



GEORGIA VETERINARY MEDICAL ASSOCIATION

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VIRTUAL TOWN HALL ON COVID-19

3/26/2020

Public Health Q&A

Panelist:

- **Dr. Julie Gabel, GA Public Health Veterinarian**

Q: What should I do if an employee has been around someone who tests positive and is asymptomatic?

A: At this time, testing for asymptomatic people is NOT GENERALLY RECOMMENDED and has only been done in rare circumstances. For example, some testing of asymptomatic people who were passengers on the Grand Princess cruise ship was conducted before returning to the US. Public Health does not recommend testing for asymptomatic individuals. We still have limited testing capacity through the Public Health Lab, commercial and hospital laboratories.

Public Health is restricting testing to patients who are hospitalized with respiratory illness, symptomatic healthcare workers, and ill persons who live or work in congregate settings such as long-term care facilities, jails, etc. Many commercial laboratories are now offering testing and Public Health has free-standing testing sites, but patients must be referred by their healthcare provider or must meet certain criteria for testing such as ill healthcare worker, or patient with a compatible illness. In situations where healthcare workers are exposed, CDC's guidance includes the option of testing asymptomatic healthcare workers but due to limited testing materials this is not being done in most jurisdictions. We are following CDC's recommendations to exclude exposed healthcare workers for 14 days or allowing exposed healthcare workers who are asymptomatic to return to work and wear a mask, if staffing is critically low. Finally, CDC states that asymptomatic people who have tested positive are not thought to be driving the outbreak. In a nutshell, it is highly unlikely you would ever have any interaction with someone who tests positive and is asymptomatic, for all the reasons I just covered.

Q: What should I do if a client or employee has tested positive?

A: Persons who are confirmed or suspect for COVID-19 are subject to a strict home isolation for a defined period of time. But in an abundance of caution, it would be prudent for office staff when people call in schedule appointments to remind clients that they should stay home if they sick. Additionally, practices can



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determine if they want to completely eliminate having clients come into the office and do a curbside/parking lot drop off like many other types of businesses are doing. They also need to remind their own employees that it is critical for them to stay home if they are sick.”

Q: Should “at risk groups” (please identify) be working at this time?

A: Risk groups for severe disease include people 65 and older, and people with the following underlying conditions: chronic lung disease or moderate to severe asthma, significant cardiovascular disease, and immunocompromising conditions. Also included are people of any age with severe obesity, defined as body mass index or BMI >40, or other underlying medical conditions, particularly if not well controlled, such as diabetes, renal failure, or liver disease. In terms of deciding if someone at high risk should work, it would be prudent for them to discuss their risk with their healthcare provider. If practices are put in place to limit exposure to the general public as we previously discussed and are included in the COVID Guidance for Veterinary Clinics, the risk for exposure will be minimized. Another consideration would be to assign tasks to those with risk factors that would eliminate their interaction with the general public altogether if possible. Also important is to remind employees to stay home when they are sick.

Q: How should we handle house calls to client’s homes?

A: Certainly, making house calls is associated with a greater risk for exposure and practices should weigh the benefit vs. risk of offering this service during the COVID-19 pandemic. As we discussed, communication with the client ahead of time to ask if there are any ill individuals in the home is critical. House calls to homes where clients are sick should be avoided. If the clients are well, and the veterinary staff feels confident that the client is reliable, then house calls could be considered.

Q: How should euthanasia be handled if clients want to come into the practice?

A: Since close contact with clinic staff is unavoidable during euthanasia, out of an abundance of caution clients could be asked to wash their hands and wear a mask during the procedure, but the risk to the staff if the client is not sick is low. In these limited situations, veterinarians should ultimately decide how they want to handle euthanasia. I would also direct you to the guidance document to review the information we include on cleaning and disinfection, which will be an important to perform regularly if clients will be coming into the office.