



Communicable Disease Branch Coronavirus Disease (COVID-19) Weekly Key Points

May 25, 2021

The North Carolina Division of Public Health (NC DPH) Communicable Disease Branch will be releasing COVID-19 weekly key points that includes information discussed on the weekly Tuesday Local Health Department call. Recordings of the call will not be made available; please use the information below as a summary of the topics presented on the call. As guidance changes, please use the most recent information provided. For questions, contact the NC DPH Communicable Disease Branch 24/7 Epidemiologist on Call at **919-733-3419**.

Important Updates

- **New:** NCDHHS LHD Weekly Webinar 5 25 2021.pdf (file attached)
- **Updated:** Local Health Vaccine FAQ 5_21_21.pdf (file attached)
- **Updated:** Find My Testing Place LHD Upload_May2021Wk4 (file attached)
- **New:** North Carolina CDC Travel Planner (file attached)

Policy/Equity/State Health Director Update

In recent weeks, there have been rare reports of myocarditis occurring after COVID-19 vaccination **with Moderna or Pfizer vaccines** in the United States and Europe. CDC is aware of these reports and has been closely monitoring myocarditis/pericarditis in multiple safety systems, including the Vaccine Adverse Event Reporting System (VAERS) and the Vaccine Safety Datalink (VSD). To date, there has not been a safety signal identified in either VAERS or VSD. Rates of myocarditis reports in the window following COVID-19 vaccination have not differed from expected baseline rates. CDC will continue to evaluate reports of myocarditis/pericarditis occurring after COVID-19 vaccination and will share more information as it becomes available.

CDC's Advisory Committee on Immunization Practices' COVID-19 Vaccine Safety Technical (VaST) work group has reviewed post-authorization COVID-19 vaccine safety data on a weekly basis since the start of the United States' vaccination program. **VaST concluded that there are relatively few reports of myocarditis** to date and that these cases appear to be mild, and follow-up of cases is ongoing.

Myocarditis is the inflammation of the heart muscle and pericarditis is the inflammation of the lining outside the heart. In both cases, the body's immune system is causing inflammation in response to an infection or some other trigger. While myocarditis can be serious, it is frequently mild and self-limited. Symptoms can include abnormal heart rhythms, shortness of breath, or chest pain. Both myocarditis and pericarditis have been reported as complications in patients with COVID-19.

While these reports are being further investigated, health care providers should do the following:

- Consider a diagnosis of myocarditis or pericarditis in any evaluation of chest pain following COVID-19 or COVID-19 vaccination.



- Inquire about recent COVID-19 or COVID-19 vaccination in any patient presenting with symptoms consistent with myocarditis or pericarditis.
 - Clinical features of myocarditis and pericarditis include chest pain or pressure, shortness of breath, electrocardiogram (EKG) changes and elevated cardiac biomarkers.
 - Elicit a detailed history including vaccination status and potential exposures to COVID-19. Patients should be tested for COVID-19 infection using a molecular (PCR) test.\
- Report cases of myocarditis or pericarditis within two weeks of any COVID-19 vaccination to the U.S. Vaccine Adverse Events Reporting System (VAERS): <https://vaers.hhs.gov/reportevent.html>.
 - It is recommended that the evaluating (not administering) provider report the incident to VAERS so appropriate clinical details can be reported accurately.

The CDC continues to recommend COVID-19 vaccination for people 12 years and older.

For More Information:

- See the CDC's [COVID-19 VaST Work Group Technical Report – May 17, 2021](#)

Primary Care Providers

Please help us recruit primary care providers to the COVID-19 Vaccination efforts – Here is a one pager to help them get started - <https://covid19.ncdhhs.gov/media/2667/open>

Epi Picture

- Incidence rate down to 59 per 100,000 statewide for week ending 5/22 (18% decrease from previous week)
- 3.6% positivity among PCR results received via electronic lab reporting for week ending 5/22
- Wastewater surveillance data now available on DHHS COVID dashboard.

Incentives

Our [Summer Cash Card pilot program](#) kicks off tomorrow, May 26. At participating sites in Guilford, Mecklenburg, Rowan, and Rockingham County, individuals getting their first dose of a COVID-19 vaccine – or driving a friend to their first dose – will be able to get a \$25 cash card. The pilots will run until June 8. We will use the results of the pilots to determine whether it makes sense to scale.

Movement, Monitoring and Notification

CDC Travel Planner

Please visit <https://www.cdc.gov/coronavirus/2019-ncov/travelers/travel-planner> & search for 'North Carolina' or review separate attachment for North Carolina's specific information.

Complicated COVID-19 Test Results and/or Vaccination Status and Air Travel

If a person has a positive test result they should be instructed not to fly until it can be confirmed they meet criteria to do so (i.e., have been released from isolation). This includes individuals who are fully vaccinated—vaccination status does not negate a positive test.



Antigen Testing

Local Health Departments should treat positive antigen test results as positive unless a PCR test returns a negative result. Antigen test results should be confirmed by PCR within 48 hours. While waiting for the PCR result, anyone with a positive antigen test result should isolate and ask their contacts to quarantine in the assumption that it's a true positive test.

Guidance on antigen test result interpretation and need for subsequent confirmatory testing in the context of symptoms and & COVID-19 exposure history: <https://www.cdc.gov/coronavirus/2019-ncov/lab/resources/antigen-tests-guidelines.html>

PCR Testing

Local Health Departments should treat positive PCR test results as positive—even if other test results are negative.

If Case Investigators have any questions or if the test results are complex or conflicting, they should consult with the Local Health Department's Nursing Supervisor.

Additionally, if it is suspected a case intends to fly despite their positive test and instructions not to do so while in isolation, the Movement, Monitoring, and Notification team (MMN.Team@dhhs.nc.gov) should be notified as a Do Not Board Order may need to be issued.

Find My Testing Place

Please review the updated 'Find My Testing Place LHD' Excel file weekly to ensure information is up to date and accurate. Please send the updated files or any related questions to SVC_Covid-19TestingSites@dhhs.nc.gov