness news and information. Most of this information is compiled from open sources, and where possible reference links will be provided. There is an archive of [Emergency Preparedness Updates available here](#). If you would like to add or delete, or have something you would like to contribute to a future edition of the Emergency Preparedness Update, please contact [rbartlett@kyha.com](mailto:rbartlett@kyha.com) (include your current email address). The preparedness program for the Kentucky Hospital Association (KHA) and KHREF are supported by US DHHS ASPR HPP funds through a contract with Kentucky Public Health.