



Clinical Update
April 29, 2021

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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	10	0.4%	4.4%	Green
ZSFG	2			Green

Currently, San Francisco is now at Level 2 Low Alert with 3.4 new cases daily per 100,000 population (Goal 1.8 per 100,000). This is equal to about 29 new cases daily in San Francisco. More San Francisco COVID19 public health indicators are available via this [SFPDH Website](#).

UCSF Parnassus ED COVID-19 Point-of-Care Testing (POCT) Changes

What is changing and why?

Starting April 26, 2021, the UCSF Parnassus ED will no longer be performing universal COVID POCT for patients presenting for care in the ED given increased healthcare worker and patient vaccination, decreased COVID-19 cases at UCSF, and dropping community prevalence of COVID-19. While universal COVID POCT was an important safety measure for the ED to quickly identify cases during the height of the pandemic, the resources needed to sustain this program are significant and not justified given the reasons outlined above.

COVID PCR will be performed for all patients requiring inpatient medical or psychiatric hospitalization (who do not have a COVID Recovered flag), as well as for patients admitted to the CDU, regardless of vaccination status.

How will this change our care?

Patient care should not be delayed pending a COVID PCR test* result, including, but not limited to:

- Inpatient bed assignment and transportation to the inpatient unit
- Diagnostic imaging (CT, MRI, ultrasound)
- Emergent procedures, including surgery
- Evaluation by consulting and admitting services

** transfer to an inpatient psychiatric facility requires a negative COVID PCR (or COVID Recovered status) prior to determination of medical stability for psychiatric hospitalization*

All clinical services and units should use their existing policies and procedures to take appropriate precautions when COVID testing has not been done or when the test is pending. A negative COVID POCT result is not sufficient to change

workflows or isolation precautions, and the ED should not be asked to perform this test solely because there is not a PCR result.

What about shared rooms and other considerations?

For inpatient units, patients may be admitted from the ED to semi-private rooms with a COVID PCR result *pending* if:

1. Asymptomatic
2. No known COVID exposure/not on novel respiratory isolation
3. Not requiring active AGPs
4. Not on 11L/12L

Note: while initial criteria for semi-private room placement included a negative COVID POCT test, this has been removed given that the ED is no longer performing this universally.

COVID POCT may continue to be used at the discretion of the ED when patients cannot be safely distanced (e.g., use of hallway spaces, full waiting room) or as a preliminary test result for symptomatic patients.

Will testing be changed for other clinical settings?

For other clinical settings, such as perioperative testing, protocols for testing remain unchanged. These protocols are actively being reviewed, and any changes will be communicated.

Clinical Guidance on Vaccine-induced Immune Thrombotic Thrombocytopenia and the Johnson & Johnson Vaccine Pause

New [Clinical Guidance on Vaccine-induced Immune Thrombotic Thrombocytopenia](#) provides detailed information of the clinical presentation, diagnosis, initial management, and clinician reporting of VITT cases at UCSF Health.

New [FAQs for Janssen \(Johnson & Johnson\) Pause and Vaccine-associated Complications](#) provides answers to frequently asked questions about the J&J/Janssen pause and restart, and information on VITT cases to date including symptoms, diagnosis, and reporting.

This week, the pause on the J&J vaccine has been lifted. Our local programs using this vaccine are currently being considered for resumption.

Patient resources related to these topics can be found at this [FDA Factsheet](#) and this [CDPH Factsheet](#).

Small Group Gatherings at UCSF Health and UCSF

UCSF Health

Effective now, UCSF Health has resumed allowance of Small Group Meetings in UCSF Health when directly related to patient care.

These include:

- clinical activities such as Pathology multi-headed microscope reviews and Radiology reading room rounds with teams.
- use of conference rooms for essential small group meetings.

The following rooms can be reserved on the Event Management System via [My Access](#):

Parnassus: [M169](#) and [M286](#) (not to exceed 12 persons per room)

Mission Bay: [C4701](#) (not to exceed 10 persons)

Mount Zion: Coming Soon

Read more details here: <https://safety.ucsf.edu/safe-and-physical-distancing-covid19>

UCSF (Campus)

The following message was disseminated yesterday, applying to UCSF campus-based meetings and events.

UCSF to Ease Small Indoor and Outdoor Event Policies – NEW

Effective May 1, UCSF will begin to allow schools and departments to convene small indoor and outdoor events of up to two hours for a maximum of 25 people, if all the San Francisco Department of Public Health (SFPDH) requirements are met. More information can be found on the [Campus Life Services website](#) and will be shared at the Friday town hall.

- To host an event, please fill out an event request form posted on the [Policy on Events and Gatherings webpage](#).
- All requests will require approval from either a department head, department chair or dean approval for campus or vice presidents at UCSF Health.

We expect continuing evolution of group space use in the coming months.

Monoclonal Antibody COVID Treatment Referral and Location Update

Upgraded Referral Process for Monoclonal Antibody (mAb) Treatments for UCSF Patients Tested Outside of UCSF

We have upgraded the referral process for mAb treatments for UCSF patients tested outside of UCSF. Providers should now use the apex “Ambulatory referral to COVID Testing/ RSC order” (REF778) → “Provider appointment” → “mAb Treatment” to request eligibility evaluations for their high-risk COVID+ patients.

The order will prompt you to provide the information required for eligibility, which includes

1. Date of positive COVID test
2. Date of symptom onset
3. High-risk criteria (select from BMI >35, age >65, diabetes requiring medications, chronic kidney disease, immunosuppressed condition/ medications, 55year or older with HTN requiring medications/ cardiovascular disease or chronic respiratory disease)

The central scheduling team will prioritize scheduling the video visits for these patients with a provider within 24 hours through the Virtual Acute Care Clinic (VACC). Please use the comment box to provide any additional information for the VACC provider.

This apex order will REPLACE the previous methods of referring, which have included emailing the COVIDOutpatientTreatment group and/or sending a message to the MB RSC pool.

Ambulatory Referral to COVID Testing Appointment/RSC and COVID POCT/PCR Panel (UCSF ONLY) ✓ Accept

✓ Ambulatory Referral to COVID Testing Appointment or Respiratory Screening Clinic (UCSF ONLY) ✓ Accept ✗ Cancel

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Class: UCSF

Referral: To dept spec: General Internal

To dept:

Priority: Routine Urgent

Select visit type: Pre-procedure/admission/study testing testing only Other COVID testing-only appointment Provider appointment

COVID positive - Home Monitoring

Which type of visit should be scheduled? In-Person Visit Video Visit Monoclonal Antibody COVID Treatment

🚫 Date of symptom onset: (Patient must be symptomatic and within 10 days of symptom onset to be eligible for mAb treatment)

🚫 Date of positive COVID test: (Patient must also be within 10 days of positive COVID test to be eligible for mAb treatment)

High risk patient due to the following criteria:

BMI \geq 35 \geq stage 3b chronic kidney disease (eGFR $<$ 45 mL/min per 1.73 m²)

Diabetes requiring medical treatment Immunosuppressed Currently receiving immunosuppressive treatment

Age \geq 65 years of age Age \geq 55 years of age

🚫 With: Cardiovascular disease Hypertension COPD/other chronic respiratory disease

Process Inst.: Please consult the reference link below for guidance on when to select PCR vs POCT.

For "Pre-procedure/ admission/ study testing only" and "Other COVID testing-only appointment" remember to place all orders requested, including the appropriate COVID swab order - PCR, POCT or both.

For pre-procedure testing, POCT should be requested to be done on the day of the procedure (it is valid for 24 hours). Pre-procedure PCR should continue to be requested 2-4 days prior to the procedure.

🚫 Next Required ✓ Accept

Patients tested at UCSF will continue to be automatically reviewed by CRISM (COVID-19 Results, Information and Short-term Monitoring) Team for monoclonal antibody treatment and referred for consultation as appropriate. You do not need to place a referral for these patients.

Non-UCSF patients can continue to be referred for mAb treatment at UCSF by faxing [this external referral form](#) to 415-353-4785

Monoclonal Antibody Treatment Location Update

Beginning May 3rd, monoclonal antibody infusion treatments will be administered at Mount Zion Respiratory Screening Clinic instead of Mission Bay, for all patients $>$ 18 yr, including pregnant patients.

Please see the full [UCSF COVID-19 Monoclonal Antibody Use Process](#) details here.

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
Adult Prepare - Expedited/Same Day COVID-19 Testing Process	New	Algorithms and Clinical Guidance	4/28/2021	Process for expedited and same-day STAT testing at the Asymptomatic Testing Centers (ATCs) for surgeries coordinated through adult prepare

Pediatric Prepare - Expedited/Same Day COVID-19 Testing Process	New	Algorithms and Clinical Guidance	4/28/2021	Process for expedited and same-day STAT testing at the Asymptomatic Testing Centers (ATCs) for surgeries coordinated through pediatrics prepare
Clinical Guidance on Vaccine-induced Immune Thrombotic Thrombocytopenia (VITT)	New	COVID Vaccine	4/26/2021	This clinical guidance document provides detailed information of the clinical presentation, diagnosis, initial management, and clinician reporting of VITT cases at UCSF Health.
FAQs for Janssen (Johnson & Johnson) Pause and Vaccine-associated Complications	Update	COVID Vaccine	4/29/2021	Removed language about CDPH pending decision on J&J / Janssen (they have decided to resume vaccinations) and added bullets from CDC on the rates of VITT occurrence vs number of COVID-19 complications that can be prevented from vaccination.
POCT vs PCR: Clinical Guidance for Ordering Appropriate COVID Swab Test	Update	Algorithms and Clinical Guidance	4/28/2021	Updated that POCT is less sensitive, and PCR is needed for certain scenarios including Surgery/ Procedure needing any Anesthesia Care, not just general anesthesia
UCSF COVID-19 Monoclonal Antibody Use Process	Update	Algorithms and Clinical Guidance	4/28/2021	Workflow and pediatrics criteria updated
UCSF External Self or Provider Referral for COVID-19 Monoclonal Antibody Outpatient Treatment	Update	Algorithms and Clinical Guidance	4/28/2021	Treatment forms will be routed to the Respiratory Screening Clinic (Dr. Paul Nadler).

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](#)