

Guidance and responses were provided based on information known on 1/28/2021 and may become out of date. Guidance is being updated rapidly, so users should look to CDC and NE DHHS guidance for updates.

COVID-19 and LTC

January 28, 2021

NEBRASKA
Good Life. Great Mission.
DEPT. OF HEALTH AND HUMAN SERVICES



**Infection Control Assessment
and Promotion Program**

Presentation Information:

Panelists today are:

Dr. Salman Ashraf

salman.ashraf@unmc.edu

Dr. Emily Patel

Emily.Patel@nmhs.org

Kate Tyner, RN, BSN, CIC

ityner@nebraskamed.com

Margaret Drake, MT(ASCP),CIC

Margaret.Drake@Nebraska.gov

Sarah Stream, MPH, CDA

Sstream@nebraskamed.com

Karen Amsberry, MSN, RN

Kamsberry@nebraskamed.com

Lacey Pavlovsky, RN, MSN, CIC

lpavlovsky@nebraskamed.com

Jody Scebold, EdD, MSN, RN

jodscebold@nebraskamed.com

Dan German

dgerman@nebraskamed.com

Moderated by Marissa Chaney

Machaney@nebraskamed.com

Slides and a recording of this presentation will be available on the ICAP website:

<https://icap.nebraskamed.com/covid-19-webinars/>

Use the Q&A box in the webinar platform to type a question. Questions will be read aloud by the moderator.

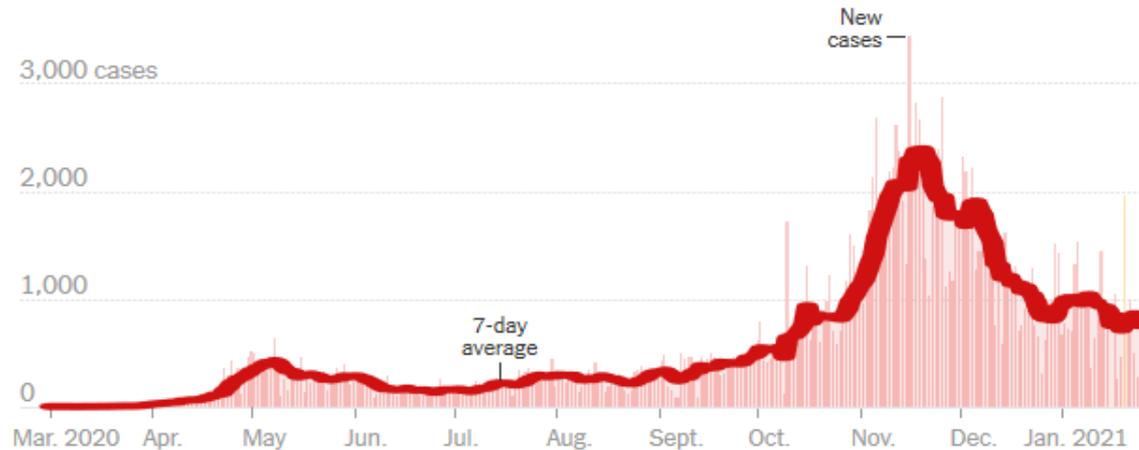
If your question is not answered during the webinar, please either e-mail it to NE ICAP or call during our office hours to speak with one of our IPs.

Continuing Education Disclosures

- 1.0 Nursing Contact Hour and 1 NAB Contact Hour is awarded for the LIVE viewing of this webinar
- In order to obtain nursing contact hours, you must be present for the entire live webinar and complete the post webinar survey
- No conflicts of interest were identified for any member of the planning committee, presenters or panelists of the program content
- This CE is hosted Nebraska Medicine along with Nebraska ICAP and Nebraska DHHS
- Nebraska Medicine is approved as a provider of nursing continuing professional development by the Midwest Multistate Division, an accredited approver by the American Nurses Credentialing Center's (ANCC) Commission on Accreditation

Nebraska Coronavirus Map and Case Count

Updated January 27, 2021, 2:15 P.M. E.T.



	TOTAL REPORTED	ON JAN. 26	14-DAY CHANGE
Cases	188,293	300	-17% ↘
Deaths	1,985	13	-1% ↘
Hospitalized		373	-16% ↘

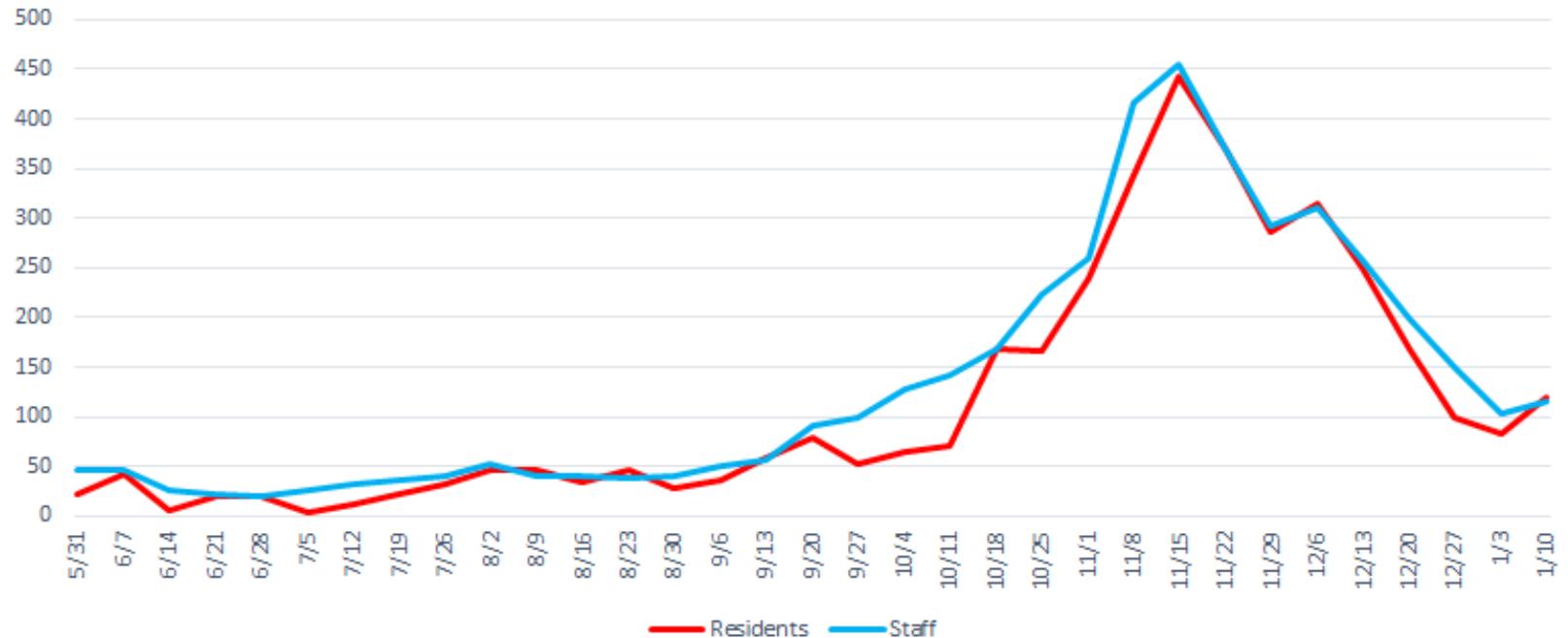
■ Day with reporting anomaly. Hospitalization data from the Covid Tracking Project; 14-day change trends use 7-day averages.

<https://www.nytimes.com/interactive/2020/us/nebraska-coronavirus-cases.html>



LTCF Weekly COVID Cases

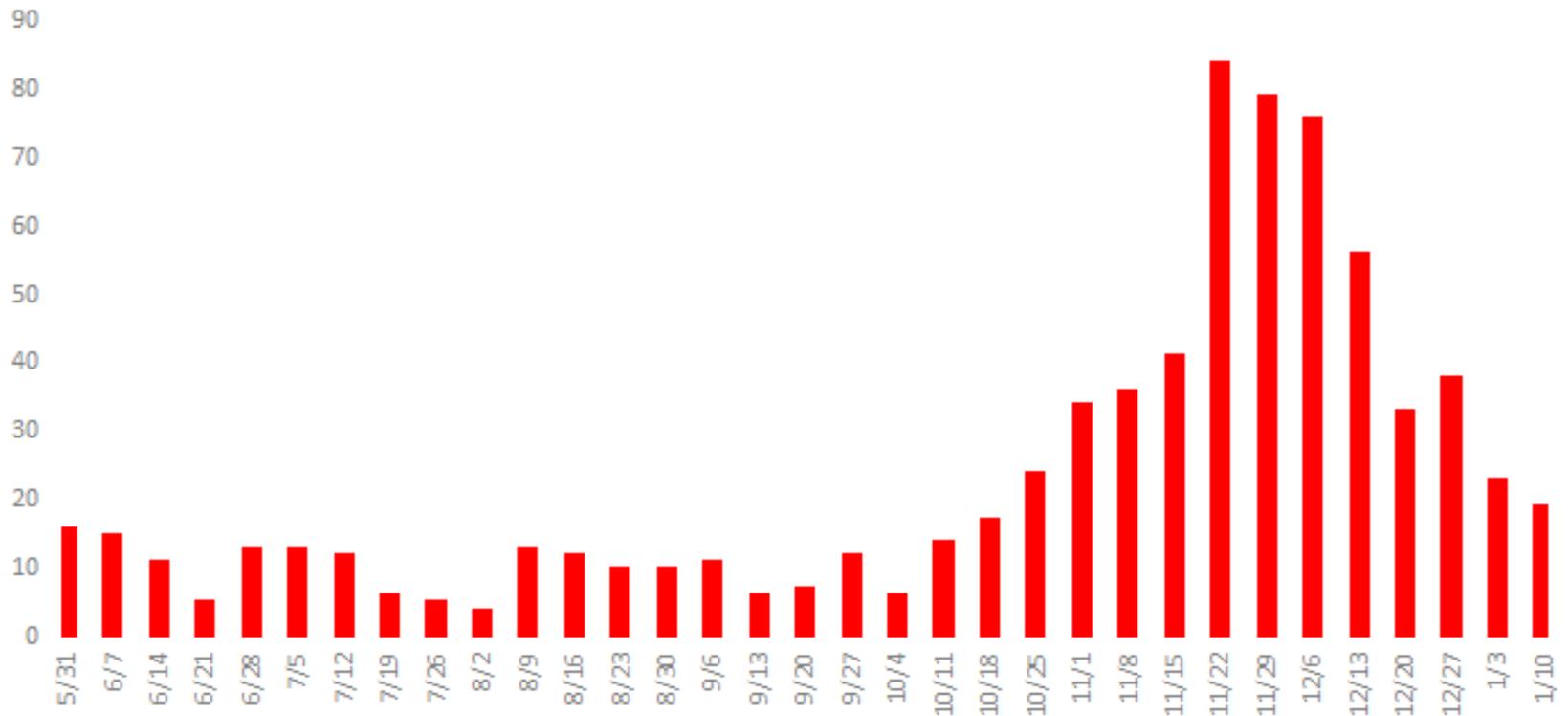
Nebraska LTCF COVID Positive Cases
Weekly Through January 10 (CMS Data)



Data source: CMS; Nebraska ICAP Calculations

LTCF Resident Weekly COVID Deaths

Nebraska LTCF COVID Resident Deaths
Weekly Through January 10 (CMS Data)



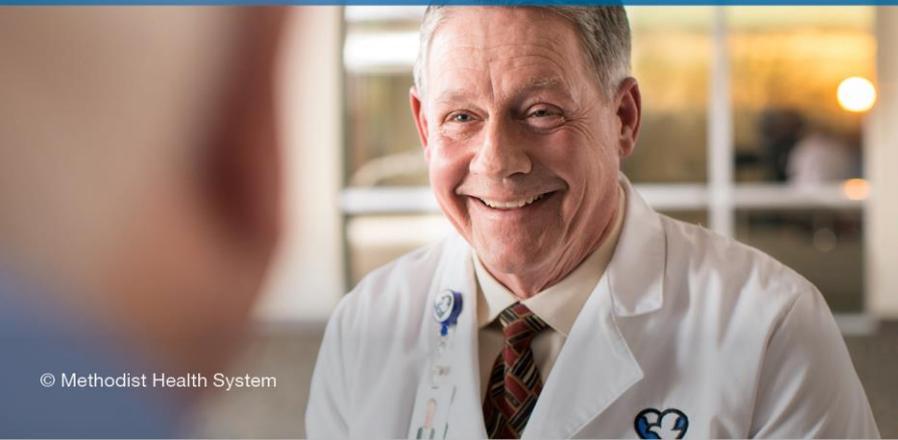
Data source: CMS; Nebraska ICAP Calculations





mRNA COVID-19 Vaccine in Pregnancy and Lactation

Emily Patel, MD, FACOG
Maternal Fetal Medicine
Methodist Perinatal





Background

- 12/11/2020: FDA EUA for Pfizer BioNTech COVID-19 vaccine
- Studied in >43,000 participants
- 16yo and older
- RCT
- People with stable chronic conditions WERE included (HIV, hepatitis, diabetes, cHTN)
- Pregnant and lactating women were excluded from the initial trial



Background

- 12/18/2020: FDA EUA for Moderna COVID-19 vaccine
- Studied in >30,000 participants
- 18yo and older
- RCT
- People with stable chronic conditions WERE included (HIV, hepatitis, diabetes, cHTN)
- Pregnant and lactating women were excluded from the initial trial



Administration

- 2-dose series, IM, 3-4 weeks apart
 - 4-day grace period
- If outside 4-day grace period, give dose ASAP, do not repeat doses.
- Can be given to those with hx of SARS-CoV-2 illness
 - Consider vaccination after 90 days from infection
- Administer ALONE
 - In pregnancy: do not administer within 14 days (before or after) of influenza or Tdap vaccines
 - If given within 14 days inadvertently, do not repeat doses of any of the vaccines.

Polack et.al. Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine. NEJM: Dec 11, 2020

Baden et.al. Efficacy and Safety of the mRNA-1273 SARS-CoV-2 Vaccine

Oliver et.al. The Advisory Committee on Immunization Practices' Interim Recommendation for Use of Pfizer-BioNTech COVID-19 Vaccine. MMWR: Dec 13, 2020

Oliver et.al. The Advisory Committee on Immunization Practices' Interim Recommendation for Use of Moderna COVID-19 Vaccine — United States, December 2020



Pregnancy and COVID illness

- Increased risk of the following:
 - ICU admission (3-fold increase)
 - Mechanical ventilation (3-fold increase)
 - ECMO (2-fold increase)
 - Death (1.7-fold increase)
- Other critical risks:
 - Pneumonia, ARDS
 - Arrhythmias
 - VTE
 - Secondary infections
 - Acute kidney failure
 - Neurologic disorders – Headache, strokes, seizures
 - Gastrointestinal and liver disorders

Badr et.al. Are clinical outcomes worse for pregnant women at ≥ 20 weeks' gestation infected with coronavirus disease 2019? A multicenter case-control study with propensity score matching. *Am J Obstet Gynecol.* 2020;223(5):764.

Zambrano et.al. Update: Characteristics of Symptomatic Women of Reproductive Age with Laboratory-Confirmed SARS-CoV-2 Infection by Pregnancy Status - United States, January 22-October 3, 2020. *MMWR Morb Mortal Wkly Rep.* 2020;69(44):1641. Epub 2020 Nov 6.



mRNA Vaccine Pregnancy

- Population excluded in trial
 - Ongoing and planned human studies
- DART studies
 - Rats administered mRNA vaccine IM
 - 4 full human doses
 - Between pre-mating day 21 and gestational day 20
 - No direct or indirect harm
 - Antibody response noted in mothers, fetuses and offspring
 - No fertility effects
 - No adverse embryo/fetal development

Polack et.al. Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine. NEJM: Dec 11, 2020

Baden et.al. Efficacy and Safety of the mRNA-1273 SARS-CoV-2 Vaccine

Summary of Product Characteristics. Comirnaty COVID-19 mRNA Vaccine.



mRNA Vaccine Pregnancy

- mRNA vaccines
 - 4 lipid nanoparticles encase the mRNA
 - NOT live or attenuated
 - Do NOT enter the nucleus of the cell
 - SE: fevers, muscle aches, fatigue, joint pain
 - Tylenol as needed for fevers in pregnancy

Polack et.al. Safety and Efficacy of the BNT162b2 mRNA Covid-19 Vaccine. NEJM: Dec 11, 2020

Baden et.al. Efficacy and Safety of the mRNA-1273 SARS-CoV-2 Vaccine



mRNA Vaccine Pregnancy

- Consider the following:
 - Level of COVID-19 transmission in community
 - Personal risk of contracting COVID-19
 - Risk of COVID-19 during pregnancy
 - Efficacy of vaccine
 - Side effects of vaccine
- It is **NOT** recommended that women have a pregnancy test prior to the receipt of the vaccine



mRNA Vaccine Lactation

- Lactating mothers were excluded
- Not live virus vaccine, not thought to be risk for the newborn
 - Consider we allow breastfeeding in COVID+ mother
- No need to avoid or discontinue breastfeeding or pumping during receipt of vaccine



mRNA Vaccine Preg/Lac

- “Should I get the vaccine if pregnant or lactating?”
 - The COVID-19 vaccine should not be withheld from pregnant or lactating women when they meet criteria for vaccination.
 - No safety signals noted from preliminary DART studies or from the phase 3 trial
 - Risk of COVID illness in pregnancy is higher than risks of vaccination
 - Pregnant women should be allowed to make an informed decision in conjunction with her healthcare team
 - Pregnant women should not be required to have “permission” from a doctor prior to receipt



mRNA Vaccine Preg/Lac

- Should I get the vaccine if I am trying to get pregnant?
 - Yes! You should not delay receipt of the vaccine if you are eligible
 - It is not necessary to delay pregnancy after receipt of the vaccine
 - It is not recommended that women of child bearing age have routine pregnancy testing prior to vaccination



mRNA Vaccine Myths

- Myths:

- ~~• The vaccine will alter fetal/newborn DNA~~

- mRNA does not enter nucleus and is degraded after production of the spike protein antigen

- ~~• The vaccine causes infertility~~

- Syncytin-1 shares 1 peptide (3 amino acids) in common with the spike protein.
- Syncytin-1 has a total of 538 aa and Spike protein has 510 aa
- “Mistaking a dog for a cat because they are wearing the same collar”
- Immune system does not recognize such small peptides as antigens to attack (<1% similar)



Ongoing monitoring

- V-SAFE
 - CDC surveillance, smart phone based
 - Pregnancy and lactation info to be collected
- Vaccine Adverse Event Reporting System (VAERS)
 - Early warning system for safety concerns
 - HCP to report significant adverse events



Ongoing Studies

- Mt. Sinai COVID vaccine during lactation study
 - covid19humanmilkstudy@gmail.com
- UC San Diego breast milk study
 - <https://betterbeginnings.org/what-we-do/research/breast-milk/>
 - <https://medschool.ucsd.edu/research/coe/momicore/research/Pages/COVID-19.aspx>
- RedCaps Univ of Washington Preg/Lac study
 - https://urlisolation.com/browser?c=3&clickId=5A4A7896-E786-40DA-A805-8C3486E8E8F4&traceToken=1611609461%3Bnmhs_hosted%3Bhttps%3A%2Fredcap.iths.org%2Fsurveys%2F%3F&url=https%3A%2Fredcap.iths.org%2Fsurveys%2F%3Fs%3D87JFRCL8R8%26fbclid%3DIwAR225QthIHXuSPt06puoDIOB48ZhpTjETwblwVIYwPMfpdnGjLbfo0HFoc0



mRNA Vaccines and Anaphylaxis

- Reports of anaphylaxis outside the trial setting
 - Thought to be related to polyethylene glycol (PEG) nanoparticle
 - PEG is a component in other INJECTABLE medications
 - Those with allergy to injectable meds should be observed for 30m after vaccine receipt.



Vaccine confidence

- No steps were skipped in development and evaluation of the mRNA COVID-19 vaccine
- mRNA has been studied for over a decade for use as a vaccine and was a candidate vaccine for SARS-CoV-1 and MERS
- Can be produced in large quantity in vitro



Bottom line

- Women who are considering pregnancy, pregnant or lactating should be offered the mRNA COVID-19 vaccine when they meet criteria for receipt.
- Resources for providers: (SMFM, ACOG, CDC, ACIP)

[https://s3.amazonaws.com/cdn.smfm.org/media/2591/SMFM_Vaccine_Statement_12-1-20_\(final\).pdf](https://s3.amazonaws.com/cdn.smfm.org/media/2591/SMFM_Vaccine_Statement_12-1-20_(final).pdf)

[https://s3.amazonaws.com/cdn.smfm.org/media/2641/Provider_Considerations_for_Engaging_in_COVID_Vaccination_Considerations_12-15-20_\(final\).pdf](https://s3.amazonaws.com/cdn.smfm.org/media/2641/Provider_Considerations_for_Engaging_in_COVID_Vaccination_Considerations_12-15-20_(final).pdf)

[Vaccinating Pregnant and Lactating Patients Against COVID-19 | ACOG](#)

https://www.cdc.gov/vaccines/covid-19/info-by-product/pfizer/clinical-considerations.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fvaccines%2F covid-19%2Finfo-by-manufacturer%2Fpfizer%2Fclinical-considerations.html

COVID Vaccine Update



**Infection Control Assessment
and Promotion Program**

COVID Infection Post 7-Days After Vaccination

If you have a case (staff or resident) of COVID-19 that occurs 7 days after the second dose of the vaccine, please report this case to ICAP.

Questions and Answer Session

Use the QA box in the webinar platform to type a question. Questions will be read aloud by the moderator.

Panelists:

- Dr. Salman Ashraf
 - Dr. Emily Patel
 - Kate Tyner, RN, BSN, CIC
 - Margaret Drake, MT(ASCP),CIC
 - Jody Scebold, EdD, MSN, RN
 - Sarah Stream, MPH, CDA
 - Karen Amsberry, MSN, RN
 - Lacey Pavlovsky, RN, MSN, CIC
 - Dan German
-
- Moderated by Marissa Chaney
 - Supported by Margaret Deacy
 - Slide support from Lacey Pavlovsky, RN, MSN, CIC

The screenshot shows a webinar platform interface. On the left, there are two expandable sections: 'COVID-19 LTCF Webinar Slides' and 'COVID-19 LTCF Webinar Recordings'. Below these, a list of recordings is displayed, each with a date and a 'here' link. A green arrow points to the recording dated 04.09.2020. On the right, a sidebar contains several red navigation buttons: 'COVID-19 RESOURCES - PPE', 'COVID-19 RESOURCES - SCHOOLS & BEHAVIORAL HEALTH', 'COVID-19 RESOURCES - EXPERT INFORMATION', 'COVID-19 WEBINARS', 'COVID-19 TOOLS FOR LTCF', and 'STAFFING RESOURCES'.

<https://icap.nebraskamed.com/resources/>

Don't forget to Like us on Facebook for important updates!



The screenshot shows the Facebook profile for Nebraska ICAP. The profile picture is a red outline of Nebraska with 'ICAP' written inside. The name is 'Nebraska ICAP' and the bio is '@NebraskaICAP · Educational Consultant'. There is a blue 'Learn More' button and a link to 'icap.nebraskamed.com'. The bottom navigation bar shows 'Home', 'About', 'Videos', 'Live', 'More', 'Liked', 'Message', and search icons.

Updates and Announcements



**Infection Control Assessment
and Promotion Program**



Vaccine Wall of Honor!

ICAP wants to celebrate YOU!

You've done the hard work on this COVID-19 journey, and ICAP wants to honor your facilities!

If your facility has vaccinated 70% or more of your staff, we want to know!

Join the ranks of other Long Term Care Facilities in Nebraska as:

Gold: More than 90% vaccinated

Silver: More than 80% vaccinated

Bronze: More than 70% vaccinated

We will include an announcement of new members to the wall of fame on the weekly webinars, as well as feature a facility story on our Facebook page about the facility vaccination journey.

Please submit your facility for the ICAP COVID Wall of Honor at <https://forms.gle/DceneS2xABsLMLoQ8>



Vaccine Wall of Honor!

Who should be counted as vaccine eligible staff in the nursing home?

As long as there is no medical exemption or contraindication, ICAP suggests including:

- Everyone on the facility payroll who works in the building
- All contract staff who are frequently in the building and have interactions with LTCF staff and/or residents (therapist, agency staff etc.)
- Essential care givers if the LTCF has an essential care giver program already in place.

COVID-19 Tele-ICAP Assessments

- ICAP is offering COVID-19 focused virtual ICAR assessments to outpatient and acute care facilities
- The assessment will assess the status of COVID-19 policies and procedures and offer a summary of recommendations from ICAP
- Home Health Agencies fall under the outpatient umbrella and ICAP has developed a HH focused survey to support our HH partners
- Contact NE ICAP at 402.552.2881 to be connected with the IP responsible for the facility

Webinar CE Process

1 Nursing Contact Hour and 1 NAB Contact Hour is offered for attending this LIVE webinar

1. A survey will open upon completion of the webinar, **you must complete the survey to get your CE credits.** Please note: Your web browser makes a difference. Google Chrome is the suggested browser.
2. Nursing Credit hours will include the entire month of verified CE on one certificate (Ex: You attended 2 webinars during the month of November, your certificate will reflect the 2 webinar dates and 2 credit hours earned)
3. Nursing Certificates will be emailed to you by the 15th of the following month
4. You must have a NAB account to claim credit with them
5. You must provide your NAB number for us to submit attendance to the NAB system

Direct any CE questions to Sarah Stream, MPH, CDA at sstream@nebraskamed.com or Marissa Chaney at machaney@nebraskamed.com

Infection Prevention and Control: Office and On-Call Hours

Call 402-552-2881

Office Hours are Monday – Friday

8:00 AM - 10:00 AM Central Time

2:00 PM - 4:00 PM Central Time

On-Call Hours are

**Monday – Friday 4:00 PM – 8:00 PM and
8:00 AM – 8:00 PM Weekends and Holidays**