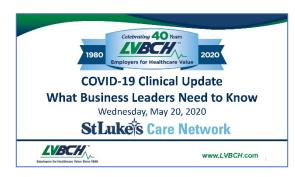


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COVID-19 Clinical Update: What Business Leaders Need to Know (May 20, 2020)



Dr. Ken Bertka Urges Employers to Encourage Sick Employees to Stay Home

To reduce the potential spread of COVID-19, business leaders should have policies that encourage employees to stay home when they do not feel well and should not rely on temperature readings alone, said Ken Bertka, MD, Vice President of Clinical Integration, St. Luke's Care Network.

A family physician by training, Dr. Bertka advised LVBCH member employers on what they should consider when planning to reopen. Regarding temperature checks, he informed them that many people who feel ill and test positive for the virus do not have a fever.

"When the COVID surge really started and we would do testing, it was pretty straight forward," he said. "We said you need to have to have a fever, a cough and shortness of breath and that has changed." Since then, the Centers for Disease Control (CDC) have expanded the list of COVID-19 symptoms to include chills, repeated shaking with chills, muscle pain, headache and sore throat. In addition, many people report a loss of taste or smell which appears to be distinctive of COVID-19 and not common of other illnesses.

While cough and shortness of breath are still considered primary symptoms, people with COVID-19 may or may not have a fever. Employers should consider this when deciding whether to do fever checks, he advised.

"People can come in with chills and a headache but not have a fever and still have COVID, particularly early on," he said. Meanwhile, 25 to 50% of people with the virus have no symptoms, minimal symptoms or atypical ones. For example a young woman who tested positive for COVID had diarrhea and abdominal pain but not respiratory symptoms or a fever. "The younger the patient, the more likely I need to be on alert for atypical symptoms," he said. "From a business perspective, if an employee doesn't feel right, they shouldn't come to work."

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Dr. Bertka stressed that COVID-19 is a highly contagious disease. Without taking steps to reduce its spread, a person with the virus would spread it three people, who in turn would spread it to three other people and so on. This is complicated by the fact that people without any symptoms can spread it to others. The incubation period for developing the illness after exposure is two to 14 days.

"This is a virus your body hasn't seen before so we're all at risk of catching it," he said. While everyone is equally likely to get COVID-19, its effect on any individual differs greatly."

About 90% of people who are aware they have COVID are treated in an outpatient setting, mainly at home, he said. About 10% are treated in the hospital and about 10% of them are treated in the intensive care unit. Older adults and people with chronic illnesses, particularly those that affect the respiratory or immune systems, are more likely to develop complications. Also, obesity itself appears to be a risk factor for poor outcomes.

He encouraged employers to expect and plan for employees getting COVID. "A facility is COVID-free only until it isn't," he said. "Somewhere, somehow, sometime, someone in your business is going to have COVID...What's your SWAT team when someone calls in with potentially COVID or someone gets sick at work. How do you get them out of the building as soon as possible? What do you do around their work area?"

Dr. Bertka encouraged employees to require universal masking, social distancing and enhanced sanitation. For additional resources regarding ways to protect employees, he suggested the CDC's Workplaces Decision Tool available at cdc.gov/coronavirus to the Pennsylvania Department of Health's COVID-19 Information for Businesses.

In regard to testing, Dr. Bertka explained there are two types of testing. Molecular or diagnostic detects the presence of the virus in the patient's system. "This test is not perfect," he said. "Specifically, there are significant numbers of false negatives. We have patients who we know have COVID, we test and the test comes back negative."

The other test type is serologic test, which detects COVID-19 antibodies to indicate whether someone has already had the virus. It is mainly used to estimate the prevalence of COVID-19 in the community. It is also used in the development and testing of vaccines.

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"Even if you have this antibody, we do not know if it's protective and if it is protective, we don't know how long it lasts," he said. "You should not feel like you are superman of superwoman and don't have to worry about masking and can do anything and go anywhere because you are immune because there is a good chance you aren't." He compared it to the common cold, which is caused by another variety of corona virus.

Dr. Bertka said that Pennsylvania Department of Health expects employers to have a plan to identify and notify employees who may have been exposed to an employee with COVID-19. Known as contact tracing, the employer must contact anyone the employee had close contact with, as defined as being within six feet for more than 10 minutes for 24 hours before the onset of symptoms.

Employers also must develop a plan for allowing employees to return to work after having COVID-19 or being exposed to it. There are two approaches, test-based and symptom based and both have their strengths and flaws.

Dr. Bertka said he expects a resurgence of COVID-19 in our area this fall, which will most likely be comingled with the flu, making it difficult to distinguish between the two. The challenges of the virus will continue until a vaccine is developed. The best case scenario is that it would be available late fall or winter and would first be available for first responders like police officers, fire fighters and health care workers. "The bottom line is COVID is going to be around," he said.



ABOUT DR. KEN BERTKA

Dr. Bertka, a family physician and clinical informaticist, is Vice President of Clinical Integration for St. Luke's Care Network - a clinically integrated network consisting of 10 hospitals, 300+ practices, 1,900 physicians/providers and several post-acute facilities across 10 counties in eastern PA and western NJ. Previously, Dr. Bertka was CMO of Integrated Health Network of WI, a multihealth system clinically integrated network. He held positions with Mercy Health in OH, including CMO of Mercy Health Physicians and Mercy's Clinically Integrated Network in northwest OH, and CMIO for the Northern Division of Catholic Health Partners. Dr. Bertka spent 20 years in a 5-physician family medicine practice, which he founded. He is immediate past president of the Council of Medical Specialty Societies, a past president of the Ohio Academy of Family Physicians (OAFP) and a past member of the Board of Directors of the American Academy of Family Physicians (AAFP).

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