Faculty Helping Faculty:  
**A Public Health Perspective on ‘Ramping Up’ at McGill**

The purpose of the session was to discuss principles that relate to the practical considerations of ramping up from a public health perspective. The slides presented by Dr. David Buckeridge, can be found [here](#).

**Possible outcomes of the pandemic:**

1. *Eradication* (e.g., SARS, smallpox),
2. *Elimination* (e.g., malaria in Canada – see MacLean JD and Ward BJ. The return of swamp fever: malaria in Canadians. CMAJ 1999;160:211-212.)
3. *Control* (e.g., influenza)

**Until then...**

- Hope for a vaccine, maybe a treatment
- Keep an eye on studies of immunity and virus mutation

**Take-Home Messages:**

- Pre-symptomatic spread means that everyone must be considered potentially infectious. Thus, we must **strictly adhere** to social distancing and hygiene in all our interactions
  - Social distancing: means distance in space and time. More distance is safer, 2 m is a minimum.
  - Hygiene: coughing & sneezing into your arm, frequent hand washing, avoid touching your face
- If you have any inkling of a symptom - **DO NOT COME TO WORK!**
- Environmental spread can occur through droplet-contaminated surfaces; wipe down frequently touched equipment regularly

**Typical Course of Infection in a Person**

**Sources of New Infections in a Population**
Helpful Resources

- Health Canada has a COVID-19 symptoms tracker app - anyone can download the app and enter their symptoms and the app will recommend whether they should seek testing, self-isolate, etc. It might be helpful to recommend that those returning to labs consider using this app to obtain the most up-to-date guidance.

Q & A

What adjustments should be made in the lab while waiting for test results?
- If people have been properly social distancing and have followed established cleaning and hygiene guidelines, it does not necessarily mean everyone has to stay home. However, it may be appropriate to ask people who may have been in close contact with the potentially infected person to stay home pending confirmation of the diagnosis.

Confidentiality
- Individuals can self-disclose, but they are not required to do so beyond completing a confidential webform on the McGill website. Do not disclose the names of those infected or wondering if they are infected, even within your own team. However, you can inform your lab team in general terms that they may have been exposed to someone with the infection. Contact tracing is the responsibility of Public Health; they do this in a manner that protects confidentiality. People who believe they may be infected should call the provincial help line for guidance about isolation, testing and when to seek treatment.

Buildings – if a positive case is identified in a building?
- If it is a single case, it may not lead to an entire building being shut down, but it will depend on the building. An “outbreak” (multiple related cases) in a building would have a bigger impact on building restrictions.
- Spread through ventilation systems is more of an issue if there are a lot of people in close proximity (restaurants, for example). Generally speaking, droplets do not travel more than 2m.

What symptoms should lead to staying home and for how long?
- Fever, dry cough, gastrointestinal symptoms, sudden loss of smell, sore throat.
- If test is positive return to work must occur following the advice of Public Health, but will generally be once they are asymptomatic and have a negative test.
Other questions from the discussion

- If working in shifts, if someone from AM shift is infected, is the PM shift considered exposed?
  - Generally no, unless high-touch surfaces were not cleaned between shifts.
- Are there concerns about closed buildings versus those with windows that open?
  - There is not great evidence about this.
- Are the frequent air exchanges in labs an asset or liability?
  - Both, in the sense they can move around droplets, but they also decrease the time that droplets may be suspended in the local area.
- How effective do you think vaccines or treatments are likely to be given past history with coronaviruses?
  - Better answered by someone with this expertise...
- Are symptoms that are consistent with allergies sufficient for a test?
  - Generally, no.
- Does the likelihood of having exposed others influence the decision to be tested or not?
  - If symptomatic, contact Public Health for advice on testing
- What is the current delay for test results? Are they going to ramp up testing and how much?
  - Increased testing is planned; how much capacity can be added is not yet clear
- How should the graduate student act if their housemate/partner experiences an allergy or cold-like symptoms?
  - Within a household, distancing and hygiene will reduce risk of infection even in the absence of symptoms, and definitely in the presence of potential symptoms.
- What should be max length of time for one to be in the lab?
  - The risk of infection increases with the time spent in close proximity to others
- What happened if a research staff’s daughter is sick for a few days (with cough/ cold symptoms) but the parents have no symptoms? Can we request COVID testing for the staff?
  - Lab directors/PI’s are not in a position to request COVID testing for anyone. If people seek your opinion about their symptoms, advise them to stay home if any symptoms and have them call the provincial information line for advice on next steps. Those living with a COVID-positive individual will be contacted by Public Health; they should stay home until they are cleared by Public Health.
- How would you advise individuals with mild symptoms (e.g. malaise, sore throat, but no fever) but who cannot get a test? Do they still have to wait 14 days before returning to work, even though they may not have been positive in reality?
  - They should contact Public Health to get advice on testing and/or when it is safe to return to work.