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Dear Maricopa County Healthcare Providers,

First, thank you for continuing to see patients during this critical time. You are the boots on the ground and the core of public health. I wanted to provide some situational awareness about COVID-19 testing availability as of March 18 in Maricopa County and share some new information about COVID-19 in pediatric patients.

Testing Update

There is a lot of confusing information about the availability of COVID-19 testing in Maricopa County. I would like to clear up some misconceptions and tell you where we are. First, I have heard your concerns about lack of public access to testing in the outpatient setting. There simply isn't a way to get people with mild to moderate illness tested right now. There are plenty of commercial laboratories that have the capability to test for COVID-19. These include, but are not limited to, Quest and LabCorp. **The bottleneck is a lack of availability of specimen collection supplies (NP swabs and viral transport medium).** Unfortunately, the supply chain is interrupted. We have raised this need to the very highest levels of government (FDA) and elected officials. But we don't have a solution yet.

The other issue is that primary care providers are telling us they don't have the personal protective equipment (PPE) or supplies to collect specimens. I assure you that we are working closely with ADHS and healthcare facilities to stand up **drive-through testing for COVID-19** so we can support primary care providers and the public. As soon as we are able to get testing supplies, so we can get drive-through testing sites up and running, we will notify providers.

During this time with limited testing, it is critical that you tell your patients with any respiratory illness to self-isolate at home, drink fluids and rest. The vast majority of people do very well recovering at home. Getting a COVID-19 test does not change the treatment or the outcome. Patients with respiratory symptoms will be told to self isolate until 72 hours after their fever and symptoms resolve, regardless of a test result. Availability of testing is not what will ultimately impact the spread of this outbreak. But staying home when sick, washing our hands, not touching our faces, and avoiding unnecessary physical contact and group gatherings of more than 10 people will. Please help your patients stay calm and let them know what they can do to protect themselves during these uncertain times.

(continued)

Pediatric Disease

President Trump just referenced the following paper accepted for publication in Pediatrics, [“Epidemiological Characteristics of 2143 Pediatric Patients with 2019 Coronavirus Disease in China.”](#) I read the paper in detail and here are the take-home points. They did a retrospective review of 2,143 children less than 18 years old with suspect (1,412) and confirmed (731) COVID-19 in China. The main conclusion is that children have less severe disease than adults. Overall, 5.9% of children had severe or critical disease compared with 18.5% of adults in China. It also highlights that infants have a higher risk of severe disease (10.6% vs. 5.9%). There was only one pediatric death (14 y.o.). That means 94.1% have mild to moderate disease, which can be managed at home.

But there is a **MAJOR LIMITATION**. Suspect cases are classified based on high-risk of contact with a person with COVID-19 **PLUS** 2 of 3 sets of criteria, and could include **ANY** viral respiratory or GI illness. (For example, a suspect case could be a child with high-risk contact who presents with fatigue and a NORMAL white blood cell count.) Further, suspect cases have a higher proportion of severe and critical disease than laboratory-confirmed cases, which suggests that many of the suspect cases do not have COVID-19. This likely overestimates the percentage of severe and critical cases, including severe disease in infants. The manuscript does not include the breakdown of severe and critical disease among laboratory-confirmed cases, which would be a much better estimate of severe COVID-19 disease. Lastly, only 4.4% of “cases” are considered asymptomatic, which is very unlikely to be a true estimation of asymptomatic disease. This is another reason I think these proportions are overestimates of severe disease. So, take these numbers with a grain of salt. Overall, I am reassured that children have milder illness with COVID-19, and pediatric mortality is far less for COVID-19 than it is for influenza. We’ve had two pediatric flu deaths in Maricopa County this season alone. Attached are our MCDPH Primary Care Pediatric Guidelines for COVID-19, in case you have more questions.

So, please tell parents that their kids will be OK. Keep them home when they are sick, give them lots of rest, fluids and love. And please, please teach them to wash their hands, avoid touching their face and to cover their coughs and sneezes.

Stay healthy,



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