



Clinical Update
April 22, 2021

In Today’s Issue:

- **Mandatory Eye Protection Requirements Easing**
- **Guidance for Post Vaccine Monitoring Tests**
- **Employee Vaccination Breakthroughs Update**

Today’s Status:

	Inpatient COVID19 + Patients	Asymptomatic Case Positivity (7 day moving average)	Symptomatic Case Positivity (7 day moving average)	COVID Surge Status
UCSF Health	11	0.8%	5.1%	Green
ZSFG	4			Green

Currently, San Francisco has improved to Level 2 Low Alert with 3.7 new cases daily per 100,000 population (Goal 1.8 per 100,000). This is equal to about 32 new cases daily in San Francisco. More San Francisco COVID19 public health indicators are available via this [SFPDPH Website](#).

New: Mandatory Eye Protection Requirements are Easing

Given that new COVID-19 cases are lower, eye protection is now mandatory only for direct patient care, such as when you enter any patient care space, including:

- Patient room.
- Procedure or radiology room.
- Within 6 feet of a patient, such as during transport, or in open areas, such as infusion centers or hemodialysis clinics.

Note: Universal masking requirements have not changed.

Beginning Thursday, April 22, 2021, you may remove your eye protection **after** you leave the direct patient care space.

Clinical areas: It is acceptable, but not required, to continue wearing eye protection in the clinical environment (such as in the nursing station, clinic/unit hallway) when not providing direct patient care. Please refer to the updated [Mandatory Eye Protection](#) guidance for more details.

Current Guidelines on Post-Vaccine Monitoring Tests

According to the Centers for Disease Control, “antibody testing is not currently recommended to assess for immunity to SARS-CoV-2 following COVID-19 vaccination because the clinical utility of post-vaccination testing has not been established.” While recent studies have shown lower seroconversion rates to vaccination for immunocompromised patients, it is not established whether the presence or absence of detectable antibody is a reliable measure for protection from infection or clinical disease. There are no current recommendations to re-vaccinate or use an alternative vaccine if antibodies are not detectable as the safety and efficacy requires additional study. Despite these caveats, some individuals may still desire to understand their antibody response.

In situations where a clinician wishes to determine whether a patient has developed IgG antibodies against the spike protein in response to vaccination, send-out testing can be obtained by ordering a miscellaneous outside laboratory test and writing in the test name as “COVID-19 anti-spike antibody IgG by ELISA.”

The in-house COVID-19 serology test detects antibody to the nucleocapsid antigen. This test is expected to remain negative even after immunization with any of the currently-available vaccines, which generate response to the spike protein. To determine whether a patient has developed IgG antibodies to SARS-CoV-2 in response to *natural* infection by the virus, testing can be obtained by ordering the assay for “COVID-19 Antibody, IgG against nucleocapsid protein” or by ordering the assay for “COVID-19 Antibody, IgG with Reflex Testing of Positives by ELISA.” These two assays are listed on the Apex test order menu. Ordering the option with Reflex Testing will provide confirmatory testing of positive results in the nucleocapsid antibody assay by reflex testing with an independent assay that tests for antibodies against the spike protein.

Employee COVID-19 Vaccination Breakthroughs Update

Vaccination breakthroughs are defined as COVID-19 infections that occur at least 14 days after someone has completed their final vaccination dose. Assuming a vaccine effectiveness of 70-90%, we would expect 6-18 cases per month of breakthrough infection despite full vaccination status. At UCSF, we have seen a total of 11 employees/students with COVID-19 vaccine breakthrough infections since we began vaccinations in December.

What updates have been posted to the [HEIP site](#) since the last clinical update?

Descriptive Title	New or Update	Category	Date Updated	Summary of Updates
Vendor Screening Tool	Update	Occupational Health Services	4/21/2021	Includes logic to allow return after symptoms related to COVID vaccine #2 and updated guidance on return after international or domestic travel.
Mandatory Eye Protection	Update	Personal Protective Equipment	4/20/2021	Mandatory Eye Protection Requirements are easing, given that new COVID-19 cases are lower, eye protection is now mandatory only for direct patient care.
Continue to Work – Return to Work DETAILED GUIDELINES	Update	Occupational Health Services	4/19/2021	Updated two definitions: "immunocompromised" and "fully vaccinated" (added EUA to the FDA wording for approved vaccinations).
Ambulatory Remote Triage for Adult Patients with Respiratory Illness Workflow	Update	Algorithms and Clinical Guidance	4/16/2021	Removed the covidadultrriage smartphrase and key information.

Frequently Used Links

View COVID Data dashboards:

- UCSF Health [COVID-19 Enterprise Dashboard](#)
- Hopkins [COVID-19 Dashboard](#) (for World, USA and CA #s)
- SF Chronicle [COVID-19 Dashboard](#) (CA, County and SF#s)

Occupational Health Services:

- Continue to work/return to work [detailed staff guidelines](#)
- COVID-19 Hotline 415.514.7328
- [COVID+ Employees FAQs](#)

[UCSF Health COVID19 Infection Prevention Website](#)

[UCSF Town Halls](#)

[Emotional Health and Well-Being](#)

[Visitor Policy](#)

[COVID-19 Testing page](#)

[UCSF Travel Policy](#)

Daily Employee Health Screening: **Text "Screen" to: 83973** or [UCSF Online Health Screen](#)

[UCSF COVID-19 Vaccine Information Hub](#)

[Vaccination, Treatment and Testing FAQs for Providers](#)