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THE IMPACT ON OUR HEALTH SYSTEM

This is the eighth update for Regents regarding the SARS-CoV-2 virus pandemic and the impact on the University's health and academic enterprise.

On March 31, the White House updated the number of confirmed cases on a state-by-state basis and provided forecasts about the number of deaths that may occur nationally. On April 2, one million infections were reported world-wide.

Thirty-seven states and Washington D.C. have enacted stay-at-home orders, along with portions of eight other states. In California, counties in the San Francisco Bay Area extended local stay-at-home orders through May 3, and the statewide stay-at-home order remains in effect with no set expiration date.

Some mayors, public health officials and the White House now are urging everyone to wear homemade nose and mouth coverings when in public to reduce transmission.

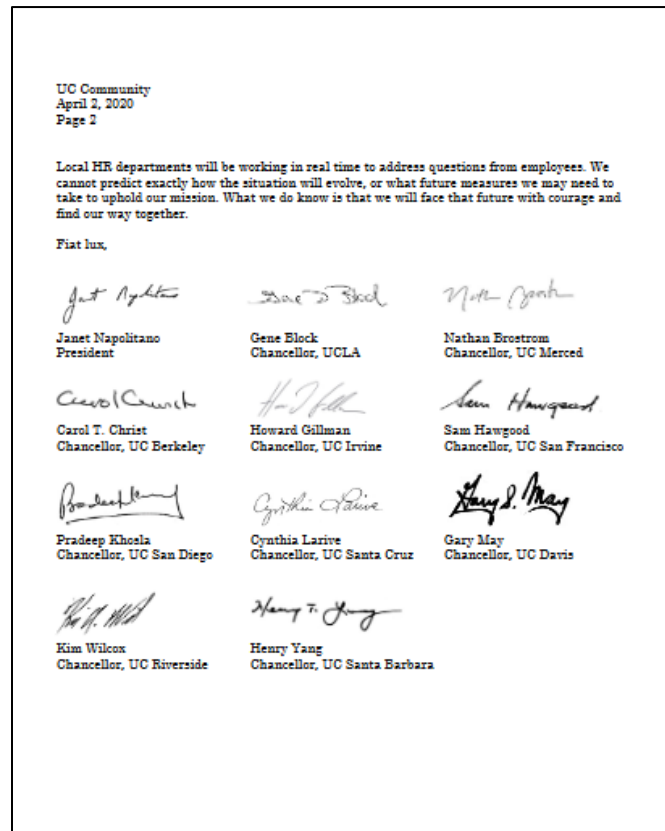
On Thursday, UC President Janet Napolitano and all 10 Chancellors [issued a letter to all employees](#) stating there will be no COVID-19 related layoffs for all career employees through the end of the fiscal year on June 30, 2020.

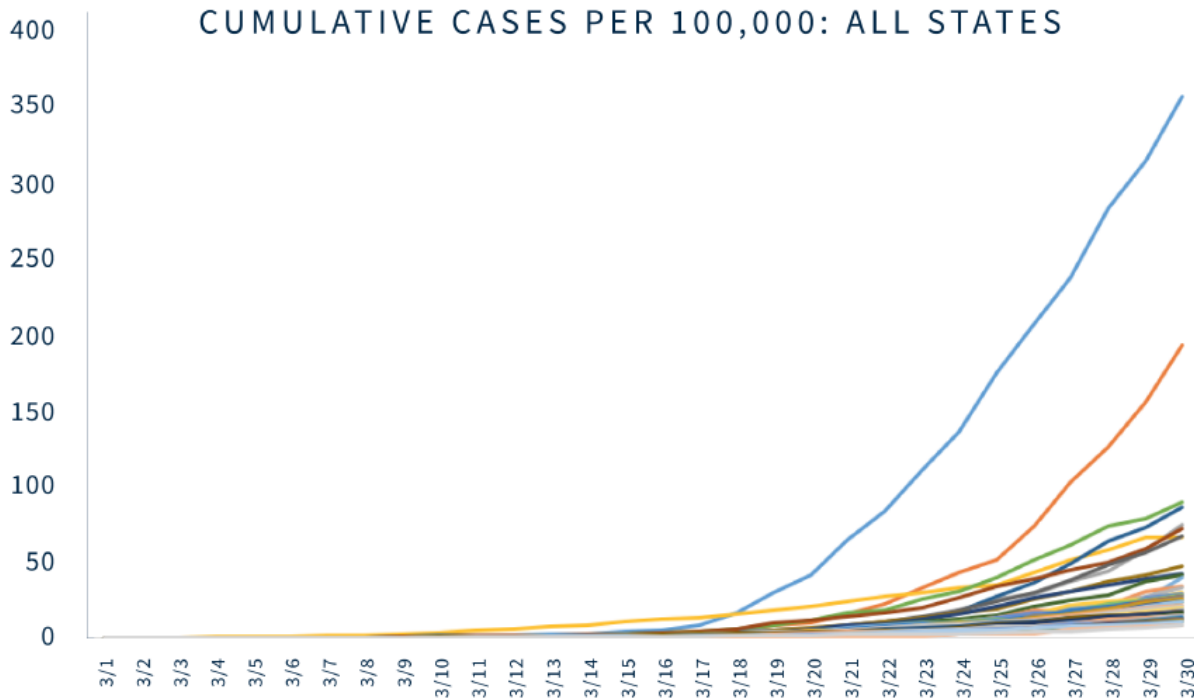
SOBERING UPDATES FROM WHITE HOUSE CORONAVIRUS TASK FORCE

At a press briefing on Tuesday, March 31, Deborah Birx, M.D., Response Coordinator for the White House Coronavirus Task Force, unveiled sobering models.

Even with assertive mitigation efforts, the models project 100,000-240,000 deaths nationally.

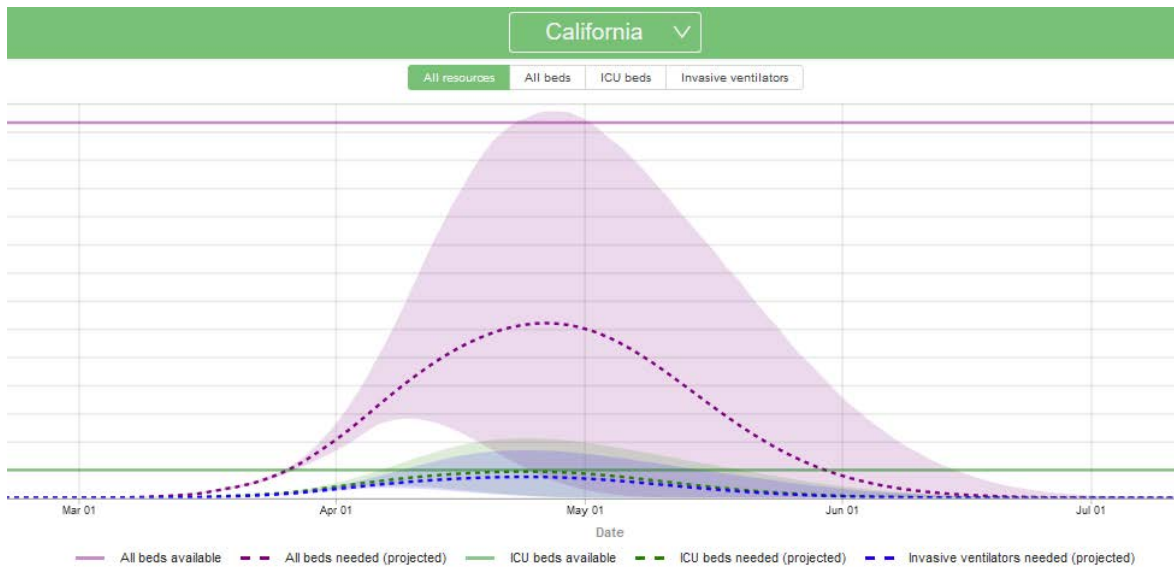
These numbers are in stark contrast to where we are as of April 2, with 5,443 deaths nationally according to the [CDC](#) and 237 deaths in California, according the [California Department of Public Health](#).





The situation, as of March 30, varies widely by location. A comparison of five states shows California's early actions may be helping. **However, we must not waver in our commitment to limit community-based transmission.** The more we 'flatten the curve,' the more time we have to build surge capacity, acquire supplies and deliver high-quality care to the seriously ill.

Although we are experiencing a rise in our inpatient admissions for COVID-19, especially in Los Angeles (**Table 1, page 4**), we are still more than three weeks away from the expected peak. An interactive model from the Institute for Health Metrics and Evaluation (**IHME**) at the University of Washington—show California with an expected peak on April 26 ([select California](#)).



Christopher Murray, M.D., director of the IHME, forecasts a late April peak in California reaching 119 deaths per day and 5,068 total deaths by August.

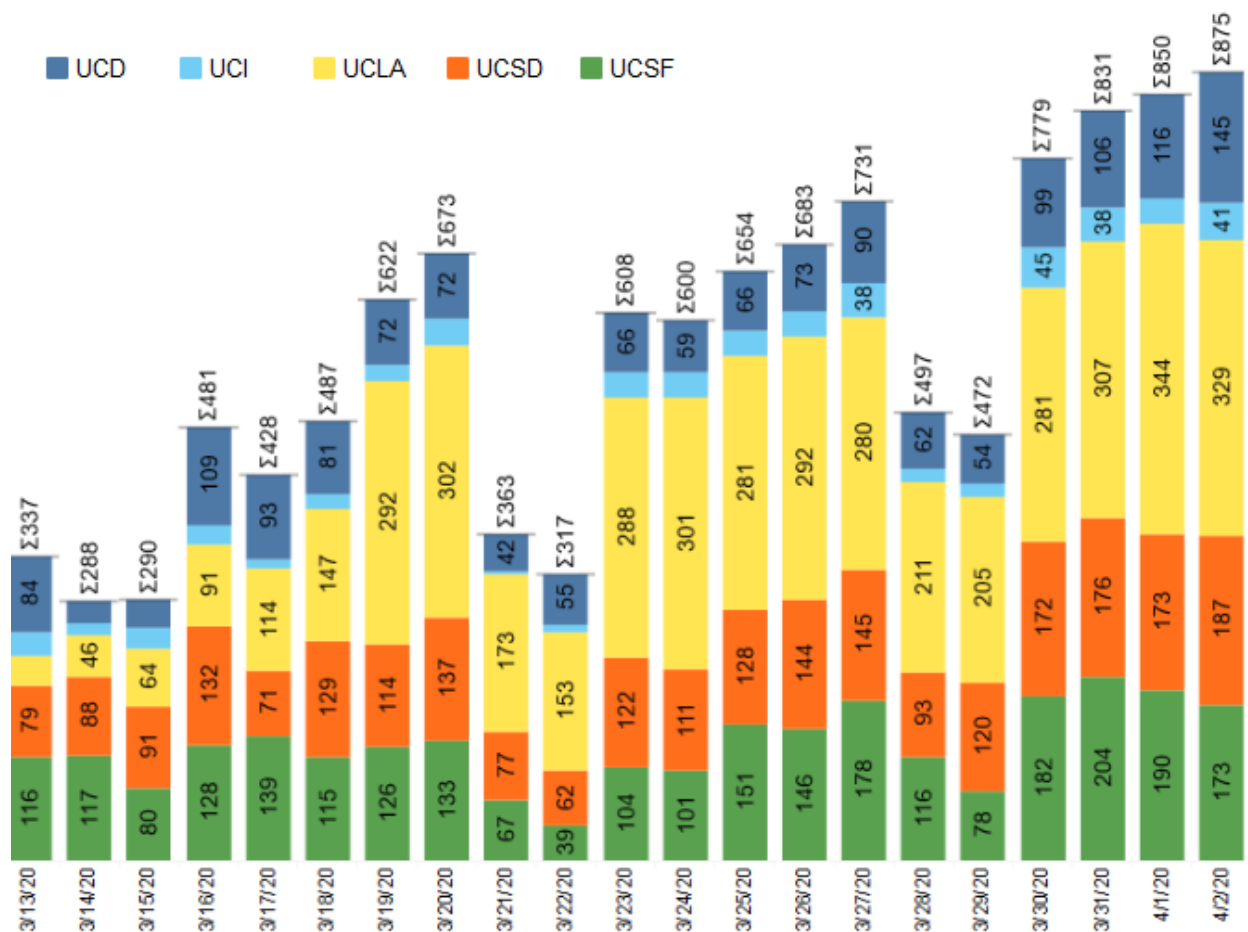
All models depend on accurate data. As a service to the state and others working to understand the pandemic and predict the needs of our state, the University of California Health system will make its COVID-19 testing data publicly available through social media beginning Monday April 6, 2020.

UC IN-HOUSE TESTING CAPACITY HITS NEW HIGH

Thanks to our determined laboratory personnel, our in-house testing capacity continues to grow.

Testing is critical to understanding the extent of the spread, isolating symptomatic patients confirmed to have the virus, and providing appropriate care. This was eloquently described in an April 1 [L.A. Times article](#) about an elderly patient with fever and shortness of breath who arrived at the Emergency Department at UCLA Ronald Reagan Medical Center.

And, drive-through testing by UC Davis School of Medicine was featured in an April 1 article in the [Wall Street Journal](#).



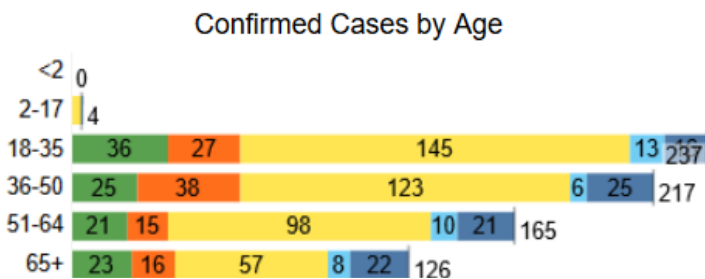
Source: UC Health Data Warehouse

Of the 11,576 tests run to date across the system, 6.47% are positive. Tests are performed based on eligibility criteria that include influenza-like illness symptoms.

The SARS-CoV-2 virus is present in all age bands, with the highest number in the 18-35 range.

Ironically, our ability to run higher volume now is constrained by the availability of ordinary supplies such as nasal swabs.

Remarkably, 3D printing may help. UC medical centers, working with their campuses, are [building face shields and some ventilator components with 3D printing technology](#). The University of South Florida released its protocol for [3D printing of nasal swabs](#), and we anticipate using this pattern to supplement our supply of nasal swabs in the short-term.



Source: UC Health Data Warehouse

COVID-19 RESEARCH PROJECTS, COLLABORATIONS AND CLINICAL TRIALS

A survey conducted by UCOP's Research Grants Project Office revealed a growing number of active research projects and investigators across the UC enterprise seeking to work on COVID-19 solutions. These active projects and collaborative opportunities span the intellectual and scientific depth of the UC community.

[The information is posted online](#) to help researchers across the enterprise collaborate internally and with external partners. Examples include: Viral Transmission, Diagnostics, Ethical Considerations, Home-based Infection Control, Social Sciences, Anti-viral Therapeutics, Mental Health, and Trend Analysis of Social Media.

LOCATIONS	CURRENT CONFIRMED
UC Davis Health	15
UCSF Health	16
UCI Health	6
UCLA Health	33
UC San Diego Health	17
TOTAL	87

Inpatient Count current as of April 2

Campuses	50
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Current as of April 2

The number of clinical trials continues to grow. Eligibility criteria are available through the links.

Active Clinical Trials at All Five Medical Centers	Active Clinical Trials at One or More Medical Centers	Pending
Remdesivir (NCT04280705)	Sarilumab- Davis and UCLA (NCT04315298) DAS181- UCLA (NCT03808922)	Acetaminophen/Ascorbate-pending at UCSF (NCT04291508) Mesenchymal stem cells-pending at UCSF

KNOWLEDGE SHARING ACROSS INTERNATIONAL BORDERS IS CRITICAL

We had the privilege of speaking with our colleagues at Zhejiang University (ZJU) in Hongzhou China on April 1. The university has had a partnership with UCLA since 2009. ZJU sent a team to Wuhan to help treat patients with COVID-19 and graciously offered to share their knowledge with UC Health.

We met via Zoom and the teleconference was led by [He Lianzhen](#), PhD Vice President (International) of Zhejiang University, along with [Jian-an Wang, MD, PhD](#), Hospital President, Second Affiliated Hospital of Zhejiang University and Professor of Cardiology, and many other distinguished physicians and leaders.

We learned many things from their experience. Dr. Wang summarized the importance of public awareness, social distancing, following recommendations regarding masking and quarantines, the importance of protecting health care providers, and the need to prepare for the psychological toll of the pandemic on patients and health care providers.



At the end of the meeting ZJU pledged to send UCLA personal protective equipment to honor our partnership and to help protect our personnel. We are so grateful for this international collaboration and sharing of information that will help us to serve our patients.

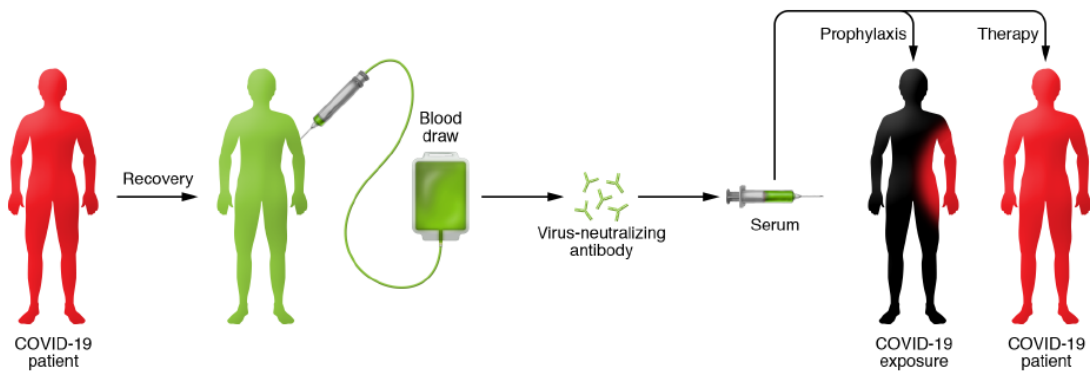
LOOKING SIX MONTHS AHEAD - ACTION NEEDED ON CONVALESCENT SERA

Understandably, our attention is drawn to the approaching surge. I am encouraged by the work of all of our health centers to ready our system for the expected surge in April and May.

As an infectious diseases physician, a clinician-scientist, and a leader in California's health care landscape, I also urge us to look six months ahead. **What actions can we take now to be more prepared for a second wave of infections predicted for fall 2020?**

I will be encouraging and supporting translational research across system that has the potential to prevent or treat COVID-19 infection quickly. UC Health has an important resource in the UC BRAID, consisting of 5 clinical and translational science centers located across our health campuses. UC BRAID, led by Dr. Dan Cooper at UCI, provides the infrastructure for rapidly launching coordinated system-wide clinical trials.

One area that we are working on today in collaboration with UC BRAID is the evaluation of convalescent serum. Convalescent serum, that is plasma obtained from people who have recovered from COVID-19, may be a way to offer antibody protection to those who have not yet been infected and is a potential treatment for those already infected. (See figure on the next page and a useful overview of the history of convalescent serum and its potential application to the COVID-19 crisis in [The Journal of Clinical Investigation](#)).



© 2020, American Society for Clinical Investigation. J Clin Invest. <https://doi.org/10.1172/JCI138003>

This technique has the potential to be valuable as a short-term prophylactic for health care workers who care for COVID-19 patients and those with chronic medical conditions that may place them at higher risk of complications.

Convalescent serum potentially offers a bridge while longer-term research continues on vaccine and drug development.

Several UC health centers are already engaged and working with academic health centers nationally, the Governor's Task Force on Innovative Therapeutics, and blood-banking and serum institute partners in researching the application of convalescent serum to SARS-CoV-2. Our goal is to increase community-immunity in an effort to return people to work and prepare for a second wave of COVID-19.

THE SPIRIT OF CALIFORNIA SHINES THROUGH INSIDE AND OUT

Many in health care are drawn to the mission of public service, even during times of heightened risk. This spirit is exemplified in our front-line personnel who embrace the challenge professionally and also advocate for others to follow public health directives to remain at home.



I also am touched by the organizations, businesses and individuals who have responded so generously to the call for donations of personal protective equipment (PPE). These donations, along with a very slowly improving supply chain, have helped ease shortages of surgical masks and other supplies. However, global competition for resources remains intense and the high use rate will only accelerate as the number of confirmed cases grows. We continue to accept donations at each of our health centers and ask for your continued support.



Please Donate Personal Protective Equipment and Medical Supplies				
UC Davis Health	UC San Diego Health	UCI Health	UCLA Health	UCSF Health

THE IMPACT ON THE ACADEMIC ENTERPRISE

- UC acted on March 31 to implement temporary measures which relax **undergraduate admissions requirements** for students looking to enroll at UC for fall 2020 and future years as applicable. These temporary measures ensure high school and transfer students are not penalized by their inability to earn letter grades for academic classes or take standardized tests during the COVID-19 pandemic. Further information is available at: <https://admission.universityofcalifornia.edu/response-covid-19.html>.
- On behalf of the UC Libraries, the **California Digital Library (CDL)** contracted for the Journal of Visualized Experiments (JoVE) video library of 11,000+ experiments to better support remote laboratory teaching and learning. CDL is also supporting campus libraries in submitting the paperwork to qualify for the HathiTrust Emergency Temporary Access Service. For libraries who have closed down access to physical collections, this service will provide electronic access to in-copyright books from Hathi Trust's digital library of 17 million volumes that are also held by the UC Libraries. UC campuses see this as an enormously helpful step forward in providing access to the literature that isn't licensed and electronic already.
- The **President's Postdoctoral Fellowship Program (PPFP)** is working to assure timely appointments of fellows and remote on-boarding and also addressing how to support postdocs in covering expenses associated with remote work arrangements. The PPFP offers postdoctoral research fellowships, professional development and faculty mentoring to outstanding scholars in all fields whose research, teaching, and service will contribute to diversity and equal opportunity at UC.
- All **UC Education Abroad Program (UCEAP)** students from the suspended spring 2020 and yearlong programs are safe and accounted for. UCEAP staff continue to work with individual students to resolve academic and financial matters. At this time, no decisions have been made regarding fall 2020 and academic year 2020-21 programs.

TAKING CARE OF THOSE WHO TAKE CARE OF US

This pandemic is requiring longer hours for many members of clinical care teams. I'm proud that our health centers are lending a help hand, where possible, to help employees with overnight accommodations, meals and child care support.

At UCLA Health, this includes providing shower facilities and overnight accommodations for all members of care teams providing care for patients in designated units, post-discharge lodging at the UCLA Guest House for COVID-positive staff no longer requiring hospitalization, and meals enabled by the philanthropic generosity of businesses and individuals.

At UC San Diego Health, certain hotels such as The Catamaran and The Lodge at Torrey Pines are providing frontline health workers with housing and a meal, as needed.

We are extremely grateful for the tremendous efforts of our caregivers during this crisis. More information on these support activities will be available in the coming weeks.

MONITORING AN ILL PERSON AT HOME

Older adults and people of any age with certain serious underlying medical conditions like heart disease, lung disease or diabetes are at higher risk for more serious complications. For all persons, you should monitor for worsening symptoms and the emergency warning signs.

Preparation is key

- Have their healthcare provider's contact information on hand; and,
- If the person gets progressively sicker, call their healthcare provider, or - *in an emergency* - call 911 *and notify dispatch personnel of a potential or confirmed case of COVID-19.*

Emergency warning signs include:

- Trouble breathing;
- Persistent pain or pressure in the chest;
- New confusion or inability to wake; or,
- Bluish lips or face.

Setting up your home for care

In family and other settings, it can be tempting to be in close proximity to your loved one. However, the safety of all means the ill person should stay in one room, away from others as much as possible. Discourage visitors, no matter how well-intentioned, including family members from outside the household.

- Have them wear a facemask, if possible;
- Have them use a separate bathroom, if possible;
- Avoid sharing personal household items, like towels, bedding or dishes; and,
- If taking them to a doctor (after notifying the office of the patient's condition) have them wear a mask or fabric covering to prevent coughs and sneezes from contaminating your car and surfaces at the clinic.

Provide symptom treatment

Although there no cure for COVID-19, you can provide care that enhances their ability to fight the virus.

- Make sure the sick person drinks lots of fluids to stay hydrated;
- Make sure they rest at home, preferably separated from others; and,
- Provide over-the-counter medications, unless they are prohibited due to that person's underlying health condition.

Most people experience symptoms for a few days and feel better after a week.

However, it's important they do not end home isolation until the following three things have happened:

- No fever for at least 72 hours (without use of fever suppressing medication);
- At least 7 days have passed since their symptoms first appeared; and,
- Other symptoms like cough, shortness of breath have improved.

Alternatively, if testing is available, they should no longer have a fever, have improved symptoms, and have received two negative tests, 24 hours apart. For more information on caring for a suspected or confirmed COVID-19 patient, [see the CDC guidance here](#).

KEEPING PEOPLE INFORMED THROUGH PUBLISHED MATERIALS

UC campuses and OP are publishing informational and educational materials for the public, our students and staff. UCOP is distributing guidance to facilitate smooth operations, including:

- [President's Letter to UC Community Announcing No COVID-19 Related Layoffs](#) – **NEW**
- [UCOP Innovation & Entrepreneurship Research Collaborations](#) - **NEW**
- [Equity and Inclusion in the Face of COVID-19](#)
- [Novel Coronavirus 2019 \(COVID-19\) Paid Leave and Remote Work Provisions](#) -
- [President's Letter to the UC Community](#)
- [President's Directive on Travel to Level 2/3 Countries; MRT Emergency Powers](#)
- [How UC is Responding to the Coronavirus \(COVID-19\)](#)
- [Guidance for UC Locations](#)
- [President's Directive on Travel to China](#)
- [President's Directive on Travel to Korea and other Warning - Level 3 Countries](#)
- [Information for Parents and Students](#)
- [A Summary of UC's System Involvement in COVID-19 Patient Care and Research](#)

You can also find the latest travel information on the CDC website - [Information for Travel](#).

IN CLOSING

I continue to be moved by the commitment of the employees of the UC System to each other, the state, and the wider world as we come together to address the challenges of the COVID-19 pandemic. I am inspired by the dedication of our front-line health care workers, the ingenuity of our researchers, and the outpouring of donations from organizations, companies and individuals that are helping ease supply shortages.

I will continue to provide updates weekly. Please follow me on Twitter [@carrie_byington](#), where I provide links to important information in real-time. Together we can protect the health of our students, employees, and all Californians. Fiat Lux.

Sincerely,
 Carrie L. Byington, MD
 Executive Vice President
 UC Health