

COVID-19 Q & A with Northeast Georgia Health System

Testing and Treatment Questions

Q: Is there an adequate supply of testing materials available at this time? Do you foresee community-wide testing in the near future?

A: At this time, we only have enough tests for patients who are ill, being admitted to the hospital or who are in high-risk categories. We would like to be able to test all patients to be certain that we know who has COVID-19 and who doesn't. We would also like to be able to provide testing for anyone in the community so that even those who aren't showing symptoms can learn whether they are spreading the virus.

Q: How much does the COVID-19 diagnostic test cost?

A: The federal government has committed to making testing available at no cost to you. If you're diagnosed with COVID-19, additional services – including hospital admission, if applicable – will be covered according to your insurance plan details.

Q: How long does it take to receive results after you have been tested?

A: Test results may be returned between 24 hours and 5 days after the test, depending on what kind of test is completed.

Q: How many diagnostic testing sites are available, and where are they located?

A: At this time, we have four Urgent Care locations (Gainesville, Braselton, Cleveland and Dahlonega) that are providing COVID-19 testing when ordered by a physician.

Q: If someone believes they had the virus already, can they be tested for the antibodies? If they can be tested, does insurance cover the cost of the test?

A: We hope to start making antibody testing more widely available as soon as this week. The tests will require a physician's order. That means people who are interested in being tested for antibodies should contact their physician to request a test. Once the physician sends the order, the person will be directed to one of our testing locations for blood to be drawn and sent out for analysis. We anticipate the turnaround time will be three to five days.

Patients should contact their insurance provider to understand more about whether the tests will be covered and what out-of-pocket costs may be.

Q: How does antibody testing differ from the diagnostic testing?

A: Both require a physician's order, but, otherwise, the process is quite different. For the diagnostic test, we most commonly swab inside the deep nasal cavity where the virus likes to live. For the antibody test, we draw blood to see if there is evidence of past infection.

It's important to stress that we don't know if the antibodies mean a person is immune to the virus. This is an area of active investigation. The current greatest utility for the antibody test is to determine if you can donate blood plasma. There's still much research to be done to determine if plasma from recovered patients will help those with current severe COVID-19 disease recover.

Q: Can I give plasma to be used as a treatment for patients who have COVID-19?

A: If you are a recovered COVID-19 patient, you may be able to help others. The FDA has approved an investigational study to determine if blood plasma from recovered COVID-19 patients can be used to successfully treat current COVID-19 patients. To find out if you are an eligible plasma donor, visit the American Red Cross at www.redcrossblood.org or email LifeSouth at medicaloffice@lifesouth.org or call at 888-795-2707.

Testing and Treatment Questions (Continued)

Q: How long should you show symptoms before being tested?

A: As soon as you show symptoms, please call your doctor's office for guidance.

Q: If someone was symptomatic but tested negative, would they have tested positive earlier or later?

A: There are many factors that might affect whether your test would give a false negative result, but we do not know enough yet about the virus to know whether the timing of the test would be one of those factors. The test result is also affected by how well the specimen was collected. If someone has symptoms suggestive of COVID-19 and has a negative test, it is safest to follow isolation precautions at home as if they were confirmed to have COVID-19.

Q: Why are we hearing more about the nasal swabs versus saliva tests? Is the saliva test reliable and still being used?

A: There are currently a number of studies being conducted to evaluate if saliva testing results are comparable to those from nasal swabs. If good viral recovery from saliva is demonstrated from those studies, we may be able to accept saliva sample in the future. But, for now, our testing systems are only validated for nasal swabs.

Q: Now that we are seeing more asymptomatic people being tested, what is the guidance for self-quarantine for those asymptomatic people who test positive but do not need medical care?

A: Those who are asymptomatic and have a positive test need to monitor their symptoms closely for the next 10 days. If symptoms develop, call your doctor. If symptoms do not develop, you should still isolate for 10 days and consult with a doctor before ending isolation.

We know that asymptomatic individuals can still spread the virus, and that's why it's important to wear a mask any time you're out in public and practice good hand hygiene.

Q: How is NGHS treating COVID-19 positive patients? With medication or plasma transfusions?

A: Our physicians are treating each patient individually, offering medications to help with symptoms. Additionally, we are working to participate in trials for different medications and treatments – one of which is the convalescent plasma transfusion treatment trial.

Q: Does NGHS have any plans to develop local contact tracing teams?

A: Contact tracing efforts are being led by the Department of Public Health.

Business and Community Questions

Q: We are a manufacturing facility in Hall County who has been operating as an essential business. Employees' temperatures are taken at the beginning and end of shift, the entire facility is sanitized every 3 hours, and we have implemented strict guidelines regarding social distancing between employees. Would you recommend that we have employees wear masks while at work?

A: Yes. Along with the CDC, we are encouraging everyone to wear masks in public places to reduce the risk that those who are asymptomatic might spread the virus.

Q: What measures are being taken by NGHS and other stakeholders in the community to further educate our Hispanic population on COVID-19 precautions?

A: We have noticed that roughly 50% of our COVID-19 patients are Hispanic or Latino, which prompted us to reach outside the health system to help reach that segment of our community. We created more materials in Spanish and worked with the other non-profits, the local Latino Chamber, Hispanic community leaders and local schools to help spread the messages.

Business and Community Questions (Continued)

Q: With the demands on the food industry and national outbreaks in these facilities which has resulted in closures, are you working with local food processing plants to mitigate exposure?

A: We are supporting the Georgia Poultry Federation, other area industries and Chambers of Commerce to help keep the region's workforce safe and healthy.

Q: If several of my employees have tested positive, do I need to require a negative result to return to work?

A: Although testing availability has increased, it is still primarily available only to those who are having symptoms of COVID-19, not those who have recovered. Additionally, an employee may test positive up to 6 weeks after infection, even though they may no longer be infectious (contagious). However, the CDC has provided guidance for returning back to work that does not require testing. NGPG Occupational Medicine is providing Video Visits for Return to Work Clearance based on this CDC guidance. Employees can complete a visit from the comfort of their home, and we will electronically provide them with a Return to Work form when cleared. For more information visit www.ngpg.org/occupational-medicine.

Q: If one of my employees tested positive, do I need to require all staff to self-quarantine?

A: The CDC recommends that those who have had close contact with a person who is COVID-19 positive should self-quarantine for 14 days from the last day of exposure. Additionally, they should monitor themselves for symptoms of COVID-19 (fever, cough, shortness of breath, abdominal pain, vomiting, diarrhea, headache, dizziness, loss of taste or smell) and seek testing if symptoms develop. Keep in mind that those sick from COVID-19 can spread the infection up to 48 hours prior to developing symptoms.

The most challenging part of this guidance for employers is to decide which of their employees has had close contact. There is limited research available to give us a precise definition for close contact. Factors to consider are:

- 1) Duration of exposure (more than 10 minutes)
- 2) Presence of symptoms, such as coughing
- 3) Was the individual who was sick wearing a face mask?
**Face masks can decrease the risk of spreading the virus through respiratory droplets*
- 4) Proximity (being less than 6 feet away from the sick person increases risk of exposure)

In the end, it is in the best interest of any employer to seek the guidance of an occupational medicine provider. The Occupational Medicine Team at NGPG are constantly keeping abreast of the latest information regarding COVID-19 and how it can affect the workplace.

Q: Access North Georgia showed that NGHS needs nurses and doctors to help. What jobs would they be performing? How do we volunteer or sign up?

A: We are asking retired nurses to reach out if they are interested in helping over the coming weeks. We have links at www.nghs.com/COVID-19 to learn more about job opportunities.

Physicians and Advanced Practice Providers can reach out to our Medical Staff Services at NGMCmedstaff@nghs.com if they want to volunteer.

Additionally, we are accepting additional volunteers to help man screening stations at our hospital entrances. If you're interested in serving in that role, please fill out the contact form at www.themedicalcenterfoundation.org/contact.

Business and Community Questions (Continued)

Q: Many people have been sheltering at home for almost 30 days. COVID-19 seems to have a two-week incubation period. How are the current new cases rising if most people are at home? What does this say about the risk of increased exposure now that the shelter-in-place is ending?

A: While some people are sheltering at home, many are still going to work and moving about in our communities, visiting stores and restaurants – and many of those individuals aren't wearing masks. COVID-19 is spreading because of this activity and will continue to spread if more people are out in public.

Q: Is NGHS reaching out to local colleges to hire nurses on temporary licenses?

A: We have been in contact with local colleges over the past month to make sure their senior nurses have the resources necessary to graduate. We have hired over 120 new graduate nurses from almost 30 nursing programs - many who will have temporary licenses. These graduate nurses will start in our ANCC Practice Transition Accreditation Program accredited RN Residency Program this summer.

Q: Is Lanier Technical College's medical training facility being reviewed as an option to handle COVID-19 patients?

A: We are considering all options for expanding access to care in our communities. It is relatively easy to find space and set up beds, but, unfortunately, we have a limited number of nurses and other staff to provide care to patients in those beds. Thankfully, the state is working to help us find additional workers, especially critical care nurses.

Statistic Questions

Q: It has been reported nationwide that males, African Americans and Hispanics are contracting and dying from COVID-19 at a higher percentage than females and other races. Are there any statistics on infection and death rates for Hall County in regard to gender or race that you can share?

A: As one of our physicians put it, COVID-19 is an equal opportunity virus – every human has an equal chance of contracting the virus. There are multiple factors contributing to the rise in our region. By tracking cases we've seen at Northeast Georgia Health System, we've noticed that the virus seems to be hitting lower socioeconomic demographics harder – likely due to people in those households being more likely to have less space to practice proper distancing, multiple generations living together, working jobs that can't be done remotely, lack of income to purchase cleaning supplies and other needed items. Another factor, like in many parts of the nation, has been some percentage of the population resisting or ignoring recommendations for isolation and social distancing.

We have also noticed that roughly 50% of our COVID-19 patients are Hispanic or Latino, which prompted us to reach outside the health system to help reach that segment of our community. We created more materials in Spanish and worked with the other non-profits, the local Latino Chamber, Hispanic community leaders and local schools to help spread the messages.

We're also supporting the Georgia Poultry Federation, other area industries and Chambers of Commerce to help keep the region's workforce safe and healthy.

Other Questions

Q: It was mentioned that the intensive care units in Gainesville and Braselton are hovering between 60-80% full on any given day and that these units would have already been full had it not been for the increase in total ICU beds from 91 to 134. Do you foresee this becoming an issue in the coming weeks?

A: We continue to expand the number of beds in our facilities in response to the still increasing number of patients, but staffing is our biggest concern at this point. It is easier to add beds than it is to increase the number of nurses, physicians and other staff members needed for those beds. Our current projections, which may shift based on several variables, show we're likely to hit our peak patient volume in mid-June. Thankfully, the state is helping us find additional workers – especially critical care nurses – which will help.

Q: It was also mentioned that the peak for Gainesville-Hall County could be another 2-3 weeks away. Following Governor Kemp's announcements regarding reopening the state, do you foresee a second wave or drastic increase in the number of positive cases?

A: We are tracking our numbers and sharing the projection according to our model online at www.nghs.com/covid-19/latest-covid-19-data . This information is updated each weekday by 1 p.m.

Q: What additional precautions or measures do you recommend to the community following Governor Kemp's announcements? Since the peak has not been reached in Hall County, is it really safe to reopen businesses?

A: In his comments, the Governor mentioned the state would continue to monitor for hot spots of COVID-19 activity and work with local leaders in those communities if needed – and the state is responding to our request based on our data.

Our current projections, which may shift based on several variables, show we're likely to hit our peak patient volume in mid-June. Thankfully, the state is working to help us find additional workers, especially critical care nurses – which will help.

Our physician leaders and clinical experts are definitely concerned about the spread continuing to increase. We also recognize the hardship the COVID-19 pandemic and the resulting economic impact is having on people across our region. With those factors in mind, we're encouraging local businesses to be safe and responsible as they reopen or expand operations. The only way to lessen the chance of our hospitals being overwhelmed is to continue following these five simple guidelines:

- 1) Stay home as much as possible and avoid gatherings
- 2) Wear masks in public places
- 3) Maintain 6 feet of distance from others when possible
- 4) Wash your hands regularly and cover your cough
- 5) Call to seek healthcare advice when needed

People in our area rely on us to protect their health, so we will continue to plan for the worst while hoping for the best.

Q: Why is it dangerous for a well-controlled diabetic to get COVID-19?

A: The immune system does not work as well in patients with diabetes, especially when it is uncontrolled, making it harder for the body to fight illnesses including COVID-19.

Other Questions (Continued)

Q: To clarify, is Hall County considered a hot spot, or the City of Gainesville?

A: The data is reported based on county of residence, and Hall County in its entirety has been identified as a hot spot. Our data shows both the city and county are areas of increased activity compared to most other areas of the state.

Q: What needs to happen for the hospital to resume elective surgeries and reopen for visitors?

A: There are several reasons that elective surgeries aren't advised at this time. First, surgeries require masks, gowns, gloves, face shields and other personal protective equipment (PPE), and we need to conserve those items. Additionally, patients need hospital rooms and nurses following surgery, and we anticipate the need for COVID-19 patients surpassing our ability to provide care in the coming weeks. Lastly, a patient's immune system is stressed by surgery, and we want to avoid the possibility that a healthy patient might choose to have an elective procedure and then, contract COVID-19 when their system is not at its strongest.

We understand the challenges that our current restricted visitation poses for families who have loved ones in our care, but it is truly in everyone's best interest to stay home at this time.

Q: Do you see COVID-19 coming back in the fall?

A: We do not know what the virus might do in the coming months. What we do as a community will determine whether the numbers will go down, increase or stay the same.

Q: Are you in contact with the Regional Health Director for updates and suggestions for the community on a daily basis?

A: Matthew Crumpton, our Manager of Emergency Preparedness, serves as the Coalition Coordinator for Georgia Mountains Healthcare Coalition. He and other leaders are in regular contact with healthcare providers and emergency preparedness agencies across all our 19 counties and the state as we coordinate efforts.

Note: Information available on COVID-19 (Coronavirus) is changing daily. We recommend reviewing the CDC's guidelines regularly and visiting the following sites for the most up-to-date information:

- www.cdc.gov/coronavirus
- www.nghs.com/coronavirus
- www.greaterhallchamber.com (resources can be found on the homepage)

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