2019 Novel Coronavirus (COVID-19)

South Dakota Department of Health

December 9th, 2021

We will begin in just a few moments. Thanks!

Not intended for press or for reporting purposes.
This is an **emerging, rapidly evolving situation**. Information in this presentation is current as of December 8\(^{th}\), 2021. Please check the South Dakota Department of Health website for the most current information and guidance.

[COVID.sd.gov](https://www.COVID.sd.gov)

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Agenda

- Situation Update
- Laboratory Guidance
- Long Term Care
- Vaccination Update
- Infection Prevention
- Community Mitigation
- Supply Chain Management
- On-going Communications
- Q&A Session

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Coronavirus Situation

- **International**
  - 266,504,411 confirmed cases
    - 5,268,849 deaths
- **United States** (50 states + DC)
  - 48,982,584 confirmed cases
    - 783,433 deaths
- **South Dakota**
  - 170,416 confirmed and probable cases
    - 2,384 deaths
    - 160,280 recovered cases

As of December 8th, 2021

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Epidemiologic “Epi” Curve of COVID-19 Cases, by Date Reported to SD-DOH

As of December 8th 2021

Not intended for press or for reporting purposes.
COVID-19 Case Map, by County

As of December 8th, 2021

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<table>
<thead>
<tr>
<th>Community Spread</th>
<th>Number of Counties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low</td>
<td>1</td>
</tr>
<tr>
<td>Moderate</td>
<td>2</td>
</tr>
<tr>
<td>Substantial</td>
<td>1</td>
</tr>
<tr>
<td>High</td>
<td>59</td>
</tr>
</tbody>
</table>
General Testing Recommendations

Medical providers are recommended to test individuals (1) identified as a close contact to a person with COVID-19 or (2) signs and symptoms compatible with COVID-19 infection, including:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea


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Reporting COVID-19 Tests to SD-DOH

• **Reminder**: Coronavirus respiratory syndromes are a Category I disease

• Report *immediately* on suspicion of disease

• Reporting mechanisms:
  • Electronic Laboratory Report (ELR) – HL7 message to SD Health Link (health information exchange)
  • Flat file (CSV) – Secure email
  • Disease reporting website – [sd.gov/diseasereport](http://sd.gov/diseasereport)
    • **Ensure patient phone numbers are included**
  • Fax – 605.773.5509

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Cases, Hospitalizations, and Deaths by Age Group
Cumulative as of December 7th, 2021

Pct of Cases (distribution of cases across age groups)
Pct Hospitalized (of cases within age groups)
Pct Died (of cases within age groups)

As of December 7th, 2021

Not intended for press or for reporting purposes.
# Breakthrough, Variant, and Reinfection Cases

<table>
<thead>
<tr>
<th>Breakthrough Cases</th>
<th>#</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cases</td>
<td>9,265</td>
</tr>
<tr>
<td>Hospitalized</td>
<td>503</td>
</tr>
<tr>
<td>Died</td>
<td>115</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Reinfecion</th>
<th>#</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cases</td>
<td>1,292</td>
</tr>
<tr>
<td>Hospitalized</td>
<td>65</td>
</tr>
<tr>
<td>Died</td>
<td>17</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Variant Cases</th>
<th>#</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cases</td>
<td>1,091</td>
</tr>
<tr>
<td>Hospitalized</td>
<td>66</td>
</tr>
<tr>
<td>Died</td>
<td>16</td>
</tr>
</tbody>
</table>


As of December 7th, 2021

*Not intended for press or for reporting purposes.*
Travel Proclamation Changes

Effective **December 6th**:  

Boarding of any passenger, regardless of citizenship, ages 2 and older, on any aircraft destined to the United States from a foreign country is prohibited unless the passenger:

- Presents documentation of a negative pre-departure viral test result for SARS-CoV-2 conducted on a specimen collected no more than **one day** prior to the flight’s departure from a foreign country

**OR**

- Presents documentation of having recovered from COVID-19 in the past 90 days in the form of a positive viral test result for SARS-CoV-2 conducted on a specimen no more than 90 calendar days before the flight **AND** a letter from a licensed healthcare provider or public health official stating that the passenger has been cleared for travel.
Omicron Variant Overview

Spread:
- Currently reported to be in 17 states as of December 7th.
- Will likely spread more easily than the original SARS-CoV-2 virus and how easily Omicron spreads compared to Delta remains unknown.

Infection and clinical illness:
- Able to infect fully vaccinated people and well as people who are recovered from Delta variant SARS-CoV-2 infection.
- Symptoms reported to be mild with differences to previous strains being greater proportion of persons reporting intense fatigue.
- Not enough collected data on the full spectrum of signs, symptoms, and severity of disease.
- South African public health authority has not officially reported any increase in the proportion of hospitalizations, ICU admissions, or deaths

Vaccines and therapeutics:
- Expected that vaccines will remain effective against severe illness and death
- Decreased neutralization from vaccine and infection-induced antibodies might result in breakthrough infections and reinfections
- Virus-specific data on monoclonals and antivirals is unknown
The odds of infection with COVID-19 in this hospitalized cohort were 5.49-fold higher in unvaccinated, previously infected adults than in adults who were fully vaccinated with an mRNA COVID-19 vaccine with no previous documented COVID-19 infection.

http://dx.doi.org/10.15585/mmwr.mm7044e1

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Holiday Celebrations Safety

Unvaccinated, people with weakened immune system or at increased risk for severe disease:
• Wear well-fitting masks over your nose and mouth if you are in public indoor settings.
• If you must travel, follow CDC’s domestic travel or international travel recommendations.
• If you will be traveling in a group or family with unvaccinated people, choose safer travel options.

Everyone, even people who are fully vaccinated:
• Wear a mask in public indoor settings in communities with substantial to high transmission.
• Wear a mask on public transportation and follow international travel recommendations.
• If you are sick or have symptoms, don’t host or attend a gathering.
• Get tested if you have symptoms of COVID-19 or have a close contact with someone who has COVID-19.
• If you are considering traveling for a holiday or event, visit CDC’s Travel page to help you decide what is best for you and your family.

If you are gathering with a group of people from multiple households and potentially from different parts of the country, you could consider additional precautions in advance of gathering to further reduce risk.
• Avoiding crowded indoor spaces before travel
• Taking a test

Selected CDC Updates

Available at: https://www.cdc.gov/coronavirus/2019-ncov/whats-new-all.html

COVID Data Tracker: https://covid.cdc.gov/covid-data-tracker/#datatracker-home


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Laboratory Guidance
COVID-19 Tests Reported to SDDOH by Month

SARS-CoV-2 Testing Updates:
• Test demand remains high
• Antigen testing is also increasing throughout the state including OTC tests which are not reported to SDDOH
• Antigen test kit shortages persist but supply chains appear to be improving
SARS-CoV-2 Genomic Surveillance

• Monthly submission goal = 600 specimens

• SDPHL asks that laboratories send the following SARS-CoV-2-positive specimens each week:
  – Rural clinics, FQHCs, etc: 10
  – Indian Health Services and tribal clinics: 15
  – Critical access hospital laboratories: 20
  – Higher-education partners: 20
  – Large hospital laboratory partners: 50
  – Reference laboratory partners: 50

• Nasal or nasopharyngeal swab specimens should be submitted in viral transport medium, sterile saline or sterile PBS within 72 hours of collection.
Testing Resource Requests

• For questions about DOH antigen testing support, please contact:
  - Long-term Care: Denise.Broadbent@state.sd.us
  - Healthcare: Laurie.Gregg@state.sd.us
  - K-12 Schools: Joe.Moran@state.sd.us
  - Higher Education: Laurie.Gregg@state.sd.us
  - Childcare Providers: Laura.Nordbye@state.sd.us
  - Businesses: John.Osburn@state.sd.us
  - Confinement Facilities: Staci@southdakotasheriffs.org
  - Homeless Shelters: Program in Development

• Inquiries for Abbott BinaxNOW and ID NOW resources can also be sent to: Dorothy.Ahten@abbott.com

• Inquiries for Quidel QuickVue resources can also be sent to: Matt.VanDam@McKesson.com
OTC Test Kit Availability For Individuals That Receive COVID Vaccination

• Beginning immediately, SDPHL will make Quidel QuickVue OTC test kits available to all healthcare partners for distribution to individuals that receive COVID-19 vaccination(s).

• OTC kits are available for distribution during mass vaccination events, scheduled clinic visits, or any other settings where COVID-19 vaccinations are provided.

• OTC kits must be made available free-of-charge.

• OTC kits are available for at-home use only.

• Facilities that would like to receive OTC test kits for distribution to individuals receiving COVID-19 vaccines should reach out to the SDPHL for additional information:
  - Laurie.Gregg@state.sd.us
  - Tim.Southern@state.sd.us
Federal Vaccine Mandate: Impact on Testing

• In early November, the White House mandated COVID-19 vaccination for a large portion of the American workforce.
  - Vaccination mandate
  - OSHA ETS

• Thirteen states are challenging the federal vaccination mandate so it is unknown if/when the mandate will be implemented.

• The federal government has indicated the availability of hundreds of millions of tests each month beginning in January.
  - Allocations and distribution processes have not been shared with states.

• SDPHL continues to receive requests for SARS-CoV-2 antigen test kits in support of testing mandates for unvaccinated employees.
  - SDPHL is not providing antigen test kits in support of the federal testing mandate.
  - Free testing for all South Dakotans is still available through Vault Health.
Influenza Season: Impact on Testing

- Influenza and numerous other respiratory pathogens are circulating in our communities.
- SDPHL has detected the following pathogens through its respiratory syndromic surveillance program:
  - Influenza A
  - Influenza B
  - Rhinovirus/Enterovirus
  - Respiratory Syncytial Virus
  - Human Metapneumo Virus
  - Parainfluenza 1-4
  - Coronavirus 229E
  - Adenovirus
- SDPHL has also confirmed several SARS-CoV-2/influenza coinfections as well as influenza A/B coinfections.
- SDPHL asks that clinical partners continue to offer diverse testing opportunities for COVID and non-COVID respiratory pathogens and continue to send specimens to SDPHL for influenza surveillance.
Laboratory Workforce Development: Two Opportunities

1. ASCP Advanced Certification: January 2022-February 2023
   - 60-80 opportunities will be available
     ▪ ASCP Specialist in Microbiology - SM(ASCP)
     ▪ ASCP Specialist in Molecular Biology - SMB(ASCP)
   - Laboratorians must qualify according to ASCP guidelines
   - A financial incentive will be provided to support study materials, testing, and other expenses
   - A financial incentive will be provided to individuals that successfully pass the exam

2. Remote Training/Continuing Education: April 2022 – October 2022
   - Almost two dozen training modules will be available to laboratorians and phlebotomists
   - MediaLab subscription will be provided to all individuals that participate in this training program
   - P.A.C.E credit will be provided to all participants for each training module completed
   - Training modules will focus on diverse topics such as laboratory safety, risk assessment, etc
   - A financial incentive will be provided for each training module completed
   - Financial incentives will be awarded at the conclusion of the training opportunity
COVID Therapy Updates
FDA EUA-Approved COVID-19 Therapies

- The following EUA-approved monoclonal antibodies therapies are only available by federal allocation.
  - Four mAb therapies are currently available:
    - REGEN-CoV (Regeneron)
    - Bamlanivimab/Etesevimab (Ely Lilly)
    - Sotrovimab (GlaxoSmithKline)
    - Evusheld (AstraZeneca)
  - A new antiviral may become available soon:
    - Molnupiravir (Merck/Ridgeback); FDA EUA approval is pending
COVID-19 Monoclonal Antibody Therapy Allocation

- **Monoclonal antibody therapy is not a substitute for vaccination!**
- It is strongly recommended that all eligible individuals receive a COVID-19 vaccine.
- Due to high demand, mAb therapy is only recommended for **highest-risk COVID patients**.
- Questions about mAb therapies and availability can be sent to: **Bob.Coolidge@state.sd.us**

### Allocation Wk (Date) REGEN-CoV Bam/Ete Sotrovimab Total Courses

<table>
<thead>
<tr>
<th>Allocation Wk (Date)</th>
<th>REGEN-CoV</th>
<th>Bam/Ete</th>
<th>Sotrovimab</th>
<th>Total Courses</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 1 (9/13)</td>
<td>380</td>
<td>50</td>
<td>0</td>
<td>430</td>
</tr>
<tr>
<td>Week 2 (9/20)</td>
<td>336</td>
<td>156</td>
<td>0</td>
<td>492</td>
</tr>
<tr>
<td>Week 3 (9/27)</td>
<td>396</td>
<td>170</td>
<td>0</td>
<td>566</td>
</tr>
<tr>
<td>Week 4 (10/4)</td>
<td>360</td>
<td>200</td>
<td>0</td>
<td>560</td>
</tr>
<tr>
<td>Week 5 (10/11)</td>
<td>216</td>
<td>260</td>
<td>144</td>
<td>620</td>
</tr>
<tr>
<td>Week 6 (10/18)</td>
<td>160</td>
<td>312</td>
<td>78</td>
<td>550</td>
</tr>
<tr>
<td>Week 7 (10/25)</td>
<td>200</td>
<td>348</td>
<td>138</td>
<td>686</td>
</tr>
<tr>
<td>Week 8 (11/1)</td>
<td>170</td>
<td>288</td>
<td>114</td>
<td>572</td>
</tr>
<tr>
<td>Week 9 (11/7)</td>
<td>252</td>
<td>150</td>
<td>102</td>
<td>504</td>
</tr>
<tr>
<td>Cycle 10 (11/15-11/28)</td>
<td>444</td>
<td>260</td>
<td>174</td>
<td>878</td>
</tr>
<tr>
<td>Cycle 11 (11/29-12/12)</td>
<td>516</td>
<td>410</td>
<td>0</td>
<td>926</td>
</tr>
</tbody>
</table>
Ely Lilly Bamlanivimab/Etesevimab Update

- U.S. Food and Drug Administration revised the emergency use authorization (EUA) of bamlanivimab and etesevimab (Eli Lilly and Company).

- Bam/Ete is now authorized for the treatment of mild to moderate COVID-19 in all younger pediatric patients, including newborns, who have a positive COVID-19 test and are at high risk for progression to severe COVID-19, including hospitalization or death.

- Previous authorization was limited to pediatric patients 12 years of age and older weighing at least 40 kilograms, or about 88 pounds.

- Revision also authorizes bam/ete for post-exposure prophylaxis for prevention of COVID-19 in all pediatric patients, including newborns, at high risk of progression to severe COVID-19, including hospitalization or death.

- Federal COVID Response working with pediatric organizations on education and roll-out.
AstraZeneca Evusheld

- EUA approved for pre-exposure prophylaxis of COVID-19 in certain adult and pediatric individuals (12 years of age and older).
- Only authorized for individuals not currently infected with SARS-CoV-2.
- Individuals must either have:
  - Moderate to severe compromised immune systems
  - A history of severe adverse reactions to a COVID-19 vaccine or vaccine component.
- One dose of Evusheld is administered as two separate, consecutive intramuscular injections.
- One dose may be effective for pre-exposure prevention for six months.
- Evusheld is not a substitute for vaccination in individuals for whom vaccination is recommended.
- Additional information about Evusheld can be found on the FDA website.
Healthcare Partner Ordering Portal (HPoP)

• The federal government will implement a new ordering and reporting system for COVID-19 therapeutics in the coming days.

• Public health jurisdictions and pharmacies will use the new Healthcare Partner Ordering Portal (HPoP) to allocate, order, and report usage of COVID-19 therapeutics.
  - Only newly approved therapeutics will be made available through HPoP
  - Ely Lilly, Regeneron, and GSK mAb products will remain available through Amerisourcebergen portal

• Twenty-two sites in South Dakota were initially enrolled in the HPoP system with additional sites to be enrolled in the coming weeks.
  - Sites were selected to help ensure access to COVID-19 therapeutics throughout South Dakota and to ensure individuals that need mAb therapy are connected to appropriate healthcare resources.

• Support for healthcare partner pharmacies enrolled in the HPoP system can be found at the following:
  - HPOP-Therapeutics@hhs.gov
Long Term Care
Disease Impact & Vaccine Status in LTC – United States

Data reported by nursing homes to the CDC’s National Healthcare Safety Network (NHSN) system COVID-19 Long Term Care Facility Module.

By the numbers

86.7%  
National Percent of Vaccinated Residents per Facility

75.1%  
National Percent of Vaccinated Staff per Facility

730,867  
Total Resident COVID-19 Confirmed Cases

140,563  
Total Resident COVID-19 Deaths

682,282  
Total Staff COVID-19 Confirmed Cases

2,157  
Total Staff COVID-19 Deaths


This call is not intended for the press or for reporting purposes.
Skilled Nursing Facilities, Confirmed Cases among Residents, Inferred Data, South Dakota

CONFIRMED CASES Definition (As of Nov 23rd)
Total Confirmed COVID-19 cases (computed variable) = (Total positive tests – Ag positive test and PCR negative confirmatory test)

4-Week Change Definition (apply to the last 4 weeks after excluding the most recent week due to reporting lag)
Increase: meet both: (1) rate for week 4 was greater than week 1; (2) at least two out of three paired consecutive rate comparisons showed a significant increase.
Decrease: meet both: (1) rate for week 4 was lower than week 1; (2) at least two out of three paired consecutive rate comparisons showed a significant decrease.
Stable: States within detection limits.
Note: Mid-p (1-tailed) method was used to test a statistical significance

Inferred Data: For the purpose of best epidemiological understanding, data that fail quality checks or appear inconsistent with surveillance protocols are assigned a value based on their patterns of data-entry or excluded. Effective December 7, 2020, exclusion criteria were updated across the entire dataset/all time points.

Data as of 11/29/2021 5:30 AM

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Long Term Care in South Dakota

Trending of COVID-19 Disease in Nursing Homes and Assisted Living Centers

- 906 Deaths in LTC residents
- 39% of deaths among people with COVID-19

Data is provisional

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Long Term Care in South Dakota

Providers must continue to follow the Core Principles of Infection Prevention.

- Screening (active). Visitors who have a positive viral test for COVID-19, symptoms of COVID-19, or currently meet the criteria for quarantine, should not enter the facility.
- Hand hygiene
- Face coverings
- Instructional signage and education
- Cleaning and disinfecting
- Appropriate PPE. *Please note: Use of N-95 respirator’s require medical clearance, training, and fit-testing.
- Cohorting residents
- Appropriate testing

CMS Memos

- QSO-20-39-NH (revised 11.12.21) - Visitation
- QSO-21-19-NH (revised 05.11.21) - Vaccination
- QSO-20-38-NH (revised 09.10.21) - Testing

This call is not intended for the press or for reporting purposes.
Long Term Care in South Dakota

QSO-20-39-NH (revised 11.12.21) - Visitation

• Visitation is now allowed for all residents at all times.

• Importance of maintaining infection prevention practices.

• Holiday Planning for Long Term Care Facilities
  o COVID-19 Healthcare Provider & Lab Guidance
    https://doh.sd.gov/COVID/Providers/default.aspx
  o OLC Website link: https://doh.sd.gov/providers/licensure/

This call is not intended for the press or for reporting purposes.
Long Term Care in South Dakota

QSO-21-19-NH (revised 05.11.21) - Vaccination

- Vaccine Mandate for Health-Care Workers Halted by Court 11.29.21

- Federal vaccination requirement Frequently Asked Questions

- Listing of vaccination rates for individual nursing homes: Click to see a list of every nursing home with recent resident and staff vaccination rates and other data.

This call is not intended for the press or for reporting purposes.
Percent of Current Residents with Completed COVID-19 Vaccinations per Facility

Note: This shows the average percentage among facilities who have reported vaccination data in the current or prior week.


This call is not intended for the press or for reporting purposes.
Choose to get vaccinated. Protect yourself, your family, and our residents.


This call is not intended for the press or for reporting purposes.
QSO-20-38-NH (revised 09.10.21) - Testing

- Revised COVID-19 staff testing is based on the facility’s county level of community transmission instead of county test positivity rate. The frequency of testing has also been updated.
- Facilities now have two options to conduct outbreak testing, through either a contact tracing or broad-based testing approach.

<table>
<thead>
<tr>
<th>Testing Trigger</th>
<th>Staff</th>
<th>Residents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Symptomatic individual identified</td>
<td>Staff, vaccinated and unvaccinated, with signs or symptoms must be tested.</td>
<td>Residents, vaccinated and unvaccinated, with signs or symptoms must be tested.</td>
</tr>
<tr>
<td>Newly identified COVID-19 positive staff or resident in a facility that can identify close contacts</td>
<td>Test all staff, vaccinated and unvaccinated, that had a higher-risk exposure with a COVID-19 positive individual.</td>
<td>Test all residents, vaccinated and unvaccinated, that had close contact with a COVID-19 positive individual.</td>
</tr>
<tr>
<td>Newly identified COVID-19 positive staff or resident in a facility that is unable to identify close contacts</td>
<td>Test all staff, vaccinated and unvaccinated, facility-wide or at a group level if staff are assigned to a specific location where the new case occurred (e.g., unit, floor, or other specific area(s) of the facility).</td>
<td>Test all residents, vaccinated and unvaccinated, facility-wide or at a group level (e.g., unit, floor, or other specific area(s) of the facility).</td>
</tr>
<tr>
<td>Routine testing</td>
<td>According to Table 2 below</td>
<td>Not generally recommended</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Level of COVID-19 Community Transmission</th>
<th>Minimum Testing Frequency of Unvaccinated Staff*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low (blue)</td>
<td>Not recommended</td>
</tr>
<tr>
<td>Moderate (yellow)</td>
<td>Once a week*</td>
</tr>
<tr>
<td>Substantial (orange)</td>
<td>Twice a week*</td>
</tr>
<tr>
<td>High (red)</td>
<td>Twice a week*</td>
</tr>
</tbody>
</table>

*Vaccinated staff do not need to be routinely tested.
*This frequency presumes availability of Point of Care testing on-site at the nursing home or where off-site testing turnaround time is <48 hours.

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Long Term Care in South Dakota

COVID-19 Resources

- COVID-19 Healthcare Provider & Lab Guidance
  [https://doh.sd.gov/COVID/Providers/default.aspx](https://doh.sd.gov/COVID/Providers/default.aspx)
- OLC Website link: [https://doh.sd.gov/providers/licensure/](https://doh.sd.gov/providers/licensure/)
- Coronavirus Disease 2019 (COVID-19): Supporting Your Loved One in a Long-Term Care Facility
- Interim Infection Prevention and Control Recommendations to Prevent SARS-CoV-2 Spread in Nursing Homes. Nursing Homes & Long-Term Care Facilities. Updated Sept. 10, 2021
Who to Contact with COVID Related Questions

Diana Weiland, RN, Nursing Home Advisor - phone 605-995-8057 or email Diana.Weiland@state.sd.us

Jennifer Maeschen, RN, Assisted Living Center Advisor – phone 605-995-8147 or email Jennifer.Maeschen@state.sd.us

Jill Rudloff, RN, COVID LTC Touch Base Contact - phone 605-394-1668 or email Jill.Rudloff@state.sd.us
Vaccination Update
# Doses Administered

## 11/03/2021

<table>
<thead>
<tr>
<th>Total Doses Administered*</th>
<th>Total Persons Administered a Vaccine*</th>
<th>Percent of State Population with at least 1 Dose**</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>908,338</strong></td>
<td><strong>452,739</strong></td>
<td><strong>68%</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Manufacturer</th>
<th># of Doses</th>
<th>Doses</th>
<th># of Recipients</th>
<th>% of Pop.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Janssen</td>
<td>31,118</td>
<td>Janssen - Series complete</td>
<td>30,735</td>
<td>67.92%</td>
</tr>
<tr>
<td>Moderna</td>
<td>359,402</td>
<td>Janssen - Booster dose</td>
<td>377</td>
<td>8.78%</td>
</tr>
<tr>
<td>Pfizer</td>
<td>517,818</td>
<td>Moderna - 1 dose</td>
<td>14,336</td>
<td>8.78%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Moderna - Series complete</td>
<td>163,685</td>
<td>58.29%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Moderna - 3rd/Booster dose</td>
<td>17,638</td>
<td>58.29%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pfizer - 1 dose</td>
<td>21,888</td>
<td>58.29%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pfizer - Series complete</td>
<td>233,944</td>
<td>58.29%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pfizer - 3rd/Booster dose</td>
<td>47,917</td>
<td>58.29%</td>
</tr>
</tbody>
</table>

Based on 2019 Census Estimate for those aged 12+ years.

## 12/08/2021

<table>
<thead>
<tr>
<th>Total Doses Administered*</th>
<th>Total Persons Administered a Vaccine*</th>
<th>Percent of State Population with at least 1 Dose**</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1,027,920</strong></td>
<td><strong>482,631</strong></td>
<td><strong>65%</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Manufacturer</th>
<th># of Doses</th>
<th>Doses</th>
<th># of Recipients</th>
<th>% of Pop.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Janssen</td>
<td>34,268</td>
<td>Janssen - Series complete</td>
<td>32,699</td>
<td>65.34%</td>
</tr>
<tr>
<td>Moderna</td>
<td>415,311</td>
<td>Janssen - Booster dose</td>
<td>1,596</td>
<td>26.02%</td>
</tr>
<tr>
<td>Pfizer</td>
<td>578,341</td>
<td>Moderna - 1 dose</td>
<td>21,926</td>
<td>17.33%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Moderna - Series complete</td>
<td>167,656</td>
<td>54.19%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Moderna - 3rd/Booster dose</td>
<td>58,028</td>
<td>54.19%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pfizer - 1 dose</td>
<td>33,906</td>
<td>54.19%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pfizer - Series complete</td>
<td>234,418</td>
<td>54.19%</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Pfizer - 3rd/Booster dose</td>
<td>75,423</td>
<td>54.19%</td>
</tr>
</tbody>
</table>

Based on 2019 Census Estimate for those aged 5+ years.

*Not intended for press or for reporting purposes.*
COVID Vaccine coverage by age as of 12/07/2021

0.0% 10.0% 20.0% 30.0% 40.0% 50.0% 60.0% 70.0% 80.0% 90.0%

5-11 12.5%
12-14 35.9%
15-19 42.8%
20-24 45.7%
25-29 51.0%
30-34 54.3%
35-39 58.8%
40-44 59.0%
45-49 62.0%
50-54 64.7%
55-59 69.4%
60-64 75.7%
65-69 78.7%
70-74 84.2%
75-79 82.3%
80+ 59.0%
SD DOSES Ordered All Partners

Not intended for press or for reporting purposes.
SD DOSES Ordered All Partners

<table>
<thead>
<tr>
<th></th>
<th>Federal Entity</th>
<th>Jurisdiction</th>
<th>Pharmacy</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ordered</td>
<td>192,130</td>
<td>876,760</td>
<td>474,030</td>
<td>1,542,920</td>
</tr>
<tr>
<td>Shipped</td>
<td>192,130</td>
<td>873,720</td>
<td>469,920</td>
<td>1,535,770</td>
</tr>
<tr>
<td>Delivered</td>
<td>191,290</td>
<td>868,010</td>
<td>460,420</td>
<td>1,519,720</td>
</tr>
</tbody>
</table>

Not intended for press or for reporting purposes.
Not intended for press or for reporting purposes.
Boosters for All Adults

The CDC Director has endorsed the CDC Advisory Committee on Immunization Practices’ (ACIP) expanded recommendations for booster shots to include all adults ages 18 years and older who received a Pfizer-BioNTech or Moderna vaccine at least six months after their second dose.

Recommendations for receiving a booster dose of the Janssen vaccine after the initial (one) dose remain. Individuals who received Janssen for their primary dose should seek a booster 2 months after initial dose.

Mixing and matching for booster doses is acceptable.
Vaccine Deliveries over the Holidays

- No vaccine deliveries will occur Thursday, December 23 through Monday, December 27.
- No vaccine deliveries will occur Thursday, December 30 through Tuesday, Jan 4.
- Normal deliveries will be carried out December 28 and 29.

**HOLIDAY CALENDARS**

**Christmas Holiday Delivery Schedule**

<table>
<thead>
<tr>
<th></th>
<th>Thursday, Dec 23</th>
<th>Friday, Dec 24</th>
<th>Saturday, Dec 25</th>
<th>Sunday, Dec 26</th>
<th>Monday, Dec 27</th>
<th>Tuesday, Dec 28</th>
<th>Wednesday, Dec 29</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PFIZER</strong></td>
<td>Deliveries upon Request only</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>Normal Deliveries</td>
<td>Normal Deliveries</td>
</tr>
<tr>
<td><strong>McKesson Specialty</strong></td>
<td>Deliveries upon Request only</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>Normal Deliveries</td>
<td>Normal Deliveries</td>
</tr>
</tbody>
</table>

**New Year’s Holiday Delivery Schedule**

<table>
<thead>
<tr>
<th></th>
<th>Thursday, Dec 30</th>
<th>Friday, Dec 31</th>
<th>Saturday, Jan 1</th>
<th>Sunday, Jan 2</th>
<th>Monday, Jan 3</th>
<th>Tuesday, Jan 4</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PFIZER</strong></td>
<td>Deliveries upon Request only</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>Normal Deliveries Resume</td>
</tr>
<tr>
<td><strong>McKesson Specialty</strong></td>
<td>Deliveries upon Request only</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>No Deliveries</td>
<td>Normal Deliveries Resume</td>
</tr>
</tbody>
</table>

*Not intended for press or for reporting purposes.*
Pfizer 1170 Transition Plan & Timeline

A smaller dose configuration of Pfizer adult/adolescent vaccine will soon be introduced.

This formulation does not require diluent for mixing at administration sites, may be stored at 2-8 C (36-46 F) for up to 10-weeks, and can be used on individuals 12 years of age and older.

The vials will have a gray cap.

Pfizer 1170 ordering will be retired and transition to the new Pfizer 300 minimum dose quantity will begin.

Ordering of the new Pfizer formulation will begin on December 23rd for jurisdictions and federal entities.

Jurisdictions should utilize existing formulations (1170 dose packs) to the greatest extent possible prior to ordering the new Pfizer formulation.

Before jurisdictions can order the new Pfizer formulation, in-field inventory for Pfizer vaccine should be below 28-days of supply.

Not intended for press or for reporting purposes.
<table>
<thead>
<tr>
<th>Manufacturer</th>
<th>NDC Number</th>
<th>Product Name</th>
<th>Name</th>
<th>Configuration</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pfizer</td>
<td>59267-1000-02</td>
<td>Pfizer Covid Vaccine 195 vial tray</td>
<td>PBS 1170 (Purple Cap)</td>
<td>6 dose vial, diluent required</td>
<td>Retiring December 23rd</td>
</tr>
<tr>
<td>Pfizer</td>
<td>59267-1025-04</td>
<td>Pfizer Covid Vaccine 10ct Adult</td>
<td>Adult Tris (Gray Cap)</td>
<td>6 dose vial, no diluent</td>
<td>Launch December 23rd</td>
</tr>
<tr>
<td>Pfizer</td>
<td>59267-1055-04</td>
<td>Pfizer Covid Vaccine 10ct Pediatric 10 mcg</td>
<td>Pediatric (Orange Cap)</td>
<td>10 dose vial, diluent required</td>
<td>Continuing for age 5-11 YO</td>
</tr>
<tr>
<td>Description</td>
<td>Formulations</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>------------------------------</td>
<td>--------------</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Dilute Prior to Use</td>
<td>Do Not Dilute</td>
<td>Dilute Prior to Use</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Age Group</td>
<td>12 years and older</td>
<td>12 years and older</td>
<td>5 to &lt;12 years*</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vial Cap Color</td>
<td><strong>PURPLE</strong></td>
<td><strong>GRAY</strong> (Coming soon)</td>
<td><strong>ORANGE</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dose</td>
<td>30 mcg</td>
<td>30 mcg</td>
<td>10 mcg</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Injection Volume</td>
<td>0.3 mL</td>
<td>0.3 mL</td>
<td>0.2 mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fill Volume (before dilution)</td>
<td>0.45 mL</td>
<td>2.25 mL</td>
<td>1.3 mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amount of Diluent* Needed per Vial</td>
<td>1.8 mL</td>
<td>NO DILUTION</td>
<td>1.3 mL</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doses per Vial</td>
<td>6 doses per vial (after dilution)</td>
<td>6 doses per vial</td>
<td>10 doses per vial (after dilution)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Storage Conditions**

- ULT Freezer (-90°C to -60°C): 9 months, 6 months, 6 months
- Freezer (-25°C to -15°C): 2 weeks, N/A, N/A
- Refrigerator (2°C to 8°C): 1 month, 10 weeks, 10 weeks

*Diluent: 0.9% sterile Sodium Chloride Injection, USP (non-bacteriostatic; DO NOT USE OTHER DILUENTS*
Infection Prevention
South Dakota Project Firstline is LIVE!
Check Out the Website:
https://www.sdprojectfirstline.org

PROJECT FIRSTLINE TRAINING VIDEOS:
TIMELY: containing the most up-to-date information from the CDC!
SHORT: to fit into your busy schedule, each video is about 5 minutes.
EASY TO UNDERSTAND: perfect for you whether you have completed many trainings, or this is your first.
FREE: Simply sign in with your email at www.sdProjectFirstline.org to access the free videos.
WE ARE PROJECT FIRSTLINE

SD PROJECT FIRSTLINE.
IT’S NOT JUST TRAINING. IT’S TRAINING THAT CAN SAVE LIVES.

CONTACT US

SIMPLE THINGS WE CAN ALL DO to break the chain of infection -- wash hands often, cover your cough, stay home if sick, clean frequently touched surfaces at home/office (cell phones, laptops, car). Doing these things helps to prevent ANY infectious disease, from COVID-19 to the flu to a cold.

SOUTH DAKOTA PROJECT FIRSTLINE
www.SDProjectFirstline.org
@ProjectFirstlineSouth Dakota

CHERI FAST
Project Firstline Program Manager
Cheri.fast@sdfmc.org

CHARLOTTE HOFER
Project Firstline Communications Director
Charlotte.hofer@sdfmc.org

This call is not intended for the press or for reporting purposes
Infection Prevention & Control Assessment Tool (ICARs) for LTC and ALF

How does a COVID ICAR benefit my ALF or LTC facility?

*Non-regulatory & FREE*: Talk one-on-one with an infection preventionist and an infectious disease doctor to see how your facility is REALLY doing during the pandemic.

*Not just a checklist*: While the CDC ICAR guides the discussion, the team talks through scenarios that are relevant to YOUR facility. They can compare what worked last year vs. what works now and review the latest guidelines, science and updates.

*Above and Beyond*: Sharing tips and tricks on what works for other facilities in South Dakota and what might also work for you. Topics like vaccination uptake in staff, addressing PPE Fatigue, and reinforcing what you are doing RIGHT.

*Feedback* after the ICAR to have on file for your facility. Something you can refer to when needed in the future!

Leah Bomesberger leah.bomesberger@state.sd.us

This call is not intended for the press or for reporting purposes
NETEC has you Covered: PPE in Long-Term Care


PPE educational refresher: great resource geared directly to LTC and ALF! ★ ★

* https://repository.netecweb.org/exhibits/show/ncov/item/1617

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Toolkit for Establishing Successful Hand Hygiene and Personal Protective Equipment Programs

https://spice.unc.edu/hand-hygiene-and-personal-protective-equipment-toolkit/
Considerations for other Viral Respiratory Pathogens

- NETEC - Influenza in the Age of COVID: 2021 Season Update
- SD DOH Confidential Outbreak Reporting Webpage -
  https://apps.sd.gov/ph93morbidity/secure/Outbreak.aspx
- South Dakota Department of Health -
- EPI Listserv
Infection Control Questions? Contact Us:

Kipp Stahl kipp.stahl@state.sd.us
Leah Bomesberger leah.bomesberger@state.sd.us

Contact Leah if you would like to sign your facility up for an ICAR!
Community Mitigation
Supply Chain Management
All requests for PPE from DOH must be:

- Emailed to COVIDResourceRequests@state.sd.us,
- Faxed to 605.773.5942, or
- Called in to 605.773.3048 to ensure prioritization and coordination of requests.

- Do not duplicate your request by using all three means of communication.

- Any requests received through any other email or number will all be directed to email COVIDResourceRequests@state.sd.us OR call 605.773.3048 and requesting entities must provide information regarding their current facility status.
On-going Communication
Helpful sources of information:

covid.sd.gov

coronavirus.gov

• SD COVID-19 Help Line: 800-997-2880
Communications

• SD-HAN: sdhan.sd.gov
• Epi Listserv
• Lab Listserv
• HAI Listserv
• OLC Listserv

Visit covid.sd.gov to subscribe
Questions?

Follow-up after the webinar
COVID Helpline: 800-997-2880
Epidemiology: 605-773-3737
Laboratory: 605-773-3368

COVID.sd.gov
COVIDSD@state.sd.us