



# Health Watch USA<sup>sm</sup> Newsletter

[www.healthwatchusa.org](http://www.healthwatchusa.org) June 1, 2021

Member of the National Quality Forum and a designated "Community Leader" for Value-Driven Healthcare by the U.S. Dept. of Health and Human Services

## *In the Month of May Health Watch USA<sup>sm</sup> has:*

- 5 articles/op-eds regarding COVID-19.
- 12 Radio Shows concerning the COVID-19 virus.
- 2 Public Presentation.

Our 2021 COVID-19 Conference Presentations and additional resources can be accessed from: <http://www.healthwatchusa.org/COVID19.htm> & [www.healthconference.org](http://www.healthconference.org)

## *Health Watch USA's June 15, 2021 Annual Conference:*

<http://www.healthconference.org>

*Health Watch USA's 2020 Activities Report:* <http://www.healthwatchusa.org/HWUSA-Officers/20201231-HWUSA-Report-2020.pdf>



## **Kavanagh KT. Why the COVID-19 6-foot rule isn't enough and how to return to a more normal life.**

The 6-foot rule no longer applies; the virus is airborne. In

poorly ventilated buildings, 60 feet is as safe as 6 feet away. These aerosols can be produced by talking, shouting and singing.

We need to reopen the state smartly. As a prerequisite, all public venues should be required to meet safe ventilation standards for airborne contagions. The public needs to embrace vaccinations and we need to be prepared for other waves of new variants. Hopefully, if we can lower the case rate in our state and manage small outbreaks with rapid and effective case tracking, only then will we be able to return to a more normal life. Courier Journal. May 13, 2021. **References** <https://www.courier-journal.com/story/opinion/2021/05/13/covid-social-distancing-isnt-enough-heres-how-to-reopen-safely/5030062001/>

## **Kentucky nursing home with deadly COVID-19 variant outbreak identified as Rowan facility.**

Dr. Kevin Kavanagh, a retired Somerset physician and chairman of Health Watch USA, a non-profit patient advocacy organization, said the impact of the virus could worsen for those who are vaccinated as more variants of COVID-19 develop and spread. Genome sequencing identified the strain as an "R.1" variant, or mutation, of COVID-19 that bore some similarities to variants identified in other countries but was not identical. The report said the mutation had not been previously identified in Kentucky. Kavanagh said the vaccine should be mandatory for staff who work at nursing homes. "No one has the right to inflict a devastating disease on a frail, elderly person who has entrusted their life to them," he said.

<https://www.courier-journal.com/story/news/local/2021/05/04/kentucky-nursing-home-deadly-covid-19-variant-outbreak-morehead-site/4935105001/>

## **Louisville health officials worried about post-Kentucky Derby spike in COVID-19 cases.**

Dr. Kevin Kavanagh, a retired Somerset physician and chairman of Health Watch USA, a non-profit patient advocacy organization, said he is concerned about the potential for the Derby and related events, such as

parties or crowds at bars, to increase the spread of COVID-19. He said he was particularly concerned about images from the weekend of people crowded together both inside and outdoors. "It's just a set-up for a super-spreader event," Kavanagh said. "If you get close to someone with COVID-19, even outdoors, you have a risk of getting infected." Moreover, the continuing spread of variants, or mutations of the virus — largely among unvaccinated people — increases the risk of catching a new, more contagious and possibly more dangerous form of COVID-19. "I know that's doom and gloom," he said. "We'll just have to wait a couple of weeks and see what happens." Courier Journal. May 4, 2021.

<https://www.courier-journal.com/story/news/local/2021/05/04/louisville-health-officials-worry-over-possible-post-kentucky-derby-covid-19-spike/7003404002/>

### **CDC cites COVID-19 outbreak at Kentucky nursing home in urging more staff to be vaccinated.**

"Still, Dr. Kevin Kavanagh, a retired Somerset physician and chairman of Health Watch USA, a non-profit patient advocacy organization, said it may be a luxury society can't afford as variants of COVID-19 spread that are considered more contagious and may be more deadly. "You shouldn't be allowed to advocate for your civil rights at the expense of elderly patients," he said. And as variants spread among largely unvaccinated people, so does the threat of another surge of COVID-19, he said. "I think we're going to be in for a huge rebound of the virus if people don't get vaccinated," he said. "

<https://www.courier-journal.com/story/news/local/2021/04/22/cdc-cites-kentucky-nursing-home-covid-19-outbreak-vaccination-push/7332528002/>



### **COVID-19 Model Says 905,289 Died of the Disease in U.S.**

Infection preventionists need to stress the importance of aerosolization with increased recommendations for N-95 masks and we all need to realize that a prerequisite of reopening a business, school or public venue should be safe

ventilation. Nowhere is safe inside a poorly ventilated building. The six-foot rule does not apply. Infection preventionists need to stress the importance of aerosolization with increased recommendations for N-95 masks and we all need to realize that a prerequisite of reopening a business, school or public venue should be safe ventilation with an increased number of complete air exchanges along with air sanitization. [References](#)

<https://www.infectioncontroltoday.com/view/covid-19-model-says-905-289-died-of-the-disease-in-u-s->

### **Infection Preventionists Must Ward Off a COVID Comeback.**

"What happens in India, or anywhere else in the world, doesn't stay there. The longer COVID-19 hangs around, the more chance it has of mutating into a variant that the vaccines won't stop. Policymakers have falsely equated outdoor safety, produced by the rapid dissipation of aerosols, with safety from droplets and have ill-advised not wearing masks at some outdoor events. This may be effective in suppressing community spread, but it will not afford adequate protection for the individual." [References](#) **Infection Control Today**. May. 4, 2021. <https://www.infectioncontroltoday.com/view/infection-preventionists-must-ward-off-a-covid-comeback>

### **Viewpoint: CDC Might Help COVID-19 Make a Comeback in U.S.**

The day before the publication of the modeling study's dire warning, the CDC abruptly removed mask and physical distancing requirements for those who are vaccinated. Unfortunately, this will probably also result in many unvaccinated individuals unmasking.

Those of you who advocate reopening at the peril of those who are vaccine hesitant—letting nature decide the fate of the ill-informed—need to remember that survival is not the same as recovery. Let's not be cavalier in our approach to a return to a new normal. Let's be smart and cautious. Continued masking and social distancing for

a few months, possibly just a few weeks, is a small price to pay to assure the safety of our nation. Infection Control Today. May 18, 2021. [References](#)

<https://www.infectioncontroltoday.com/view/viewpoint-cdc-might-help-covid-19-make-a-comeback-in-u-s->

### **U.S. Should View India as Cautionary Tale**

"India has the double mutation [COVID-19] variant. That's the variant that has two escape mutations. And that is a variant we do not need to get into the United States and have it spread. Infection preventionists need to be out there beating the drum. First in their facility: They need to get everybody vaccinated." If you sound the alarm, people may say in the United States everybody's fine. You're just a reactionist. But with the news coming from India, in seeing what's going on over there, they realize that we still need to exercise caution. And if we didn't take the steps we did last year, we certainly could have wound up just like India. India is an example of what happens if you depend upon the theory of herd immunity. And it is a disaster. Infection Control Today. May 5, 2021.

<https://www.infectioncontroltoday.com/view/u-s-should-view-india-as-cautionary-tale>

### **Seemingly Mixed Messages About Indian COVID-19 Variant Given.**

"As Infection Control Today® has been reporting, the CDC has been criticized for doling out information during the COVID-19 pandemic that has often been contradictory, when it's not been out and out wrong. Last October in a Q&A, Kevin Kavanagh, MD, a member of ICT®'s Editorial Advisory Board, said that "there have been a number of statements from the CDC or at least with the CDC label on it, which have been disturbing."

" Infection Control Today. May 12, 2021.

<https://www.infectioncontroltoday.com/view/seemingly-mixed-messages-about-indian-covid-19-variant-given>

### **CDC Relaxes Mask-Wearing Guidelines for Fully Vaccinated Individuals**

"Kevin Kavanagh, MD, a member of Infection Control Today®'s Editorial Advisory Board, recently wrote that the wearing of masks should continue until herd immunity is reached.

When contacted about the CDC announcement, Kavanagh told ICT® in an email exchange that people should approach the changed guidance with caution. "We still have over half of our population not fully vaccinated and one cannot tell who is and who is not vaccinated," Kavanagh said. "And because of aerosolization of the virus, how close you are to someone will not gauge indoor safety. Airflow and sanitization is of utmost importance." " Infection Control Today. May 13, 2021.

<https://www.infectioncontroltoday.com/view/cdc-relaxing-mask-wearing-guidelines-ap-reports>

### **CDC Study Might Nudge Vaccine Hesitant Health Care Workers**

As Kevin Kavanagh, MD, a member of ICT®'s Editorial Advisory Board (EAB) put it recently: "It's hard to convince a patient to become vaccinated when they were just escorted to the room with a nurse who did not have the vaccine." Infection Control Today. May 18 2021.

<https://www.infectioncontroltoday.com/view/cdc-study-might-nudge-vaccine-hesitant-health-care-workers>

### **Wuhan Lab Leak Called Viable Possibility for COVID-19 Pandemic**

Kevin Kavanagh, MD, a member of Infection Control Today®'s Editorial Advisory Board, says that "the assertion that the virus was purposefully released is probably not valid since the epicenter of the epidemic was in a highly populated portion of China and the country did not have a workable vaccine."

"There appears to be little doubt that, like the rest of the world, the Wuhan lab was experimenting on coronaviruses," says Kavanagh. "On May 11 of this year Senator Rand Paul questioned the White House regarding 'gain of function' research, research which would be expected to make the viruses more dangerous and more transmissible. This research was also mentioned in a presidential Fact Sheet: Activity at the Wuhan

Institute of Virology from the Trump Administration which apparently has not yet been refuted by the Biden Administration.”

Kavanagh says that “this subject of research in the Wuhan Lab has been almost taboo in the mainstream media. However, the construction of man-made (pseudo) virus is presently an exact science, with single amino acid substitutions possible. Similar to vaccine production, you just need to be able to input the genetic code you desire and a vaccine or pseudo-virus can be made.”

What Kavanagh refers to what he describes as a “chilling article” by authors affiliated with China's National Institutes for Food and Drug Control (NIFDC) and WHO Collaborating Center for Standardization and Evaluation of Biologicals. “This article describes a plethora of single amino acid substitutions in the spike protein from 106 pseudo-virus which resulted in ‘ten mutations such as N234Q, L452R, A475V, and V483A was markedly resistant to some mAbs’ and that ‘the dominant D614G itself and combined with other mutations are more infectious.’” The D614G variant was the dominant variant in the United States in 2020. Infection Control Today. May 18, 2021.

<https://www.infectioncontrolday.com/view/lab-leak-called-viable-possibility-for-covid-19-pandemic>

### **Memorial Day Musings in the Shadow of COVID-19**

As Kevin Kavanagh, MD, a member of Infection Control Today®'s (ICT®) Editorial Advisory Board (EAB) put it, we still don't know the actual number of health care workers who've died from COVID-19 because “no one is truly counting. The reporting of their deaths is voluntary.”

As Kavanagh has pointed out, surviving COVID-19 should not be the sole benchmark. Of the health care workers who've gotten mild to moderate COVID-19, between 10% and 30% can be expected to have long-term symptoms. “In addition, the reported deaths would mainly represent those who died in the acute phase of the illness,” Kavanagh says. “It has recently been reported that 8 deaths per 1000 of non-hospitalized cases of COVID-19 can occur between 30 to 180 days after diagnosis. These cases died from detrimental effects on multiple organs and may not have been counted as COVID-19 deaths. All of these frontline workers have given their lives and livelihood for our safety and need to be remembered during this Memorial Day.”

<https://www.infectioncontrolday.com/view/memorial-day-musings-in-the-shadow-of-covid-19>

## **Health Watch USA - Presentations**



### **COVID-19: Infection Control in the Ambulatory Care Setting During a Pandemic.**

Sonja Rivera Saenz, MPH, Infection Control Director at Atrius Health, discusses challenges and strategies regarding the control and prevention of the spread of COVID-19 in the ambulatory care setting. Health Watch USA Meeting. May 19, 2021. <https://youtu.be/pxiuS3r4eJM>

## **Radio / Podcasts**

### **May 3, 2021. COVID-19: Lessons From India & Misinformation of Vaccine Shedding**

Dr. Kevin Kavanagh from Health Watch USA<sup>sm</sup> discusses lessons all should learn from India, including:

1. The virus is real and much more dangerous than the flu.
2. Hydroxychloroquine which is used to treat malaria doesn't appear to have a huge effect on the India epidemic.
3. Large religious and political gatherings, even if outdoors will spread the virus.
4. There is a huge price to pay for herd immunity which because of the ever mutating virus will probably never be achieved.
5. The entire world must control the virus or no country will be safe. The CDC needs support and funding for foreign outreach and support.

In addition, the rates of vaccine hesitancy in the United States are disturbing with almost half of the armed forces and over half of law enforcement being vaccine hesitant. And new misinformation regarding vaccines, such as vaccine shedding are also discussed. Jack Pattie Show. (6:47). <https://youtu.be/r2QGi-Gfsac>

### **COVID-19: CDC Recognizes The Virus Can Aerosolize - Its Airborne**

Dr. Kevin Kavanagh from Health Watch USA(sm) discusses the CDC's new web-posting on Friday May 7, 2021 which clearly describes the risks of aerosolization and that the virus can spread farther than 6 feet from infected individuals. Indoors it can float around in a building and nowhere would be truly safe. Outdoors these aerosols rapidly dissipate but large droplet spread within 6 feet can still occur. Currently, there have been up to 900,000 deaths in the United States as reported by IHME. <http://www.healthdata.org/special-analysis/estimation-excess-mortality-due-covid-19-and-scalars-reported-covid-19-deaths> We all need to become vaccinated. Jack Pattie Show. WVLK AM 590. May 10, 2021. (4:31) <https://youtu.be/LBeZaUYWM6c>

### **COVID-19: Is The CDC's New Mask Guidance Too Cavalier?**

Dr. Kevin Kavanagh from Health Watch USA(sm) expresses concern regarding the new CDC guidance which does not require vaccinated individuals to wear masks indoors. He agrees with the states of New Jersey, North Carolina and Massachusetts which are still keeping the indoor mask mandate. This position change comes on the heels of Dr. Nancy Messonnier's resignation which was effective today. The United States has not dealt with the immune escape variants and only a little over a third of our population is vaccinated. In addition, ventilation needs to be upgraded in buildings and a mechanism for verification of vaccination needs to be implemented. We also appear to have lowered the bar on what is good public health. Survival does not equate with recovery and severe sequelae from long haulers' syndrome is all too common. Even if vaccinated I do not want to become sick for a week with a variant just because I entered a restaurant to buy a \$5 hamburger. We can do better than this. Jack Pattie Show. May 14, 2021. WVLK AM 590. (15:16) [https://youtu.be/X5\\_7BljQENk](https://youtu.be/X5_7BljQENk)

### **COVID-19: USA Unmasking. Are We Moving Too Fast?**

Dr. Kevin Kavanagh from Health Watch USA(sm) discusses the CDC's unexpected announcement of no longer recommending the wearing of masks indoors for vaccinated individuals. This caught many policymakers by surprise since just two days prior a modeling study published in the CDC MMWR predicted that there may be a surge in hospitalizations and deaths if masking was no longer used as a preventative measure. With only a little over a third of our population fully vaccinated, some have justified this discussion by stating, those at risk have chosen not to be vaccinated. But this ignores the dangers of the India Variant which now has a strong foothold in the United Kingdom and the ravages and disability costs of long COVID. But most importantly this is simply unethical. Jack Pattie Show. May 17, 2021. WVLK AM 590. (5:58) <https://youtu.be/D7f6dsXkOWU>

# COVID-19 Articles of Interest

## **CDC acknowledges airborne transmission**

"Federal health officials revised coronavirus guidance on Friday to acknowledge that people can get infected by inhaling very fine, aerosolized particles carrying the virus, following warnings from health experts since last year. The Centers for Disease Control and Prevention advised that airborne transmission is one of several ways the virus can spread, adding that people more than six feet away from others indoors can become infected, according to the agency's website. Epidemiologists have pushed for worldwide recognition that the virus can be transmitted by inhalation, saying improved ventilation and other airborne-specific mitigation measures could curb outbreaks."

<https://www.washingtonpost.com/nation/2021/05/07/coronavirus-covid-live-updates-us/>

**CDC: "The principal mode by which people are infected with SARS-CoV-2** (the virus that causes COVID-19) is through exposure to respiratory fluids carrying infectious virus. Exposure occurs in three principal ways: (1) inhalation of very fine respiratory droplets and aerosol particles, (2) deposition of respiratory droplets and particles on exposed mucous membranes in the mouth, nose, or eye by direct splashes and sprays, and (3) touching mucous membranes with hands that have been soiled either directly by virus-containing respiratory fluids or indirectly by touching surfaces with virus on them."

<https://www.cdc.gov/coronavirus/2019-ncov/science/science-briefs/sars-cov-2-transmission.html>

## **Modeling of Future COVID-19 Cases, Hospitalizations, and Deaths, by Vaccination Rates and Nonpharmaceutical Intervention Scenarios — United States, April–September 2021**

"Among the four scenarios, an accelerated decline in NPI (public health policies, such as physical distancing and masking) adherence (which encapsulates NPI mandates and population behavior) was shown to undermine vaccination-related gains over the subsequent 2–3 months and, in combination with increased transmissibility of new variants, could lead to surges in cases, hospitalizations, and deaths."

<https://www.cdc.gov/mmwr/volumes/70/wr/mm7019e3.htm>

### **Epidemiologists on How Long They Thought We'd Be Wearing Masks Indoors**

If you had to predict, how long will Americans need to wear masks when indoors with people whose vaccination status they don't know?



Based on responses by 570 academic and applied epidemiologists. The informal survey was conducted from April 28 to May 10.

### **Hundreds of Epidemiologists Expected Mask-Wearing in Public for at Least a Year**

The responses came from 723 epidemiologists, submitted between April 28 and May 10, before the new guidance from the Centers for Disease Control and Prevention. In the informal survey, 80 percent said they thought Americans would need to wear masks in public indoor places for at least another year. Just 5 percent said people would no longer need to wear masks indoors by this summer. In large crowds outdoors, like at a concert or

protest, 88 percent of the epidemiologists said it was necessary even for fully vaccinated people to wear masks.

<https://www.nytimes.com/2021/05/13/upshot/epidemiologists-coronavirus-masks.html>

## **Covid-19: Researchers find higher than expected reinfections with P.1 variant among the Brazilian Amazon**

A study of blood donors in the city of Manaus has found that 1 in 6 of those infected with the coronavirus were reinfected with the P.1 variant. The results were higher than researchers anticipated and those found in studies



of reinfections conducted elsewhere. The study suggests that reinfections with P.1 are more common than researchers had previously thought and confirms the theory that herd immunity through natural infection is impossible, said Ester Sabino, the study's lead author and associate professor at the Institute of Tropical Medicine at the University of São Paulo School of Medicine. BMJ 2021; 373 doi: <https://doi.org/10.1136/bmj.n1353>

### **Natural Acquisition Versus Vaccine – Which is More Effective?**

According to Felgner, the antibody response induced from natural exposure is not nearly as high as that induced by the vaccine, so those who had COVID-19 should still get the vaccine to improve their immunity. People previously exposed to the virus respond better to the vaccine and have stronger immunity than those never infected before; however, Felgner says those who never had the virus also will receive much higher antibody levels once they receive the vaccine. The mRNA vaccines' antibody responses also may protect against emerging variants, said Felgner. <https://innovation.uci.edu/2021/05/natural-acquisition-versus-vaccine-which-is-more-effective/>

### **Substantial Differences in SARS-CoV-2 Antibody Responses Elicited by Natural Infection and mRNA Vaccination.**

Antibody titers determined by serial dilution of the specimens were used to accurately compare antibody levels in these samples. mRNA vaccinees after the boost have higher Ab titers (up to 10 times higher) than convalescent plasmas from donors who recovered from natural infection. The results of this study exemplify the time course and outcomes expected from similar mRNA mass vaccination campaigns conducted in other institutions. <https://www.biorxiv.org/content/10.1101/2021.04.15.440089v2>. Updated Article: <https://www.biorxiv.org/content/10.1101/2021.04.15.440089v4>



## COVID-19 Lessons Learned: A Global Perspective

**Health Watch USA<sup>sm</sup> &  
Massachusetts Nurses Association**

**Webinar June 15<sup>th</sup>, 2021**

### Morning Presentations [AM Agenda:](#)



- **Keynote Address:** Dr. Carolyn Clancy has served as Acting Deputy Secretary, US Department of Veterans Affairs since January 20, 2021. Previously she served as the Assistant Under Secretary for Health for Discovery, Education and Affiliate Networks. She has also served as the Veterans Health Administration (VHA) Executive in Charge. [Download biography](#)
- **Australia:** Dr. Imogen Mitchell Clinical Director of the ACT COVID-19 Response and Executive Director of Research and Academic Partnerships, Canberra Health Services Canberra, Australia. <https://medicalschoool.anu.edu.au/people/academics/professor-imogen-mitchell>
- **United Kingdom:** Dr. Stephanie Dancer is a Consultant Microbiologist in NHS Lanarkshire and Professor of Microbiology at Edinburgh Napier University, Scotland. She has been editing the Journal of Hospital Infection for 20 years, five of them as Editor-In-Chief. She also edits for International Journal of Antimicrobial Agents and Infection, Disease & Health. <https://www.napier.ac.uk/people/stephanie-dancer>
- **Singapore:** Dr. Matthias Maiwald is a Senior Consultant and the Head of Service, Microbiology, at KK Women's and Children's Hospital, and an Adjunct Associate Professor at the Department of Microbiology and Immunology, National University of Singapore, and at Duke-National University of Singapore Graduate Medical School in Singapore.
- **Spain:** Dr. Jesus Rodriguez-Baño is the immediate Past President of the ESCMID (European Society of Clinical Microbiology and Infectious Diseases) and Associate Editor of Clinical Microbiology and Infection, Spain.
- **Germany:** Dr. Sebastian Hoehl is a Pediatrician and aspiring Virologist at the University Hospital Frankfurt am Main, Goethe University. He has been leading investigations on SARS-CoV-2 transmission, and as early February 2020, identified asymptomatic spread. <https://www.latimes.com/science/story/2020-02-18/report-shows-limits-of-coronavirus-screening>
- **Kenya:** Dr. Paul Yonga currently serves as a Consultant in International Health for EASO and EU Member States and is also an Infectious Disease Consultant at the CA Medlynks Tropical/Travel Medicine & Infectious Diseases Clinic in Nairobi, Kenya, and the Fountain Health Care Hospital in Eldoret, Kenya. He is experienced with HIV, HIV preventive



services, as well as infectious disease and tropical/travel medicine clinical and research activities in the East and Central African region.

- **United States:** Dr. Kevin Kavanagh has been an Associate Editor for the Journal of Patient Safety since July 2014 and is a member of Infection Control Today's Editorial Board. He serves on the Centers for Medicaid and Medicare Services' Hospital Harm/Hospital-Acquired Condition Technical Expert Panel; the AHRQ HEOR Study Section and also serves on the National Quality Forum's Consensus Standards Approval Committee.

## Afternoon Speakers [PM Agenda:](#)

- **USA:** Jeannie P. Cimiotti, PhD, RNUSA, Associate Professor in the Nell Hodgson Woodruff School of Nursing. She is an internationally recognized Health Services Researcher with expertise in nurse workforce issues and the quality of patient care. Her research has been cited for its expertise on nurse outcomes such as job dissatisfaction, burnout and patient outcomes, specifically healthcare-associated infections and the sequela of infection such as extended lengths of stay, hospital readmissions, and mortality.  
<https://www.nursing.emory.edu/faculty-staff/jeannie-p-cimiotti>

### Additional Afternoon Speakers

- Christine Pontus, MS, RN, COHN-S/CCM, MNA Health & Safety
- Michele Cellai, DNP, ANP-BC
- Jodi Roberts, FNP-BC

## Continuing Education

The conference has two accreditation agencies.

- **Massachusetts Nurses Association:**

*Nursing Credits* for the morning and afternoon session will be provided by the MNA.

- **Southern Kentucky AHEC:**

*Physician/Nursing Home Administrator:* This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Southern Kentucky Area Health Education Center (AHEC), Massachusetts Nurses Association, and Health Watch USA. Southern KY AHEC is accredited by the Kentucky Medical Association to provide continuing medical education for physicians.

The Southern KY Area Health Education Center is accredited by the Kentucky Medical Association (KMA) to sponsor continuing medical education for physicians. The Southern KY Area Health Education Center designates this live activity for a maximum of 4.0 AMA PRA Category 1 Credit(s)<sup>™</sup>. Physicians should claim only the credit commensurate with

the extent of their participation in the activity.

*PA/Nurse Practitioner:* This program has been approved by the Southern KY AHEC for AMA Category 1 credit. Non-Physician attendance will be awarded.

*Occupational Therapy:* This program has been submitted to the Kentucky Board of Licensure for Occupational Therapy for credit. (Credit Pending)

*Physical Therapy:* This course has been approved by the Kentucky Physical Therapy Association for continued competency requirements.

*Respiratory:* This program has been approved by the Kentucky Board of Respiratory Care.

*Radiology:* This program has been submitted to the Kentucky Board of Medical Imaging and Radiation Therapy. (Credit Pending)

**Conference Webpage:** <http://www.healthconference.org>

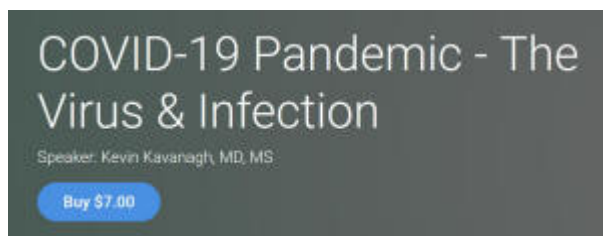
**Conference Agenda -- Morning:** [https://www.healthconference.org/healthconference.org-files/2021Conference\\_downloads/June 15 Covid Lesons Learned AM-Schedule-Final-4.pdf](https://www.healthconference.org/healthconference.org-files/2021Conference_downloads/June_15_Covid_Lesons_Learned_AM-Schedule-Final-4.pdf)

**Conference Agenda -- Afternoon:** [https://www.healthconference.org/healthconference.org-files/2021Conference\\_downloads/June 15 p.m. schedule.pdf](https://www.healthconference.org/healthconference.org-files/2021Conference_downloads/June_15_p.m._schedule.pdf)

**Conference Brochure:** [https://www.healthconference.org/healthconference.org-files/2021Conference\\_downloads/\\_20210615-HWUSA\\_Brochure-6.pdf](https://www.healthconference.org/healthconference.org-files/2021Conference_downloads/_20210615-HWUSA_Brochure-6.pdf)

**To Register for the Conference and for Continuing Education Credits (No Charge):** [https://webinar-portal.net/webinars/mna/registration\\_210615.php](https://webinar-portal.net/webinars/mna/registration_210615.php)  
(Registration is supported by the Massachusetts Nurses Association and Health Watch USA.)

## COVID-19 Education Courses



### **COVID-19 Pandemic - The Virus & Infection:**

Available for this course are 1 Hour CE/CME for Category 1 AMA Credits & Kentucky Board of Nursing (KBN), also Physical Therapy Credits. **Southern Kentucky AHEC.** To take the course go to: <https://sokyahec.thinkific.com/courses/covid-virus>



### **COVID-19 The Need for the Public To Embrace Public Health Strategies - Past Course**

Dr. Kevin Kavanagh from Health Watch USA<sup>sm</sup> discusses reasons why the public has not embraced public health guidance. They include, overstatement of treatment efficacy, mixed messaging regarding the use of masks, testing for asymptomatic carriers and aerosolization of COVID-19. In addition, false narratives (that herd immunity can be achieved with few deaths, COVID-19 is no deadlier than the flu and children do not become sick) are discussed. Finally, ways of retorting misinformation with examples given

regarding the effectiveness of the Zelenko Protocol and use of facial masks. Nov. 12, 2020. Kentucky Rural Health Association. <https://youtu.be/G7OUYGWAatA>



### **COVID 19: History of Ineffective Infectious Disease Policy - Past Course**

Dr. Kevin Kavanagh from Health Watch USA<sup>sm</sup> updates his previous lecture which traces the history of the United States' response to the COVID-19 epidemic. A historical perspective is given, covering President George Bush's 2005 proposal of the Pandemic and All-Hazards Preparedness Act to the disastrous second peak of the first wave with continued shortages of medical supplies and the changing federal advisements on

asymptomatic spread, viral aerosolization and use of masks. Treatments are reviewed along with overstatements of efficacy. Finally, vaccines are discussed along with the review process and distribution barriers. Sept. 29, 2020.

[Download Presentation Slides](#) YouTube Video: <https://youtu.be/xA7pR2bDAes>

### **The COVID-19 Pandemic, The Virus & Infection: Health Watch USA<sup>sm</sup> - Past Course**

1) COVID-19: Survivability And The Prevention of Spread. The course discusses the survivability of SARS-CoV-2 (COVID-19 Virus) in the environment (surfaces, sunlight, humidity, heat) and with different types of hand sanitizers. The course also describes research behind the use of masks, eye protection and social distancing along with data indicating the virus may be airborne or aerosolized more commonly than thought. Finally, risks and mitigating strategies are described in various retail and community venues.

2) COVID-19 Characteristics of the Virus, Symptoms & Long-Term Disability: The course discusses the characteristics of the SARS-CoV-2 virus along with the body's immune response and dwindling prospects for herd immunity. Characteristics of COVID-19 along with protracted recovery and disability is also discussed.

3) COVID-19: Presentation In Children and When To Open Schools: The course discusses the various presentations of COVID-19 in children, and the risk of childhood transmission to and infections of adults. Current guidance on opening of schools along with international experience on school openings is also discussed.

Video Link: <https://youtu.be/Y4p6C0mORiM>

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