

June 1: COVID-19 Clinical Update Survey, Serology Testing for Physicians and Pediatric Inflammatory Syndrome

In today's issue, you will find information about the upcoming COVID-19 Response and Reactivation Survey that will guide future decisions at Northwestern Medicine as we navigate the pandemic. You will also find out more about the serology testing being offered to physicians and staff across NM, and learn about multisystem inflammatory syndrome in children, which may be associated with COVID-19.

COVID-19 RESPONSE AND REACTIVATION SURVEY OPENS JUNE 2

A group of employed and independent physicians will receive an emailed survey on Tuesday, June 2, to share your feedback about your experience with COVID-19 response and reactivation efforts.

There is no quick fix to some of the current challenges, but your responses to the COVID-19 survey will inform efforts to help keep NM a safe, healthy and supportive place to work and receive care during this time of uncertainty.

Look for an email from "Northwestern Memorial HealthCare <northwesternmedicine@express.medallia.com>" with the subject line, "Your COVID-19 Survey." The survey closes Monday, June 8.

For more information about the survey, visit the <u>Your Feedback Makes Us Better</u> page on NM Interactive (*login required*). If you have additional questions, please email physicianengagement@nm.org.

SEROLOGY TESTING

Serology testing is now available for all employed physicians, private physicians who are part of Northwestern Medicine Physician Network and active on the medical staff of an NM hospital, residents and medical students at no cost. You will also have the opportunity to participate in a Northwestern University research study. The test is voluntary, and participation in the study is optional. The study is designed to help scientists understand the presence of antibodies, and their potential protective properties, in people working in a variety of clinical, administrative and support roles.

Serum banking in the Central Region

While you can get a serology test at all NM testing locations, serum banking for use in the research study is only offered on the downtown campus. Visit the following locations if you have signed up for the study and are interested in potentially banking your samples, depending on your assigned date:

- June 1 to 7: Third floor Conference Center in Prentice Women's Hospital.
- June 8 to 30: Diagnostic Testing Centers on the second floor of Arkes Pavilion or the 17th floor of Lavin Family Pavilion.

Physicians who primarily work within hospitals should receive an email by today, Monday, June 1. Additional groups will roll out over the next few weeks in stages. The email will include links to reserve a testing time and details about the NU study. Please do not forward this e-mail to others, as all NM staff and physicians have a unique identifier for this process.

View more <u>information about serology testing</u> and find testing resources on <u>Physician Forum</u> and <u>NM Interactive</u> (*login required*).

Direct questions to MyNM Service Center by calling 312.926.HELP (4357). Please note that this serology testing is not being conducted through NM Corporate Health.

INFLAMMATORY SYNDROME IN COVID-19 PEDIATRIC PATIENTS

Multisystem inflammatory syndrome in children (MIS-C, also known as PMIS in Europe) is an emerging serious illness that appears to be related to COVID-19 infection. Mostly affecting schoolaged children and adolescents, some children with MIS-C can have some clinical features of Kawasaki disease, such as a prolonged fever, rash and conjunctival injection. The primary MIS-C signs and symptoms help distinguish it from Kawasaki disease, and these are:

- Severe abdominal pain
- Hypotension and myocardial dysfunction
- Lymphopenia
- Markedly elevated cardiac damage markers (NT-pro-BNP levels are often more than 10,000 pg/ml)

The Centers for Disease Control and Prevention issued a <u>Health Advisory</u> on May 14 to look for MIS-C due to a spike in cases in COVID-19 hot spots like New York and the United Kingdom. The majority of reported MIS-C cases tested positive for SARS-CoV-2 or its antibodies. Most children recover with supportive care, which may include intravenous gammaglobulin and corticosteroid therapy, although some can require intensive care support and even ECMO in rare cases.

Some patients with MIS-C show mild coronary artery dilation and, in rare cases, aneurysms. However, it's unclear whether children who developed aneurysms actually had Kawasaki disease rather than MIS-C, as full laboratory assessments of these patients have not been reported.

Multicenter research studies are underway to better understand whether MIS-C is a form of acute COVID-19 infection, a post-infectious complication or something else. The largest study of COVID-19 in children so far, published in *Pediatrics*, shows that children are much less likely than adults to develop a serious illness resulting from COVID-19, but more clarity around the pathogenesis and clinical course of MIS-C is needed to improve treatment of this syndrome.

Thank you to all Northwestern Medicine healthcare providers on the front lines of this crisis for your continued dedication and collaboration in providing exceptional care to the patients and communities we serve. If you have any questions or would like to share the story of an NM hero, please email us at covid-19md@nm.org.

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Gary A. Noskin, MD
Senior Vice President, Quality
Northwestern Memorial HealthCare
Chief Medical Officer
Northwestern Memorial Hospital