THE UNIVERSITY OF MAINE

COVID-19 Science and Medicine Updates

Compiled by University of Maine faculty and students

Maine Updates – April 21, 2020
From Maine CDC:
https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/coronavirus.shtml

Data updated at April 20 at 11:45AM:
Confirmed Cases: 875
Recovered: 414
Hospitalized: 138
Deaths: 35
Negative test results, updated April 15 (now published weekly): 14,076

Maine/Penobscot County Data - Online Dashboard Links

Desktop version:

https://arcg.is/1Knarr

Mobile version:

https://arcg.is/5qGGr

View a table of Maine COVID-19 Current Hospital Use and Capacity Data

Maine COVID-19 Current Hospital Use and Capacity Data
Updated: April 20, 2020 at 11:15 AM

Hospitalized: Confirmed Cases	
Total Hospitalized	39
In Critical Care	16
On a Ventilator	9
Capacity	
Available Critical Care Beds	152
Total Critical Care Beds	316
Available Ventilators	287
Total Ventilators	336
Alternative Ventilators	369

News from Maine:

Governor Mills on Guidelines for Re-Opening the Economy

https://www.maine.gov/governor/mills/news/governor-mills-guidelines-reopening-economy-2020-04-17

Other COVID-19 News:

Best Practices And Lessons Learned From COVID-19 Management in Long Term Care/Skilled Nursing Facilities:

CDC Issued COVID-19 Nursing Home Preparedness Checklist:

https://www.cdc.gov/coronavirus/2019-ncov/downloads/novel-coronavirus-2019-Nursing-Homes-Preparedness-Checklist_3_13.pdf

CDC Recommended Steps All Nursing Homes Should Be Taking:
- "Restrict all visitation except for certain compassionate care situations, such as end of life situations""
- "Restrict all volunteers and non-essential healthcare personnel (HCP), including non-essential healthcare personnel (e.g., barbers)"
- "Cancel all group activities and communal dining"
- "Implement active screening of residents and HCP for fever and respiratory symptoms"

https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html

CDC Key Concepts:

- **"Reduce facility risk.** Cancel elective procedures, use telemedicine when possible, limit points of entry and manage visitors, screen everyone entering the facility for COVID-19 symptoms, implement source control for everyone entering the facility, regardless of symptoms."
- **"Isolate symptomatic patients as soon as possible**. Set up separate, well-ventilated triage areas, place patients with suspected or confirmed COVID-19 in private rooms with the door closed and with private bathrooms (as possible). Reserve AIIRs for patients with COVID-19 undergoing aerosol generating procedures and for care of patients with pathogens transmitted by the airborne route (e.g., tuberculosis, measles, varicella)."
- **"Protect healthcare personnel.** Emphasize hand hygiene, install barriers to limit contact with patients at triage, cohort patients with COVID-19, limit the numbers of staff providing their care, prioritize respirators for aerosol generating procedures."

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

Two CDC Web Pages With Abundant Information On This Topic:
https://www.cdc.gov/coronavirus/2019-ncov/hcp/long-term-care.html

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

COVID-19 Long-Term Care Facility Guidance From The Centers for Medicare & Medicaid Services (CMS):

https://www.cms.gov/files/document/4220-covid-19-long-term-care-facility-guidance.pdf

Information On Nursing Home Patients Being Moved Due To COVID-19:

- A 142-bed facility in Wilmington, MA has been created where "Residents across the region who are infected with COVID-19 can be moved to this facility to receive appropriate care and avoid transmitting the virus within their facilities".

https://skillednursingnews.com/2020/04/cms-nursing-home-operators-should-use-separate-staff-for-covid-19-cases-develop-dedicated-wings-and-buildings/

- The CMS has stated that the approach of creating external facilities eases "the challenges of preventing transmission, like extensive PPE usage and isolation practices, for individual facilities".

https://skillednursingnews.com/2020/04/cms-nursing-home-operators-should-use-separate-staff-for-covid-19-cases-develop-dedicated-wings-and-buildings/

- Some Worcester, MA nursing homes have been forced to relocate to create surge facilities for hospitals. This was required by the state and was not necessarily done to protect nursing home residents, but the nursing facility managers might have some applicable insight on the logistics of moving the patients.

https://www.bostonglobe.com/2020/03/28/metro/officials-emptying-nursing-homes-across-state-create-covid-19-recovery-centers/

https://www.forbes.com/sites/howardgleckman/2020/03/31/states-are-beginning-to-move-covid-19-patients-from-hospitals-to-nursing-facilities/#f98bda644019

- COVID-19-patient only nursing homes are also being created in Indiana and Connecticut

https://www.theindychannel.com/news/coronavirus/indiana-long-term-care-facilities-could-soon-move-residents-to-protect-against-covid-19
https://www.courant.com/news/connecticut/hc-news-coronavirus-nursing-homes-plan-20200402-zcavm6iqrrbpze4dhrtingicqe-story.html

Websites Of Nursing Facilities Currently Moving Or Accepting Patients Due To COVID-19:

Sharon Health Care (Sharon, CT)
https://sharonhcc.com/

Greenwich Woods (Greenwich, CT)
https://greenwichwoods.com/

AdviniaCare -- Pointe Group Care, LLC (Wilmington, MA) https://www.maseniorcare.org/facility-locator/adviniacare-wilmington/

SALMON Health and Retirement's Beaumont Rehabilitation and Skilled Nursing Center (Worcester, MA)
https://www.salmonhealth.com/rehab-and-skilled-nursing/

COVID-19 Symptoms and Asymptomatic Cases

- Testing has shown evidence of COVID-19 infections in people who did not develop symptoms. https://www.thelancet.com/pdfs/journals/laninf/PIIS1473-3099(20)30114-6.pdf (2/19/20)
- Even for those who do develop symptoms, this takes 2-14 days after initial infection. https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html (3/20/20)
- It is not known how many cases are asymptomatic as those people are not typically aware of their infection, however, the director of the CDC estimates that roughly 25 percent of cases could be asymptomatic. Other estimates range from 5 to 80 percent. https://www.npr.org/sections/health-shots/2020/03/31/824155179/cdc-director-on-models-for-the-months-to-come-this-virus-is-going-to-be-with-us (3/31/20) https://www.cebm.net/covid-19/covid-19-what-proportion-are-asymptomatic/ (4/6/20)
- Asymptomatic cases are thought to be predominantly from children and young adults. Understanding the true proportion of asymptomatic cases will be key to

knowing how to combat the virus going forward.
https://www.nature.com/articles/d41586-020-00822-x (3/20/20)

Recently documented symptoms…
- A survey of 59 infected patients in Italy found that 34 percent of people reported at least one smell or taste disorder.
- The mechanism that causes the loss of smell in COVID-19 patients is unclear. This may be due to inflammation in the nasal lining, infection of sensory receptors, or even infected brain cells. Infection of the brain has been hypothesized previously (https://onlinelibrary.wiley.com/doi/full/10.1002/jmv.25728 - 2/27/20) but is yet to be supported by hard data. https://www.livescience.com/odd-coronavirus-symptom-smell-loss.html (3/27/20)
- The percentage of people who lose sense of smell with COVID-19 infection is thought to be similar to that of influenza or the common cold. Still, it is best to stay on the safe side and quarantine when this happens. https://www.nationalgeographic.com/science/2020/04/lost-your-sense-of-smell-it-may-not-be-coronavirus/ (4/7/20)
- A study from the American Journal of Gastroenterology showed that nearly half of infected patients experienced digestive symptoms as their chief complaint. Some infected people did not experience respiratory symptoms at all. Of those with both respiratory and intestinal symptoms, the intestinal symptoms came first. Many infected people who only experienced intestinal symptoms were less likely to suspect COVID-19. https://journals.lww.com/ajg/Documents/COVID_Digestive_Symptoms_AJG_Pre proof.pdf (3/18/20)

Comparing Plans to Re-Open Communities/Economies:

Key components include:
  A. Maintenance of social and physical distancing practices; including continuation of limitations on gatherings and use of public spaces
  B. Widespread testing and surveillance to monitor community spread and contacts of known infected persons
  C. Determining whether or not previous infection and positive serology tests (antibodies against SARS-CoV-2) leads to immunity
  D. Eventual development of safe and effective vaccine(s) and treatment(s)

https://www.vox.com/2020/4/14/21218074/coronavirus-plans-social-distancing-end-reopen-economy

RESOURCES AND RECOMMENDED READINGS:

Clinical and Administrative Guidance on COVID-19 shared by UW Hospitals:
As an early hot-spot in the US, Washington has been providing leadership and guidance around handling clinical cases of COVID-19. Documents are shared at this site, and constantly updated:
https://covid-19.uwmedicine.org/Pages/default.aspx

UMaine's Fogler Library COVID-19 Lib Guide:
https://libguides.library.umaine.edu/coronavirus/maine

Calculate your Pandemic Footprint, based on your behaviors:
https://www.pandemic-footprint.com/

NIH is Enrolling for a New Study to Quantify Undetected Cases of Coronavirus
Blood samples from healthy volunteers are needed, learn more here:
https://www.niaid.nih.gov/news-events/nih-begins-study-quantify-undetected-cases-coronavirus-infection

Reputable Online Resources with COVID-19 Data:

IHME Health Data and Projections:
https://covid19.healthdata.org/united-states-of-america
https://covid19.healthdata.org/united-states-of-america/maine

Johns Hopkins
https://coronavirus.jhu.edu/map.html

Maine Small Business Resources during COVID
http://www.mainestreamfinance.org/covid-19-updates/small-business-updates-and-resources-during-covid-19-outbreak/

Questions about the production of these bulletins?
Contact kristy.townsend@maine.edu

All bulletins posted publicly online at:
https://umaine.edu/coronavirus/umaine-science-and-medicine-updates/