



Date: March 4, 2020

Greetings OMEPA Members;

Next Tuesday we will have an open monthly OMEPA board meeting to provide the opportunity for all OMEPA members to call in and listen to the board meeting discussion. If you have questions for the board, please communicate them to Katie Roberts, your Communication Officer for OMEPA.

To listen in on our OMEPA March Board Meeting, dial +1 (872) 240-3212, your access code 158-743-757#, if you are not an OMEPA board member please mute your line.

There are many questions concerning the outbreak of respiratory disease caused by COVID-19 and the service actions that our HME industry will be facing with this COVID-19 outbreak. As your OMEPA president, I received several phone calls from news media asking what our response will be to the care of our elders throughout the state of Oklahoma if an outbreak occurs. I've taken this question to the Oklahoma state health department and to VGM asking for their support and guidance in what our industry should be prepared for and how to conduct our daily services.

The respiratory disease caused by COVID-19 or known as the coronavirus, could majorly affect much of our elderly people that have an underlining respiratory problem. Their outcome from dealing with this respiratory disease could be fatal and is highly contagious to the general population that encounters the virus. However, currently there are 94,868 confirmed international cases with the death rate of 3.42% or 3,249 deaths and a recovery rate of 54.15%. Therefore, you can see that for the most part, those that are healthy with no underlying health problems have a very high potential of recovering from this illness with a few weeks of quarantine.

This morning, February 4, 2020, the Oklahoma State Department of Health (OSDH) hosted a conference call to share viable information to State agencies and County Health Department (CHD) as to what their response to the COVID-19 outbreak is at this time. There are no confirmed cases in Oklahoma as of this morning, but in the United States there are 134 confirmed cases across 16 states; 9 deaths in Washington State – King County. This number has increased by 48 confirmed cases in the last four hours in the United States. Oklahoma is expected to start dealing with the outbreak within the next two weeks and we as healthcare providers must be prepared and have a policies and procedures in place before the outbreak. CDC has indicated that it will be 12 to 18 months before a vaccination has been approved and circulated throughout the public.

The following link is to OSDH's live Arc/GIS map tracking COVID-19 globally;

<https://osdh.maps.arcgis.com/apps/opsdashboard/index.html#/ab1ae58c41a84249a274eb163c2e04fc>

In Oklahoma - Currently, there are no confirmed cases of COVID-19. It is also important to note that a person under investigation does not represent a case of novel coronavirus. It is expected that the OSDH will soon have the capability to test for COVID-19 at the agency's public health laboratory. Currently this is the only

laboratory in the state approved by the Center for Disease Control and Prevention (CDC) to conduct testing. OSDH will soon be activating a call center for questions and information on COVID-19. For the general American public, who are unlikely to be exposed to this virus at this time, the immediate health risk from COVID-19 is considered low.

There is no vaccine or treatment for COVID-19. However, like any other respiratory illness, the public can protect themselves with frequent handwashing, avoiding contact with the eyes, nose and mouth with unwashed hands; and staying home when sick. Individuals who have recently traveled through an area affected by the outbreak are encouraged to self-report to a health care provider or to the OSDH by calling the Acute Disease Service at (405) 271-4060 if they begin to experience symptoms.

The questions that I proposed to the State Health Department and VGM Group yesterday are as follows:

1. In cleaning and disinfecting exposed coronavirus equipment such as oxygen concentrators, what would be the proper procedure?
2. For employees that are in close proximity to an infected patient, what should their PPE consist of and how to dispose after using the items?
3. What procedure should be taken after transporting infected equipment in your cargo van?
4. Should we be posting warning signs for potential patients coming into our store locations?
5. With the shortage of N-95 mask, could the state and federal government assist us with these necessary PPE items?

Enclosed is the published website Links to Help inform our industry, employees and patients:

- General Information: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- About Coronavirus Disease: <https://www.cdc.gov/coronavirus/2019-ncov/about/index.html>
- Healthcare Professionals: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/index.html>
- Health Departments: <https://www.cdc.gov/coronavirus/2019-ncov/php/index.html>
- Traveling: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>
- Laboratories: <https://www.cdc.gov/coronavirus/2019-ncov/lab/index.html>
- Preparing Individuals and Communities: <https://www.cdc.gov/coronavirus/2019-ncov/preparing-individuals-communities.html>
- Schools: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/guidance-for-schools.html>
- Pregnant Women and Children: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/pregnant-women.html>
- Frequently Asked Questions and Answers: <https://www.cdc.gov/coronavirus/2019-ncov/faq.html#spreads>

Thank You,
Larry Dalton

