

Delta Health COVID Update from

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Medical Staff Providers:

- 1)** Evusheld pre-exposure prophylaxis will be available shortly!

This treatment option will be administered via the Hematology/Oncology Infusion Clinic

Please immediately identify patients in your clinic panel that meet the below criteria and refer their names to Nysha at the Infusion Clinic so that they may be prioritized for treatment

Patients potentially eligible include:

- Any solid organ transplant (priority: lung/small bowel, any solid organ especially within 12 months)
- Patients s/p treatments such as ATG, alemtuzumab, rituximab
- B cell or T cell deficiencies, B cell malignancies on active treatment, multiple myeloma or AML, T cell immunotherapy
- History of stem cell transplant (allogeneic or autologous)
- Any solid tumor on active myelosuppressive chemotherapy
- Ongoing steroid treatment (>20mg prednisone or equivalent for >2 weeks); any active treatment with immunosuppressive biologics
- Advanced or untreated HIV disease
- End stage renal disease
- Contraindication to COVID vaccine (ie severe allergic reaction to vaccine or components)

2) Outpatient Therapeutics:

Until our supplies of sotrovimab and paxlovid are more replete, administration of these medications for COVID infection will be limited to the highest risk patients:

Tier 1: immunosuppression/inadequate vaccine response OR unvaccinated and >75yo OR unvaccinated and >65yo with risk factors

Tier 2: pregnant OR unvaccinated and >65yo OR unvaccinated and <65yo with risk factors

If your patient meets high risk criteria please call me to make this clear (vaccination status is unfortunately NOT included in the REDCAP allocation form)

***** please note:** you must STILL complete the REDCAP allocation form for ALL referrals;

Keeping track of these patients is critical during this time of shortages and transitions.

The link to this form is: <https://cdphe.redcap.state.co.us/surveys/?s=PX9LW9CEET>

Those not meeting Tier 1 or 2 criteria can still get Regeneron or Bamlanivimab but these patients must be informed by their provider (**BEFORE** referral) that these MCAB will likely not be efficacious if it is the Omicron variant.

If patients are to receive Paxlovid (**we don't have any yet!**) to prevent severe disease, it is the provider's responsibility to review the EUA and confirm normal renal function, rule out drug interactions, rule out pregnancy if appropriate **BEFORE** referral

EUAs for the new antivirals, algorithm to guide therapeutics, list of paxlovid drug interactions and a link to COVID drug interactions program will be on the MD site and intranet.

3) COVID UPDATES:

Immunocompromised patients should get a 4th dose of vaccine (2+1 as primary series with additional primary dose) at 5 months after their 3rd dose.

**Note recommendations are to administer any vaccine 2 weeks prior to initiation or resumption of immunosuppressive therapy.

Omicron now reported in Delta County. As we know, Omicron has less affinity for the lung than the upper respiratory tract so there is speculation the disease will be milder; this is offset by the sheer numbers of infections, which will be substantial.

We hope to provide an update on COVID Peds, OB, Hem-Onc topics at Grand Rounds going forward; in the interim check out link to new NIH Treatment Guidelines as a useful reference: <https://files.covid19treatmentguidelines.nih.gov/guidelines/covid19treatmentguidelines.pdf>

On Jan 19th, you can order free tests from Feds: <https://www.covidtests.gov/> and State: <https://covidathometesting.colorado.gov/>

To quickly find this information, and previous COVID email updates, please set up a login to your Medical Provider website:

You will find a specific COVID page with multiple resources, links and our own Delta Health policies and forms.

www.dcmhmedstaff.com