Health Watch USA(sm) Public Comment: Dec. 20, 2023 PACCARB

We wish to alert the PACCARB regarding the newly proposed CDC recommendations which will almost assuredly promote the spread of bacterial and viral infections and worsen the epidemic of multi-drug-resistant organisms.

The proposed Enhanced Barrier Precautions for nursing homes are intended to contain MDROs but they allow patients colonized with MRSA, CRE and Candida auris to participate in normal facility activities. Staff are required to wear gowns and gloves with high-risk resident interactions, but even interactions with low risk of spread occur so frequently spread can occur. Enhanced Barrier Precautions are also not supported by the predicate data that they were once based upon.

It makes no sense to alert the nation regarding Candida auris outbreaks but at the same time to allow colonized patients to roam around a facility.

The CDC is also revising their 2007 Guidelines for Isolation Precautions and not uniformly recommending healthcare workers use of N95 masks when interacting with any and all patients infected with an airborne pathogen. This would include not requiring use for seasonal influenza. In addition, negative pressure rooms are not routinely required for MERS, SARS-CoV-1, influenza and SARS-CoV-2.

DRAFT: Transmission-Based Precautions to Prevent Transmission by Air

Category	Facemask or Respiratory Protection	Eye Protection	Airborne Infection Isolation Room (AIIR)	Example Pathogens
Routine Air Precautions	Medical/Surgical Facemask	Per Standard Precautions	Not routinely recommended	Seasonal coronavirus, Seasonal influenza
Novel Air Precautions	N95 respirator	Yes	Not routinely recommended	MERS, SARS-CoV-1, Pandemic-phase respiratory viruses (e.g., influenza, SARS-CoV-2)
Extended Air Precautions	N95 respirator	Per Standard Precautions	Yes	Tuberculosis, measles, varicella

Standard Precautions applies to all situations regardless of Transmission-Based Precautions used

Disclaimer: The findings and conclusions herein are draft and have not been formally disseminated by the Centers for Disease Control and Prevention and should not be construed to represent any agency determination or policy.

We feel this is a major step backwards in preparedness. We should be building negative pressure rooms and building our N95 supply chain and not discouraging their usage. Not using N95 masks for all airborne pathogens not only places workers and patients at risk but also decreases supply chain demand which will inhibit and shrink our manufacturing capability.

These recommendations also pose a grave risk to the immunocompromised patient who must obtain healthcare. A letter signed by the Massachusetts Nurses Association, National Nurses United, World Health Network, and other advocates including Health Watch USA(sm) is being submitted to the CDC. The letter underscores the importance of this problem and its apparent conflict with the Americans With Disability Act.

I would like to ask this committee to review these CDC recommendations and to help strengthen these proposals to protect both patients and healthcare workers.

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