Coronavirus Disease 2019 (COVID-19) Pandemic, Update # 22
Community Transmission of COVID-19 Increasing in NH
Instructions for Reporting COVID-19 Point-of-Care Test Results

Key Points and Recommendations:

- Community transmission of COVID-19 is increasing in New Hampshire (see Community Level Transmission map). Healthcare providers should monitor their respective community’s transmission level, and review CDC’s Infection Prevention and Control Recommendations, which has connected recommendations on universal use of certain personal protective equipment (PPE) to level of transmission (see below for further information and recommendations).

- Most SARS-CoV-2 point-of-care tests, often called “rapid” tests, are not automatically reported to the NH Division of Public Health Services (DPHS). Therefore, healthcare providers must report test results from point-of-care testing (including nucleic acid amplification- and antigen-based tests) to NH DPHS. Examples of point-of-care tests currently in use include:
  - Abbott IDNow Nucleic Acid Amplification Test
  - BD Veritor System for Rapid Detection of SARS-CoV-2
  - BinaxNOW COVID-19 Antigen Card
  - LumiraDx SARS-CoV-2 Antigen Test
  - Sofia SARS Antigen FIA

- Reporting all personally identifiable information for COVID-19 test results is required by federal and state law. This includes reporting positive, negative, and invalid results. Results must be submitted at least daily and within 24 hours of the result being available.

- Organizations performing point-of-care testing have two options for submitting test results:
  1. Enter test results for each patient tested via an online form.
  2. Submit daily results for multiple patients via a specially formatted file submitted through a secure file transfer solution. Instructions for this method are online.

- People diagnosed with COVID-19 must be reported to NH DPHS by filling out and faxing the COVID-19 Case Report Form to our confidential fax at 603-271-0545.
  - Submission of a positive test result through the online process outlined above meets the requirement to report cases; however, healthcare providers that have additional clinical and risk factor information beyond the positive test result are encouraged to also submit a COVID-19 Case Report Form.
  - This form should also be used to report COVID-19 cases who become hospitalized or who die in your facility even if they were previously diagnosed and reported.

Communication and Partner Engagement:

- Webinar for long-term care facilities (LTCFs) and congregate living settings every Wednesday from 11:45 – 1:00 pm:
  - Zoom link: https://zoom.us/j/511075725
Call-in phone number: (929) 205-6099
Meeting ID: 511 075 725
Password: 092020

- Webinar for school partners every Wednesday from 3:30 – 4:30 pm:
  - Zoom link: https://nh-dhhs.zoom.us/j/98062195081
  - Call-in phone number: (646) 558-8656
  - Meeting ID: 980 6219 5081
  - Password: 197445

- Webinar for healthcare providers and local partners every Thursday from 12:00 – 1:00 pm:
  - Zoom link: https://zoom.us/s/94841259025
  - Call-in phone number: (646) 558-8656
  - Meeting ID: 948 4125 9025
  - Password: 003270

Situational and Epidemiology Update

Since the beginning of September the daily incidence of new COVID-19 diagnoses has been steadily increasing in New Hampshire, and rising more rapidly the last couple weeks. Hospitalizations and deaths are also beginning to slowly increase. While increased testing, especially in K-12 schools and colleges/universities, is likely driving some of the reported increases, we are seeing increases in COVID-19 across different age groups (see “Trends” data dashboard). Additionally, an increasing number of close contacts requiring quarantine are being identified, and about 55-60% of people diagnosed with COVID-19 report either close contact to someone with COVID-19 or have no identified risk factors, indicating increasing local community spread of COVID-19. Providers and local public health partners should continue to stress the importance of community mitigation measures with patients, employees, and communities.

To monitor local community transmission, NH DPHS has categorized and defined “minimal”, “moderate”, and “substantial” levels of transmission based on: 1) the rate of new infections over the prior 14 days, 2) the rate of new hospitalizations over the prior 14 days, and 3) the 7-day test % positivity. All providers and local public health partners should monitor the Community Level Transmission Metrics located here on our data dashboard. Currently, the counties of Hillsborough, Rockingham, and Merrimack Counties are at a “moderate” level of community transmission, and the cities of Manchester and Nashua have “substantial” transmission based on the rate of new infections. These categories are important for applying the NH DPHS K-12 guidance Considerations for Transitioning Between School Instructional Models Based on Levels of Community COVID-19 Transmission and Impact on Local Schools, but they also impact healthcare provider infection control practices as outlined in CDC’s healthcare worker Infection Prevention and Control Recommendations, which healthcare providers and facilities should review.

The CDC recommends providers working in areas with higher community transmission should practice both universal masking and also wear eye protection during all patient care encounters, even if SARS-CoV-2 infection is NOT suspected (if COVID-19 is suspected, providers should wear all appropriate COVID-19 PPE, as previously recommended in prior HANs). This guidance to implement universal mask and eye protection for all patient care encounters in areas of higher COVID-19 transmission is because providers are more likely to encounter asymptomatic or pre-symptomatic patients with SARS-CoV-2 infection. CDC also recommends that in these areas of higher transmission a N95 or higher-level respirator (instead of a facemask) be used for all aerosol generating procedures and surgical procedures that might pose a higher risk for transmission if a patient were to have SARS-CoV-2 infection. Based on NH’s definitions of community transmission, we recommend that these steps be taken for all patient care encounters in areas that reach NH’s level of “substantial” community transmission.
- For any questions regarding this notification, please call the NH DHHS, DPHS, Bureau of Infectious Disease Control at (603) 271-4496 during business hours (8:00 a.m. – 4:30 p.m.).

- If you are calling after hours or on the weekend, please call the New Hampshire Hospital switchboard at (603) 271-5300 and request the Public Health Professional on-call.

- To change your contact information in the NH Health Alert Network, please send an email to DHHS.Health.Alert@dhhs.nh.gov.

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From: Benjamin P. Chan, MD, MPH, State Epidemiologist

Originating Agency: NH Department of Health and Human Services, Division of Public Health Services

Attachments: None