



SOUTH DAKOTA  
DEPARTMENT OF HEALTH

*This call is not intended for the press or for reporting purposes.*

# Compassionate Care – *for counties over 10% test positivity rate*

**Source: CMS Frequently Asked Questions – October 6, 2020**

While end-of-life situations have been used as examples of compassionate care situations, the term “compassionate care situations” **does not exclusively refer to end-of-life situations**. Examples of other types of compassionate care situations include, **but are not limited to**:

- A resident, who was living with their family before recently being admitted to a nursing home, is struggling with the change in environment and lack of physical family support.
- A resident who is grieving after a friend or family member recently passed away.
- A resident who needs cueing and encouragement with eating or drinking, previously provided by family and/or caregiver(s), is experiencing weight loss or dehydration.
- A resident, who used to talk and interact with others, is experiencing emotional distress, seldom speaking, or crying more frequently (when the resident had rarely cried in the past).

Allowing a visit in these situations would be consistent with the intent of, “compassionate care situations.” Also, in addition to family members, compassionate care visits can be conducted by any individual that can meet the resident’s needs, such as clergy or lay persons offering religious and spiritual support.

**Furthermore, the above list is not an exhaustive list** as there may be other compassionate care situations not included.

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# Archived Calls

## LONG-TERM CARE CALLS

- 02/24/21 - Long-Term Care Call with Secretary of Health | Slides
- 01/20/21 - Long-Term Care Call | Slides
- 01/13/21 - Long-Term Care Call | Slides
- 01/06/21 - Long-Term Care Call | Slides
- 12/16/20 - Long-Term Care Call | Slides
- 12/09/20 - Long-Term Care Call | Slides

<https://doh.sd.gov/COVID/Calls.aspx>

## LTCF Risk Assessment Examples for Community Visits

- ❑ [https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/riskassessment\\_communityvisit.pdf](https://www.doh.wa.gov/Portals/1/Documents/1600/coronavirus/riskassessment_communityvisit.pdf)
- ❑ [http://www.dph.illinois.gov/sites/default/files/COVID-19\\_LTC\\_FacilityRiskAssessment.pdf](http://www.dph.illinois.gov/sites/default/files/COVID-19_LTC_FacilityRiskAssessment.pdf)
- ❑ Georgia Risk Assessment – Page 3  
[https://assets.website-files.com/5ead5c72cd1146a4d27183f3/5fbbc832ed56ccca38a9f21d\\_LTCF%20Holiday%20Guidance-Update%2011202020.pdf](https://assets.website-files.com/5ead5c72cd1146a4d27183f3/5fbbc832ed56ccca38a9f21d_LTCF%20Holiday%20Guidance-Update%2011202020.pdf)
- ❑ [https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT\\_exp\\_risk\\_assess\\_template\\_patients\\_postacute.pdf](https://www.nj.gov/health/cd/documents/topics/NCOV/INFCONT_exp_risk_assess_template_patients_postacute.pdf)

- CDC COVID-19 Guidance: CDC continues to learn more about Coronavirus Disease 2019 (COVID-19) and guidance around infection prevention and control (IPC) for healthcare settings continues to be updated to reflect developing knowledge. Below is a list of some of the key healthcare IPC related guidance documents and resources that have been recently published or updated by CDC:
  - [Interim Guidelines for Collecting and Handling of Clinical Specimens for COVID-19 Testing \(Capillary Fingerstick Specimen Collection\)](#) (2/26/21)
  - [Interim U.S. Guidance for Risk Assessment and Work Restrictions for Healthcare Personnel with Potential Exposure to SARS-CoV-2](#) (2/19/21)
  - [Clinical Questions about COVID-19: Questions and Answers](#) (2/19/21)
  - [Summary for Healthcare Facilities: Strategies for Optimizing the Supply of N95 Respirators During Shortages](#) (2/18/21)
  - [Return to Work Criteria for Healthcare Personnel with SARS-CoV-2 Infection \(Interim Guidance\)](#) (2/16/21)
  - [Strategies to Mitigate Healthcare Personnel Staffing Shortages](#) (2/16/21)
  - [Interim Guidance on Testing Healthcare Personnel for SARS-CoV-2](#) (2/16/21)
  - [Discontinuing Transmission-Based Precautions and Disposition of Patients with SARS-CoV-2 Infection in Healthcare Settings](#) (2/16/21)
  - [Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the COVID-19 Pandemic](#) (2/10/21)
  - [Strategies to Optimize the Supply of N95 Respirators](#) (2/10/21)
  - [Interim Clinical Considerations for Use of mRNA COVID-19 Vaccines Currently Authorized in the United States](#) (2/10/21)

## **Current Outbreaks of Ebola in Democratic Republic of the Congo and Guinea**

Outbreaks of Ebola virus disease (EVD) are ongoing in the Democratic Republic of the Congo (DRC) and Guinea. The U.S. Centers for Disease Control and Prevention (CDC) is providing this communication as a reminder to U.S. healthcare personnel about CDC infection prevention and control guidance for identifying and managing patients with possible and confirmed EVD.


### **Current Infection Prevention and Control Recommendations for EVD in U.S. Healthcare Facilities**

[CDC Ebola website for clinicians.](#)

- Personal protective equipment (PPE) guidance remains in place for the management of [Clinically Stable PUIs](#) and [Confirmed Ebola Patients or Clinically Unstable PUIs](#).
- [PPE Calculator Tool](#)

## VIM-CRPA Outbreak Update

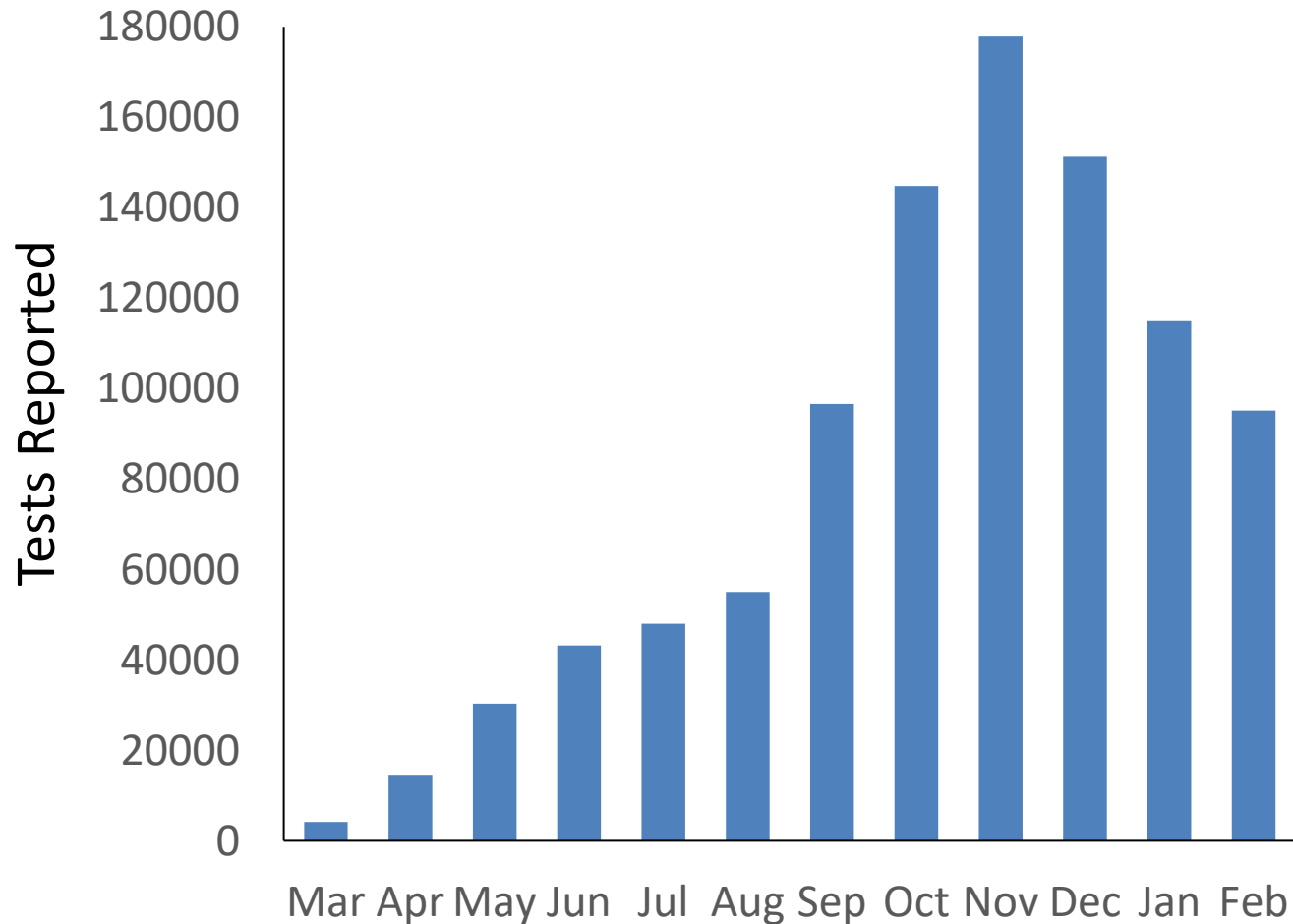
In response to several recently identified cases of VIM-CRPA linked to surgery or other invasive procedures in Mexico, CDC has posted an update to our webpage [Pseudomonas aeruginosa](#) which includes a description of the epidemiology of recent cases and information for clinicians and patients.



# Laboratory Guidance



# SARS-CoV-2 Tests Reported to SDDOH by Month



- There remains a need to maintain a high level of testing statewide.
- Symptomatic individuals
  - Connect COVID-19 patients with care
  - Track spread of disease
  - Disrupt transmission
  - Variant surveillance
- Asymptomatic individuals
  - Detect “asymptomatic” COVID-19 cases
  - End-of-quarantine testing
  - Variant surveillance

# mAb Therapy: Direct Ordering Information

## Direct Ordering:

- [Direct Ordering Process Guide](#)
- [AmerisourceBergen COVID-19 Director Order Request](#)

## General Information:

- [COVID-19 Monoclonal Antibody Therapeutics Key Resources for Providers \(Fact Sheet\)](#)
- [Regeneron EUA Guidebook](#)
- [Lilly Bamlanivimab Antibody Playbook](#)
- [ASPR Portfolio of COVID-19 Medical Countermeasures](#)

## Support:

- HHS: [COVID19Therapeutics@hhs.gov](mailto:COVID19Therapeutics@hhs.gov)
- Amerisource Bergen: [C19therapies@amerisourcebergen.com](mailto:C19therapies@amerisourcebergen.com)
- SD-DOH: [Bob.Coolidge@state.sd.us](mailto:Bob.Coolidge@state.sd.us)

# Abbott BinaxNOW COVID Ag Card Expiration Dates

- Abbott has extended the expiration date of many lots of BinaxNOW kits
- Abbott now endorses a shelf-life of up to 9 months for many existing kits and for all newly manufactured kits
- Abbott BinaxNOW card lots, part number 195-000, which qualify for extension of expiration, can be found in the recent letter provided by Abbott. The letter provides:
  - Lot number
  - Current expiration date
  - New expiration date
- Abbott is updating the Navica app to accept COVID Ag cards with extended expiration dates

Attachment 1 - BinaxNOW™ COVID-19 Ag Card lots with extended expiry

Lot Number	Original Expiry	New Expiry
124008	07-Feb-21	07-May-21
124073	08-Feb-21	08-May-21
124199	10-Feb-21	10-May-21
124380	11-Feb-21	11-May-21



# SARS-CoV-2 Antigen Testing: Abbott BinaxNOW

- SDDOH continues to stock Abbott BinaxNOW COVID-19 Antigen test cards.
- For questions about BinaxNOW availability, please contact the following:
  - K-12 Schools: [Joe.Moran@state.sd.us](mailto:Joe.Moran@state.sd.us)
  - Childcare Providers: [Laura.Nordbye@state.sd.us](mailto:Laura.Nordbye@state.sd.us)
  - Long-term Care: [Denise.Broadbent@state.sd.us](mailto:Denise.Broadbent@state.sd.us)
  - Healthcare: [Laurie.Gregg@state.sd.us](mailto:Laurie.Gregg@state.sd.us)
  - Higher Education: [Laurie.Gregg@state.sd.us](mailto:Laurie.Gregg@state.sd.us)
  - Businesses/Pharmacies: [Leanne.Nicholls@state.sd.us](mailto:Leanne.Nicholls@state.sd.us)
- SDDOH continues to accept requests for BinaxNOW antigen cards
  - [Joan.Adam@state.sd.us](mailto:Joan.Adam@state.sd.us)
  - [Tim.Southern@state.sd.us](mailto:Tim.Southern@state.sd.us)
- Inquiries for BinaxNOW resources can also be directed to:
  - [Dorothy.Ahten@abbott.com](mailto:Dorothy.Ahten@abbott.com)



**Abbott**



SOUTH DAKOTA DEPARTMENT OF HEALTH

# SARS-CoV-2 Variant Sequencing

- A variety of approaches can be used to identify SARS-CoV-2 variants
- Targeted gene sequencing can be used to detect specific mutations SARS-CoV-2 genes that correspond to variants of interest
- Whole genome sequencing can be used to sequence large portions of the SARS-CoV-2 genome which leads to more information including mutations found in a variety of genes

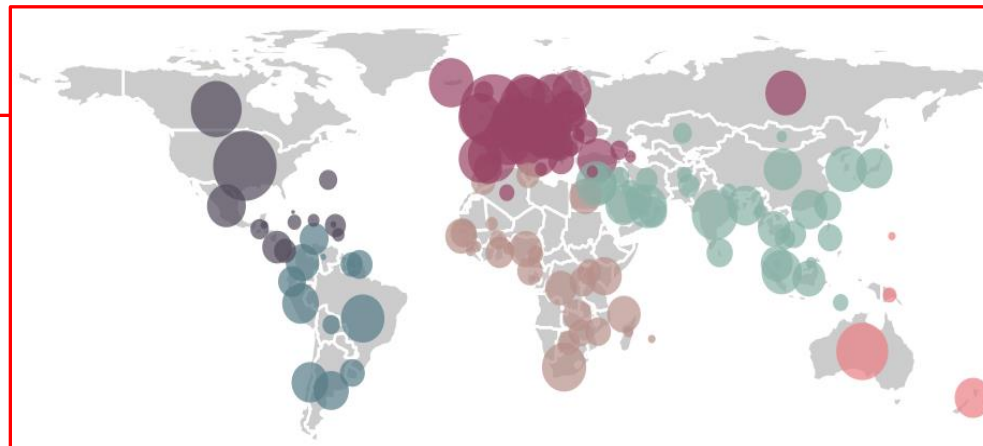


# SARS-CoV-2 Sequence Analysis: Pangolin



- There are several tools that help scientists evaluate SARS-CoV-2 sequence data
- One tool is Pangolin: Phylogenetic Assignment of Named Global Outbreak Lineages
- Pangolin assigns a Pango lineage name to SARS-CoV-2 sequences
- Some major Pango SARS-CoV-2 lineages include:

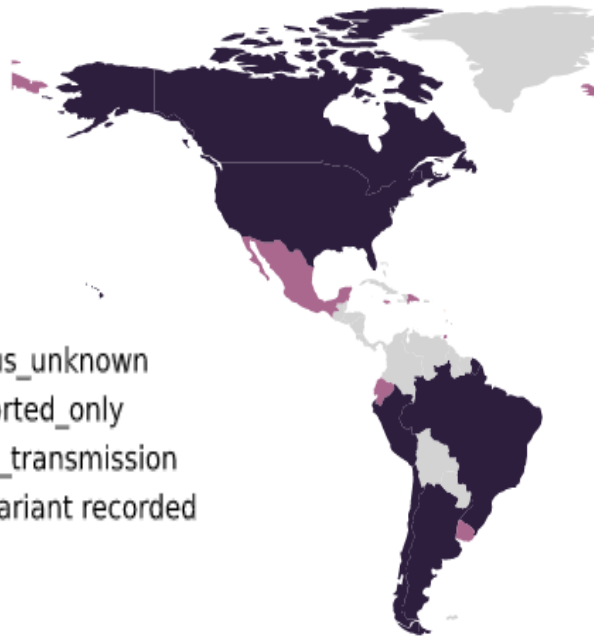
- A
- B
- B.1
- B.1.177
- B.1.1.7



# SARS-CoV-2 Variants: Lineages of Concern

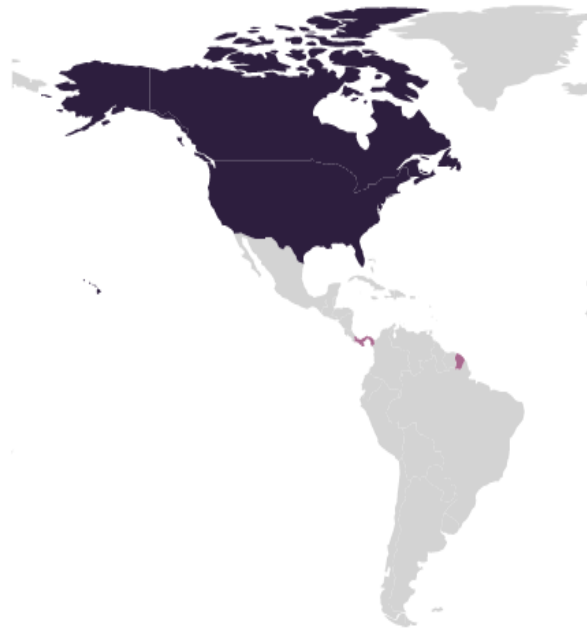
## B.1.1.7: UK Variant

- 94 countries
- 84 countries with sequences



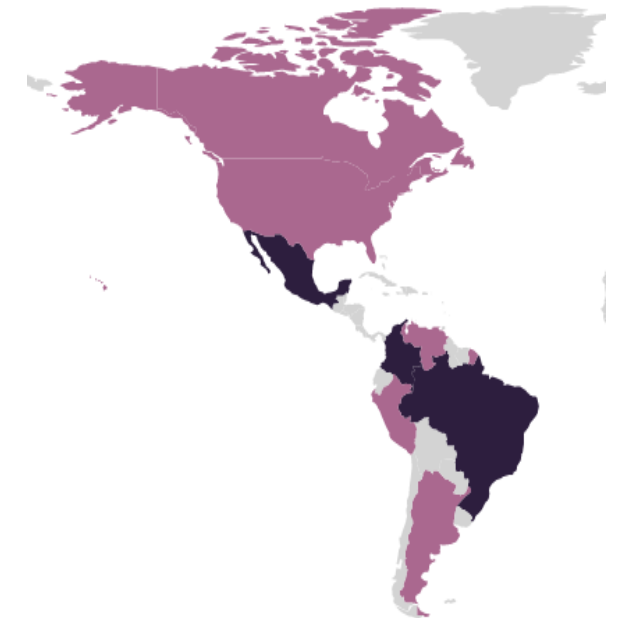
## B.1.135: South African Variant

- 48 countries
- 41 countries with sequences



## P.1: Brazil Variant

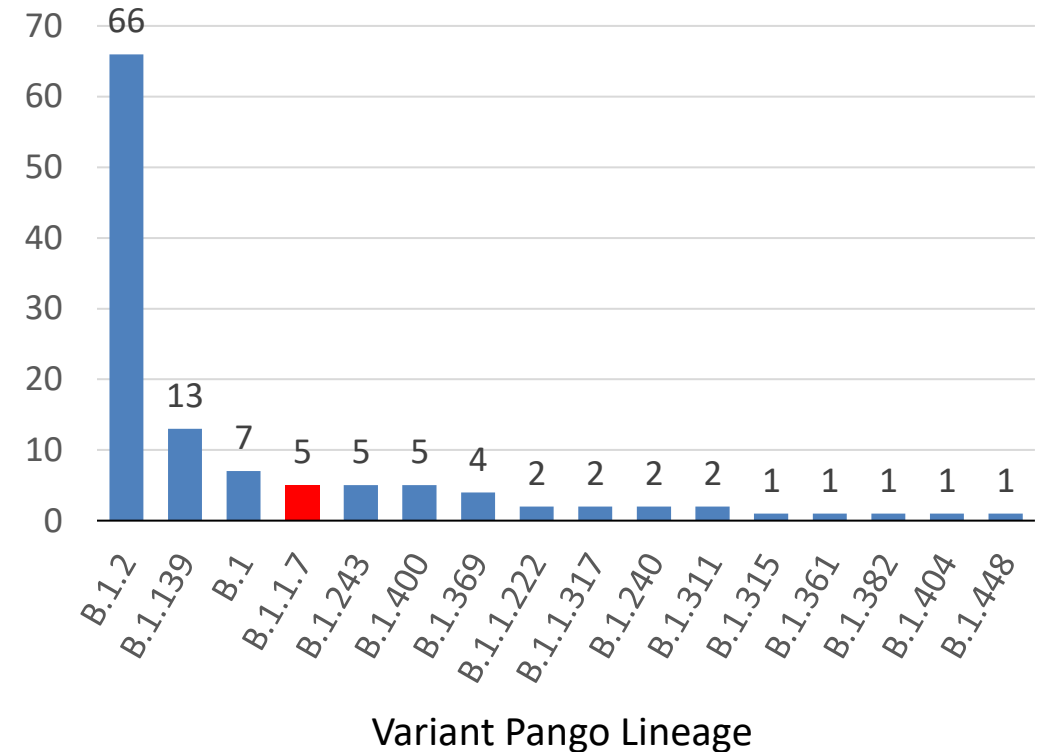
- 25 countries
- 19 countries with sequences



- status\_unknown
- imported\_only
- local\_transmission
- No variant recorded

# SDPHL SARS-CoV-2 Variant Sequence Data

Lineage	Count	Description	Most Common Countries
B.1.2	66	USA Lineage	USA; Canada; Denmark
B.1.139	13	USA Lineage	USA; Denmark
B.1	7	Large European Lineage	UK; USA; Canada
<b>B.1.1.7</b>	<b>5</b>	<b>UK Lineage of Concern</b>	<b>UK; Denmark; Belgium; USA</b>
B.1.243	5	USA Lineage	USA; Mexico
B.1.400	5	USA Lineage	USA
B.1.369	4	USA/New Zealand Lineage	USA; Canada; New Zealand; UK
B.1.1.222	2	USA/Mexico Lineage	USA; Mexico; Switzerland
B.1.1.317	2	Russian Lineage	Russia; UK; Canada; Denmark; USA
B.1.240	2	USA Lineage	USA; UK
B.1.311	2	USA Lineage	USA; Canada
B.1.315	1	USA Lineage	USA
B.1.361	1	USA Lineage	USA
B.1.382	1	USA Lineage	USA; Canada
B.1.404	1	USA/Mexico Lineage	USA; Mexico; Canada
B.1.448	1	USA Lineage	USA
Total	118		



- 2/5 B.1.1.7 variants: not residents of South Dakota
- 3/5 B.1.1.7 variants: residency currently under evaluation
- B.1.351: not identified by sequencing
- P.1: not identified by sequencing



# Specimen Submission to SDPHL for Sequencing

- SDPHL is asking that all clinical laboratories submit SARS-CoV-2-positive specimens to SDPHL for sequencing.
  - Specimens should be from South Dakota residents
  - Specimens should be a nasal, MTS, or NP swab in viral transport medium
  - Specimens must have been collected and tested in the previous 7 days
  - Specimens can be shipped to the SDPHL weekly on Wednesday and Thursday
  - The SDPHL sequencing requisition form should be submitted with each specimen
  - SDPHL will provide packaging and shipping supplies as well as access to the statewide courier for specimen transport
  - Updated information regarding variant sequencing will be provided in an upcoming Lab Alert

# SDPHL Variant Sequencing and Data Sharing

- Variant sequencing is not currently provided as a clinical or diagnostic service.
  - Variant sequencing is for epidemiological purposes only.
- Sequencing results will not be provided back to the submitter to influence patient care.
  - Variant sequencing is not recognized by CMS as a “CLIA-approved” test.
  - SDPHL will not accept requests for variant sequencing from healthcare providers who want to use that information to influence patient care.
- Sequencing results will be provided by SDPHL in aggregate form most likely on a biweekly or monthly basis during the Lab/IP and Healthcare partners webinars.
- SDPHL will accept any SARS-CoV-2-positive specimen for sequencing if the specimen is correctly collected and submitted in a timely manner.