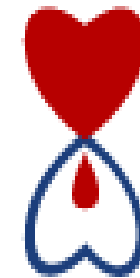


Tulane University
SCHOOL OF MEDICINE



DAILY REPORTS
31 MARCH 2020



THE BLOOD CENTER

Serving you for life!

LOUISIANA

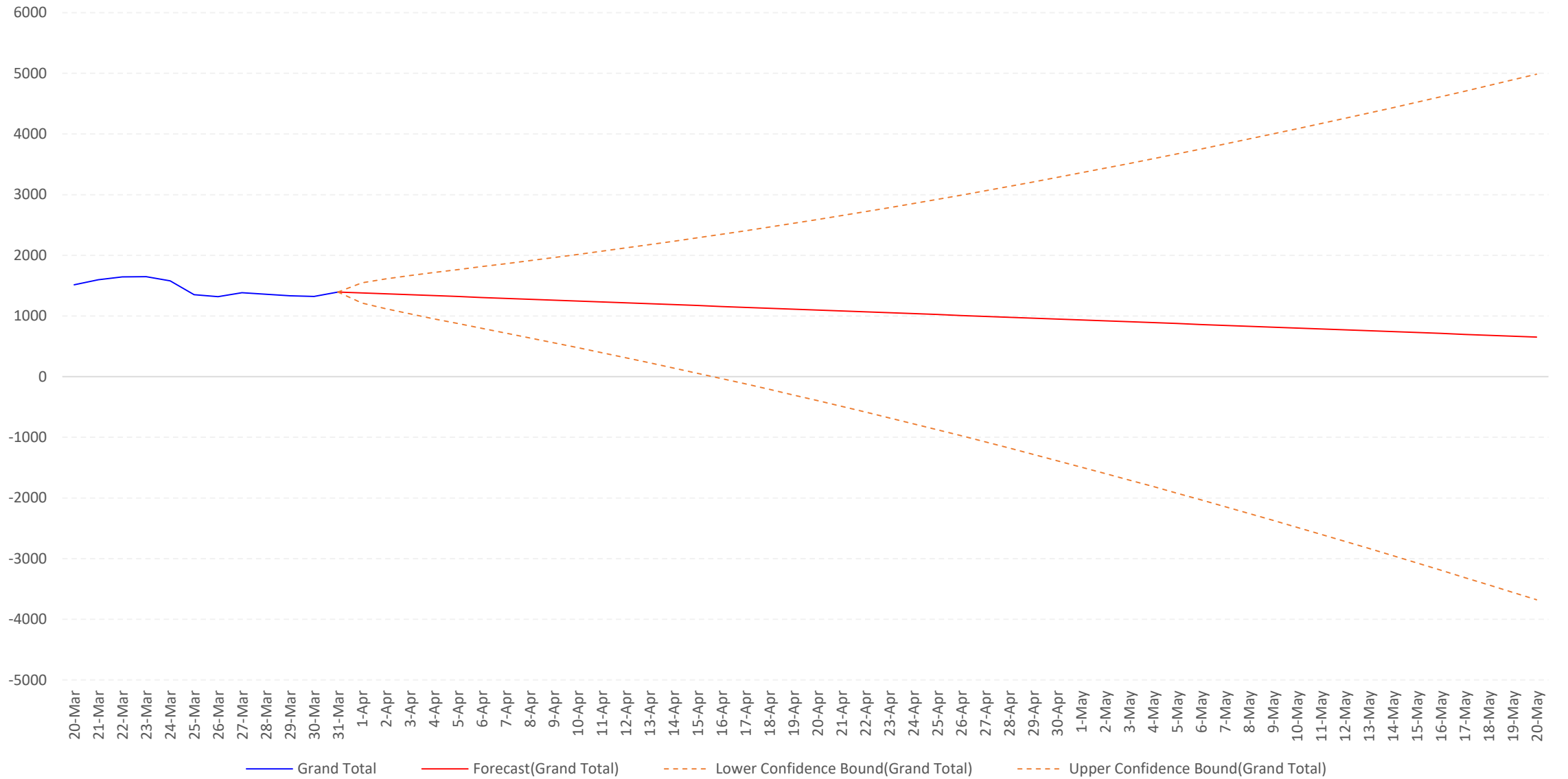
EMERGENCY RESPONSE NETWORK

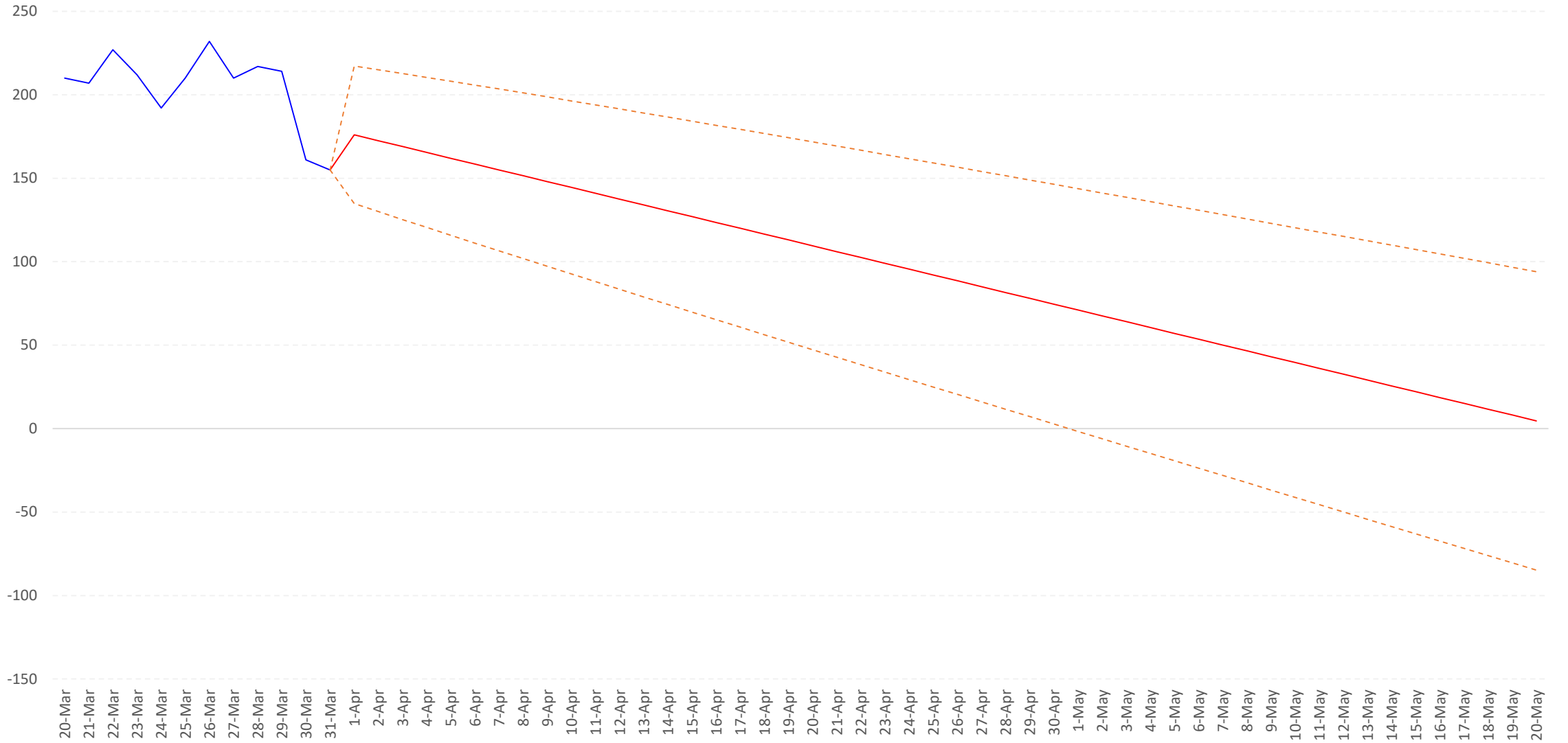


Utilization of Total Beds in Louisiana Hospitals

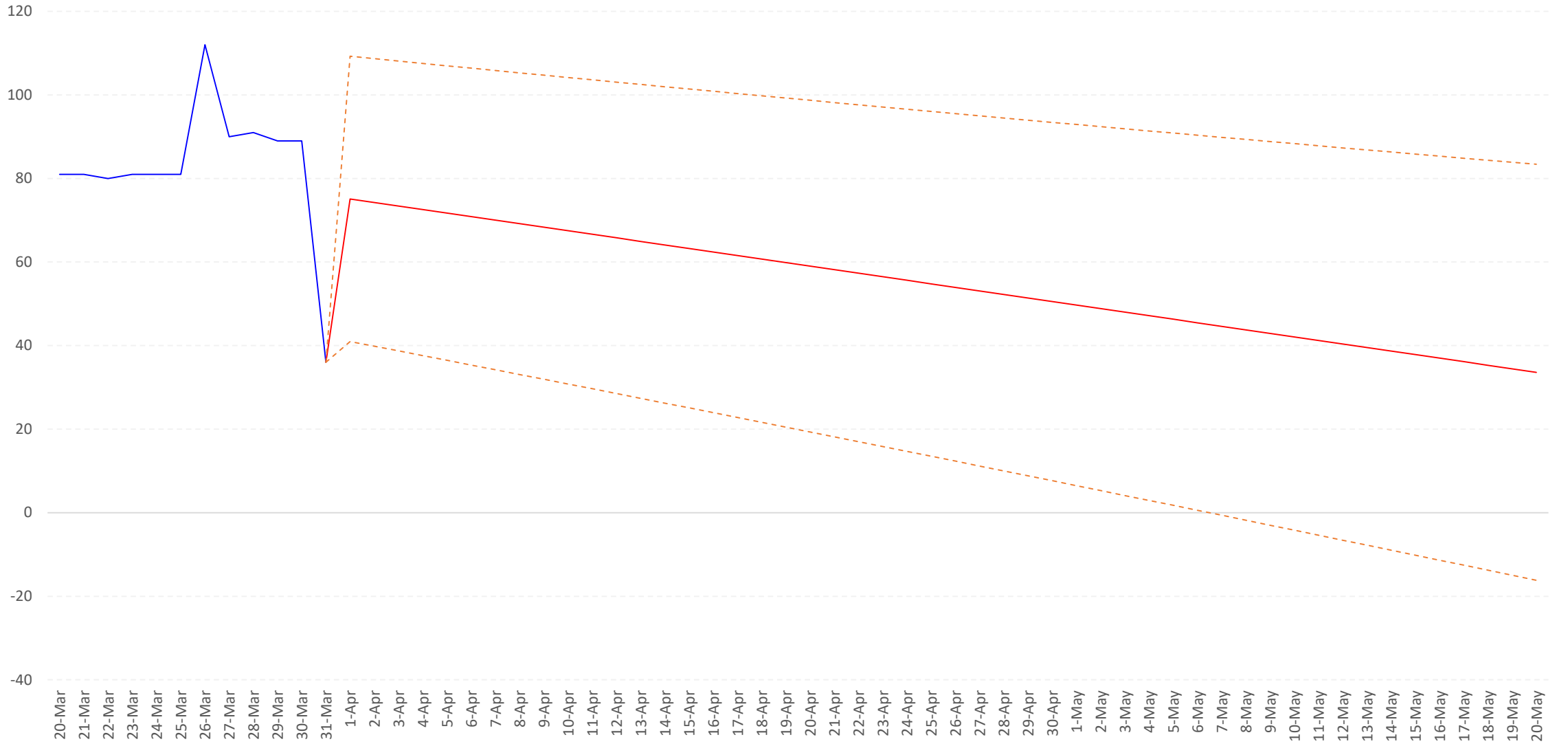


**Predicted hospital bed full
saturation**

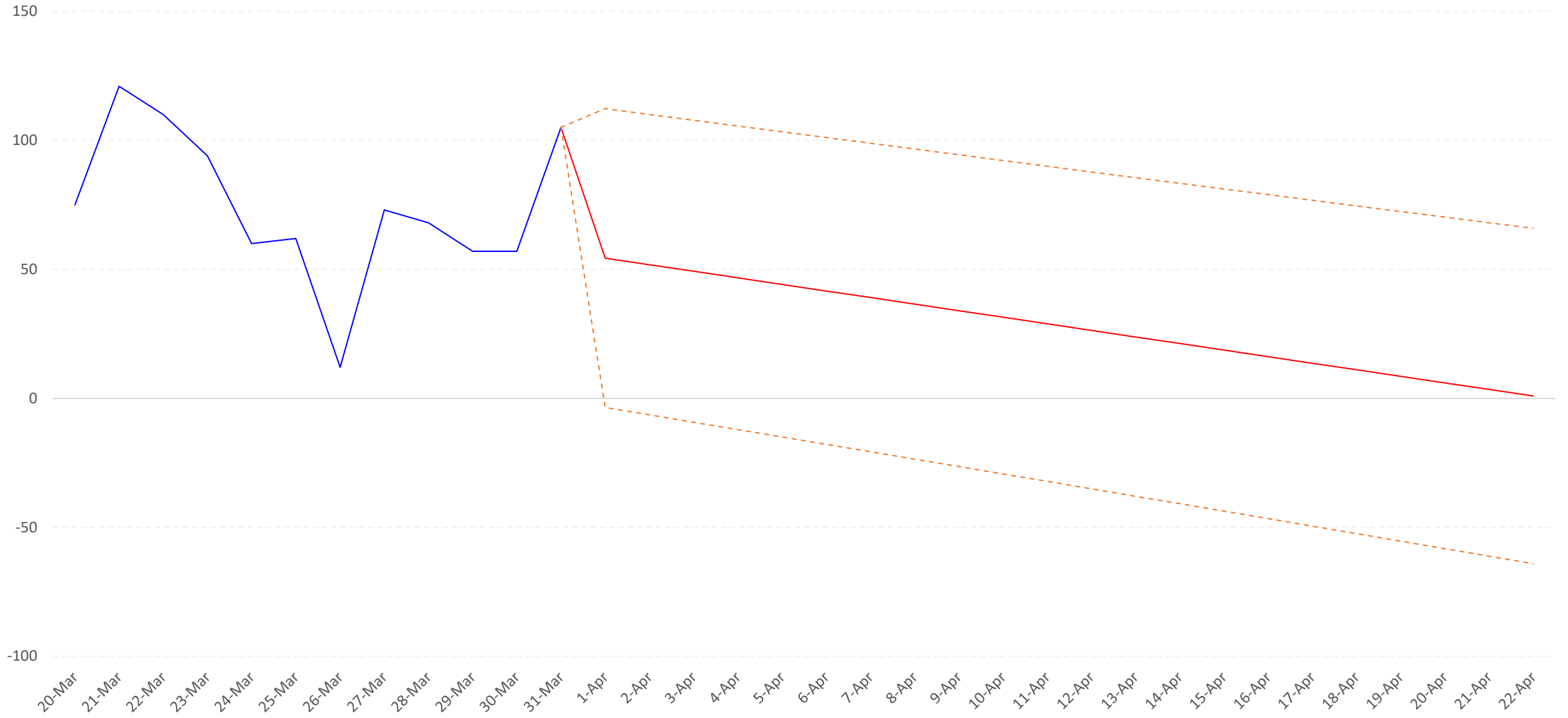




— Ochsner Medical Center
 — Forecast(Ochsner Medical Center)
 - - - Lower Confidence Bound(Ochsner Medical Center)
 - - - Upper Confidence Bound(Ochsner Medical Center)



— Tulane Medical Center
 — Forecast(Tulane Medical Center)
 - - - Lower Confidence Bound(Tulane Medical Center)
 - - - Upper Confidence Bound(Tulane Medical Center)

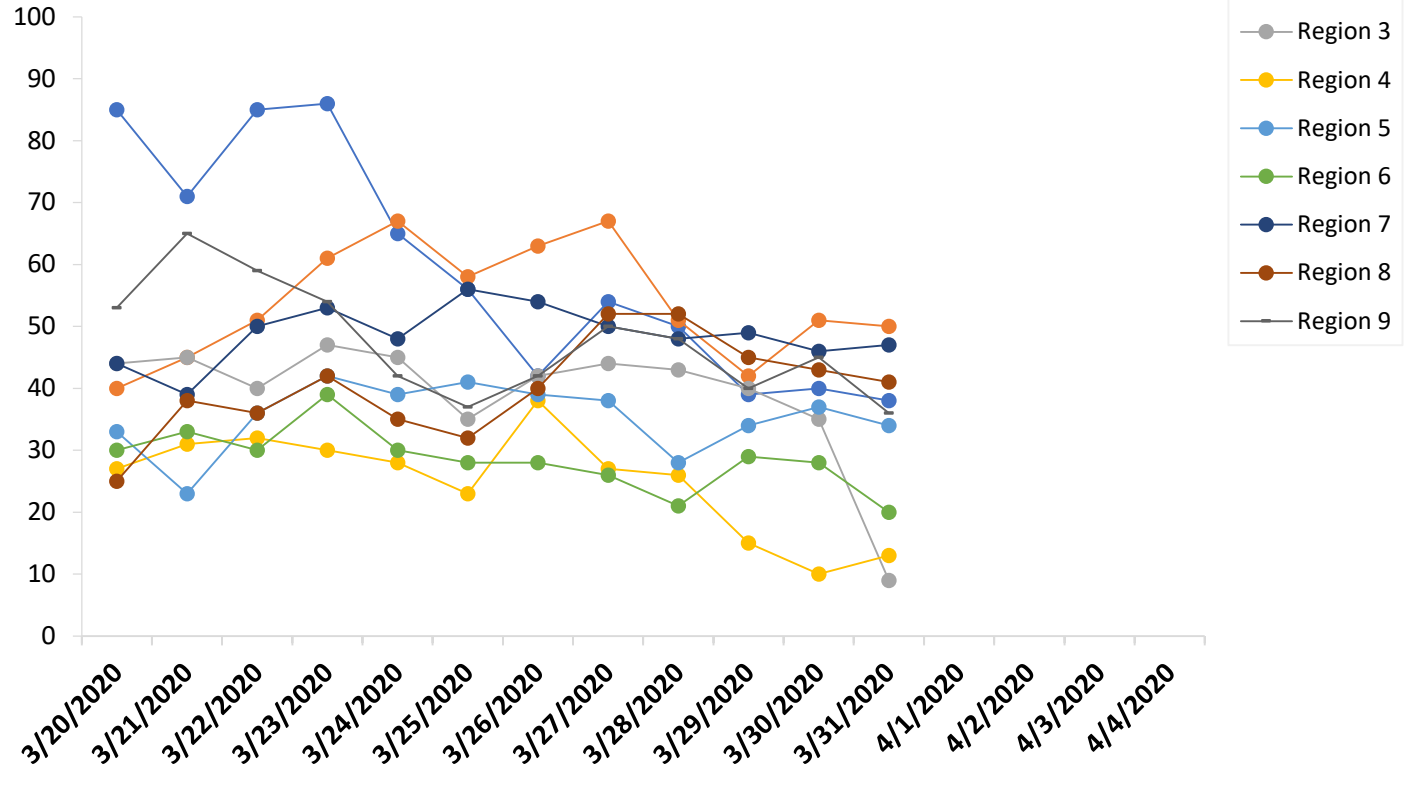


— University Medical Center New Orleans (UMCNO)
 — Forecast(University Medical Center New Orleans (UMCNO))
 - - - Lower Confidence Bound(University Medical Center New Orleans (UMCNO))
 - - - Upper Confidence Bound(University Medical Center New Orleans (UMCNO))



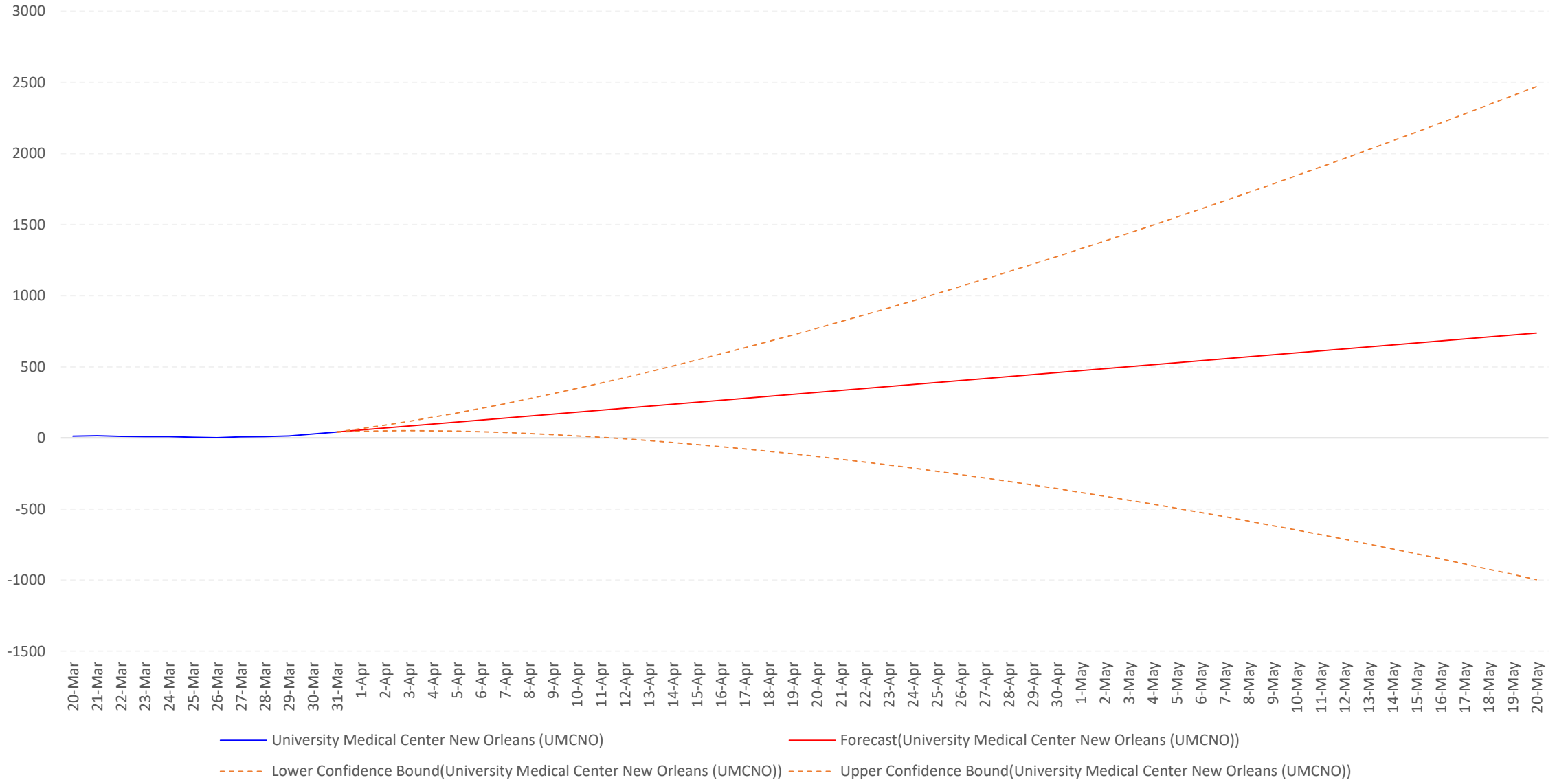
ICU Bed Utilization by Region

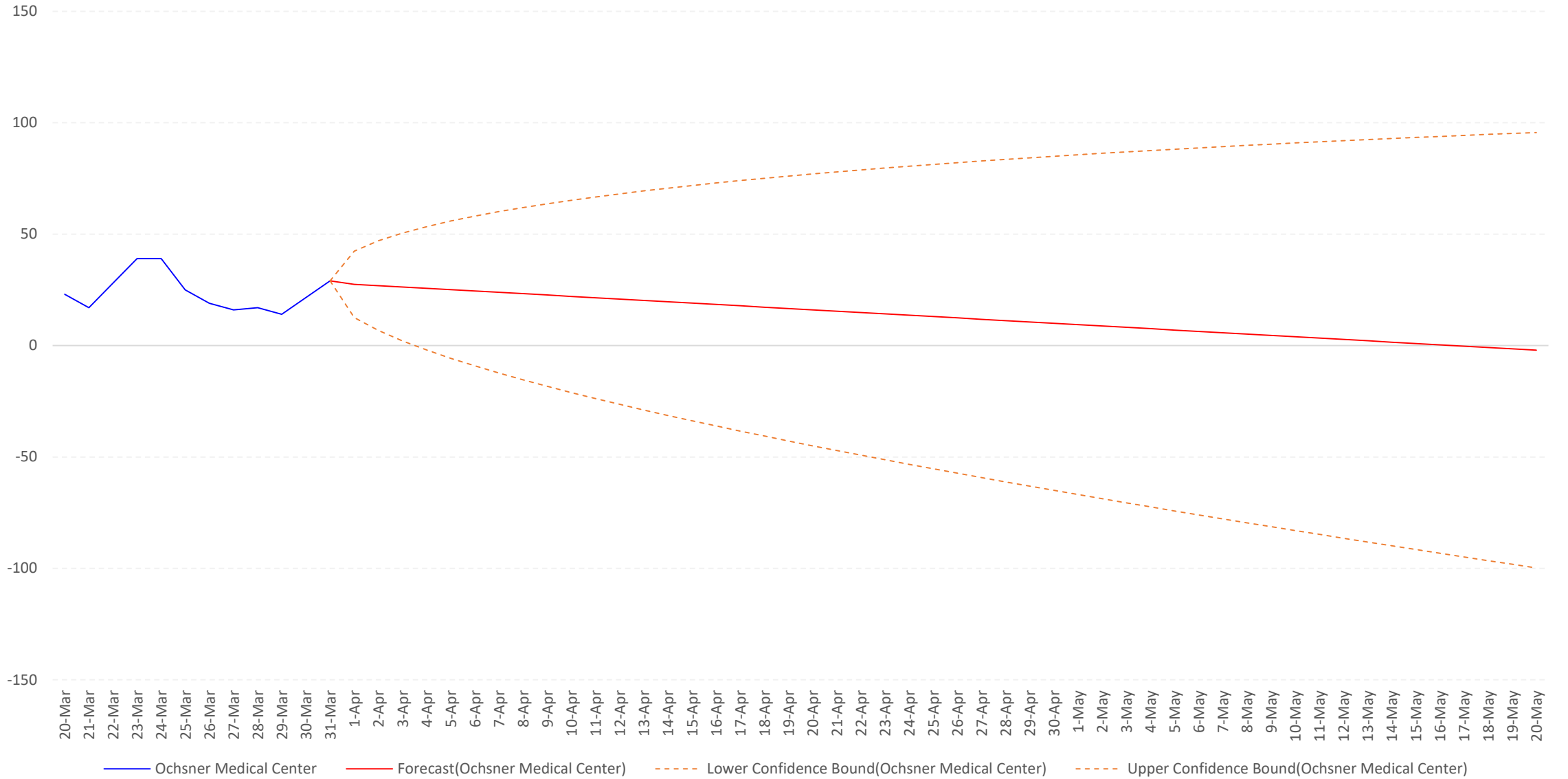
Critical Care - Adult - Available beds

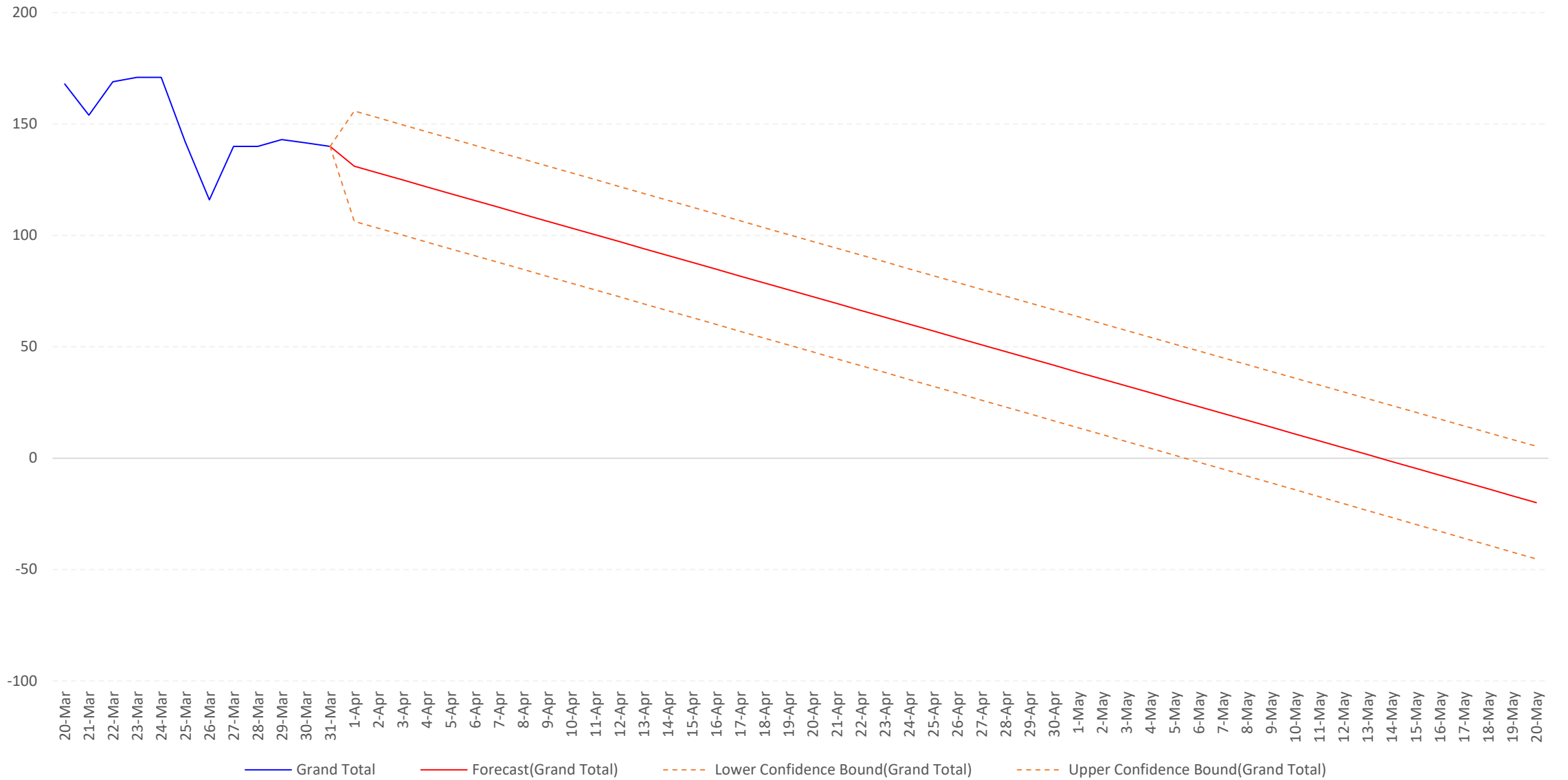


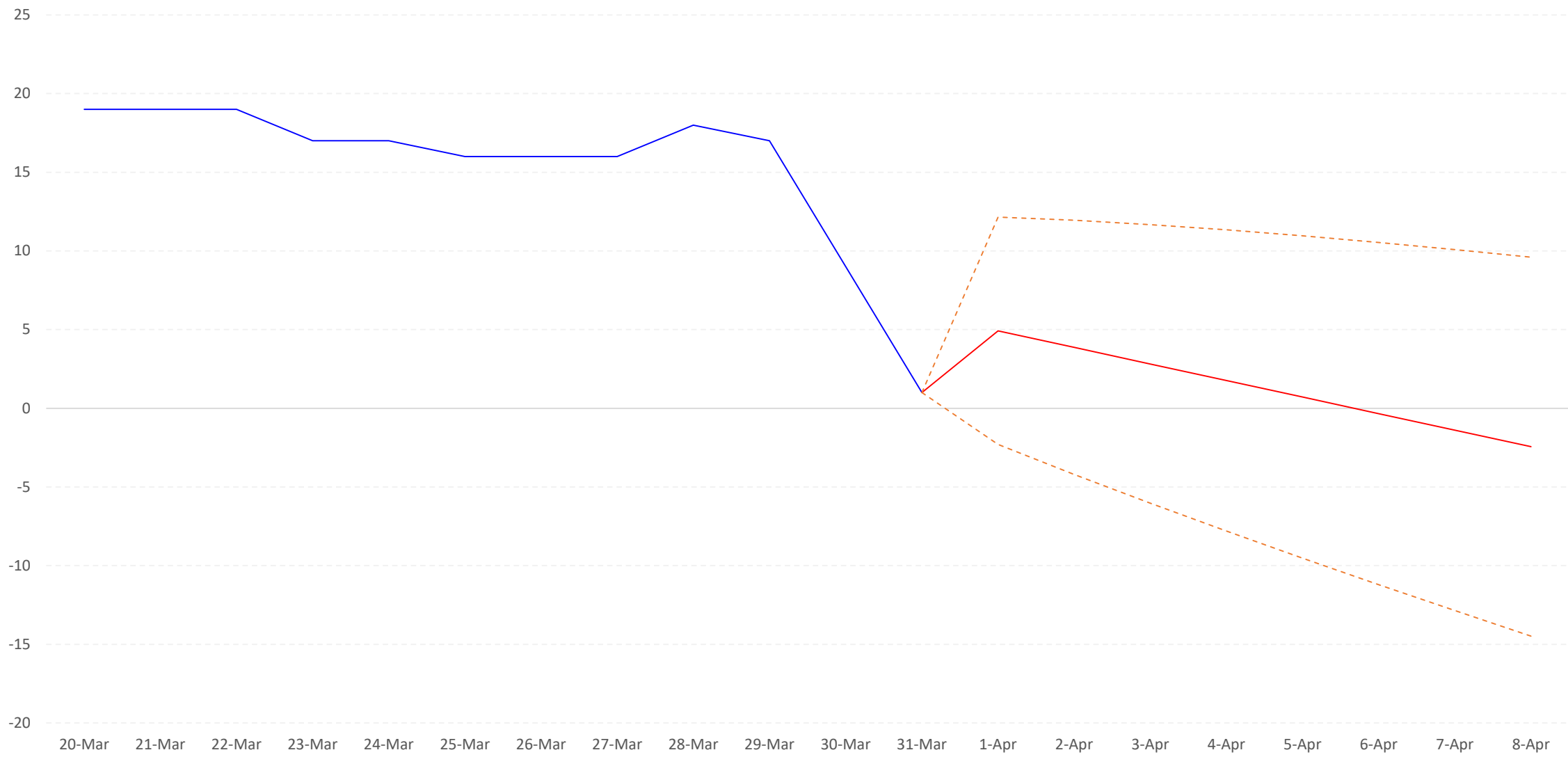


Predicted ICU bed full
saturation





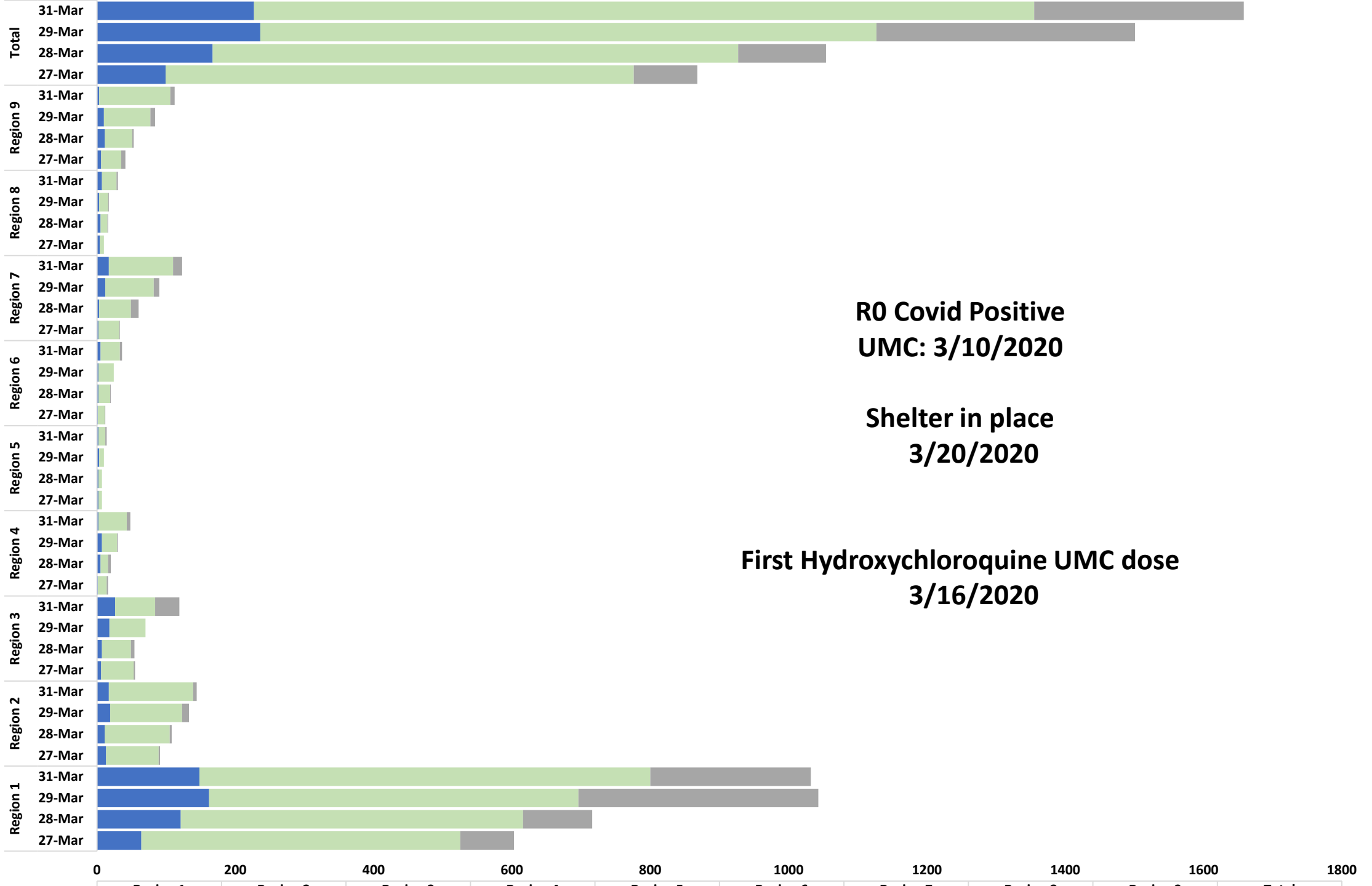




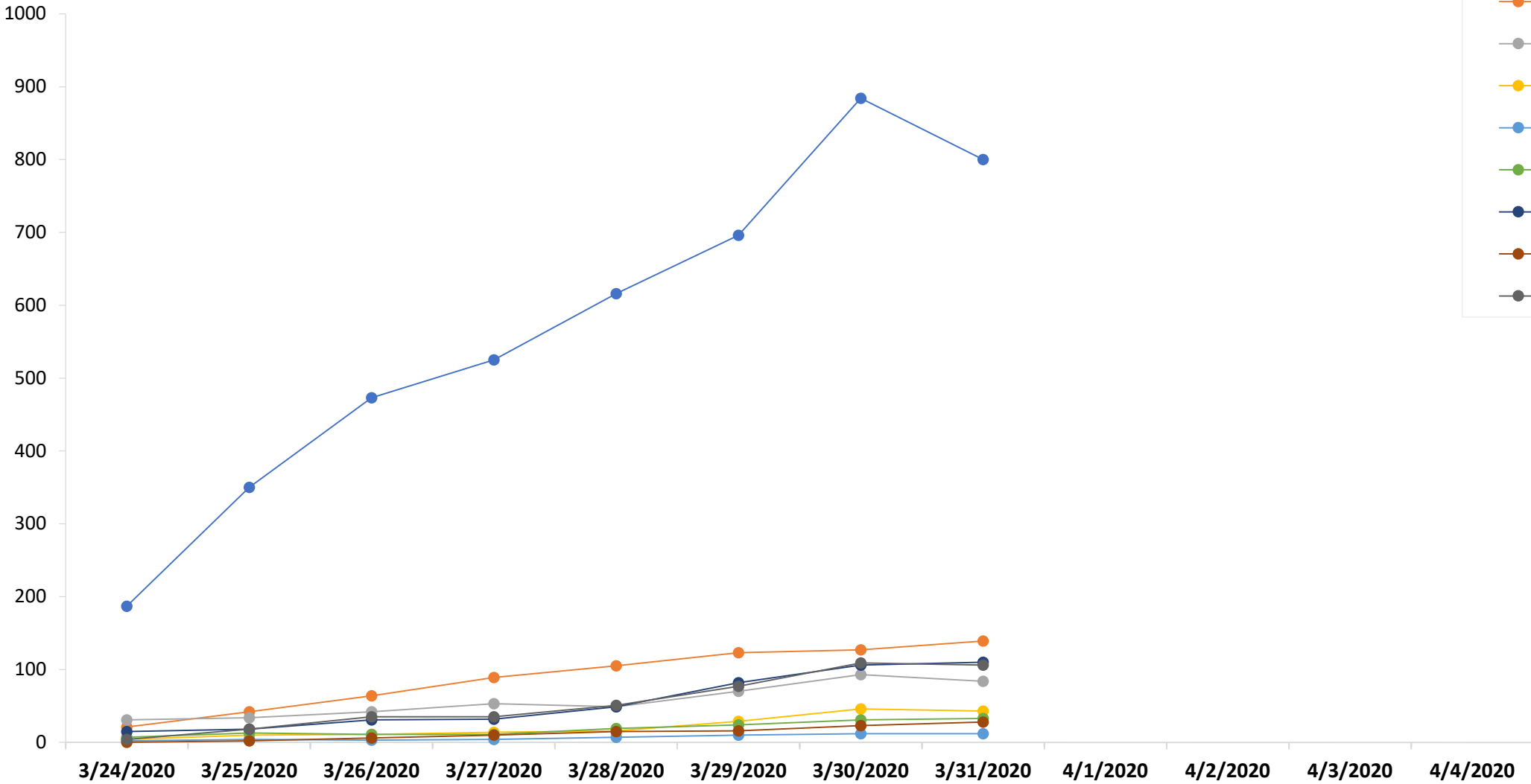
— Tulane Medical Center
 — Forecast(Tulane Medical Center)
 - - - Lower Confidence Bound(Tulane Medical Center)
 - - - Upper Confidence Bound(Tulane Medical Center)



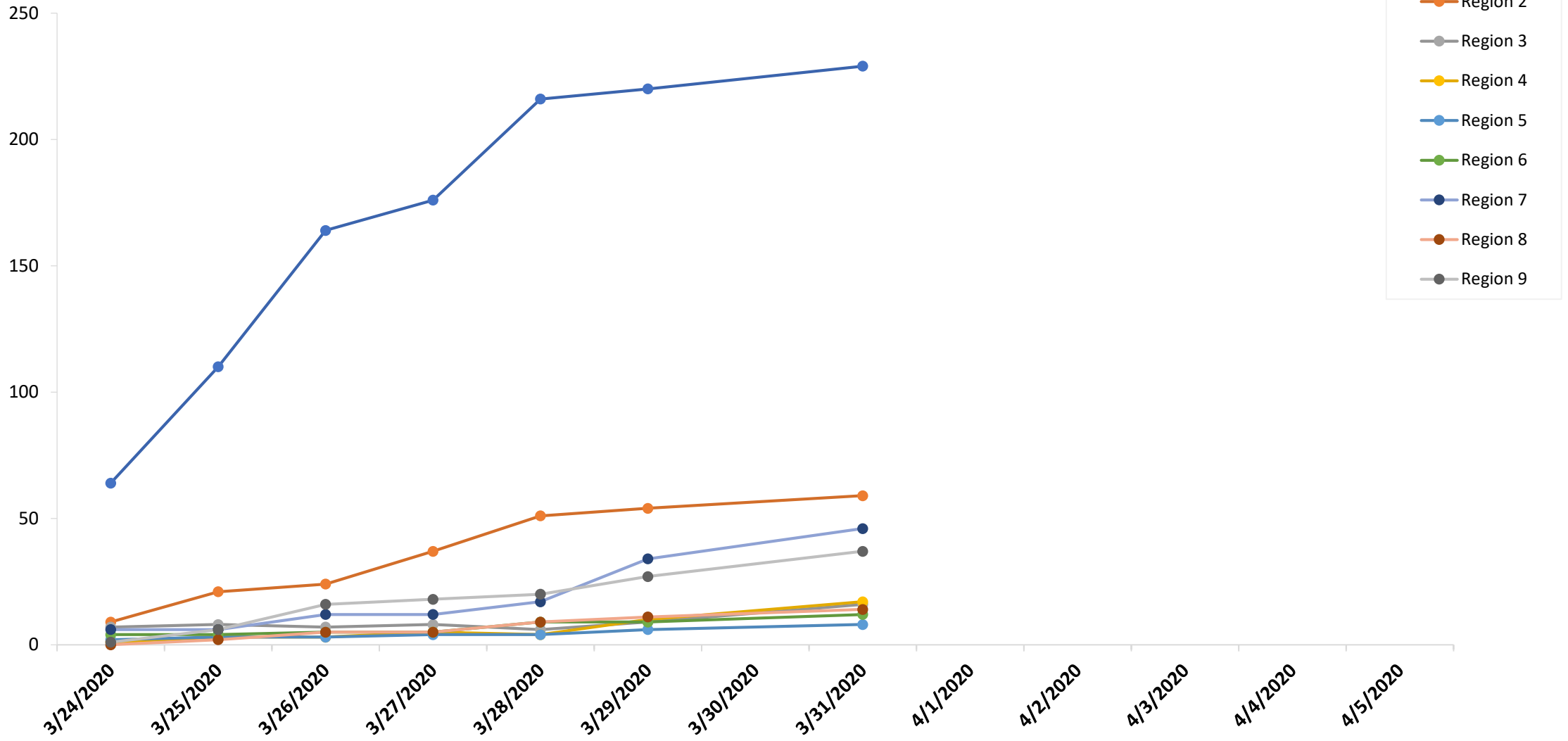
**Preliminary Hospitalized
COVID-19 Patient Data**



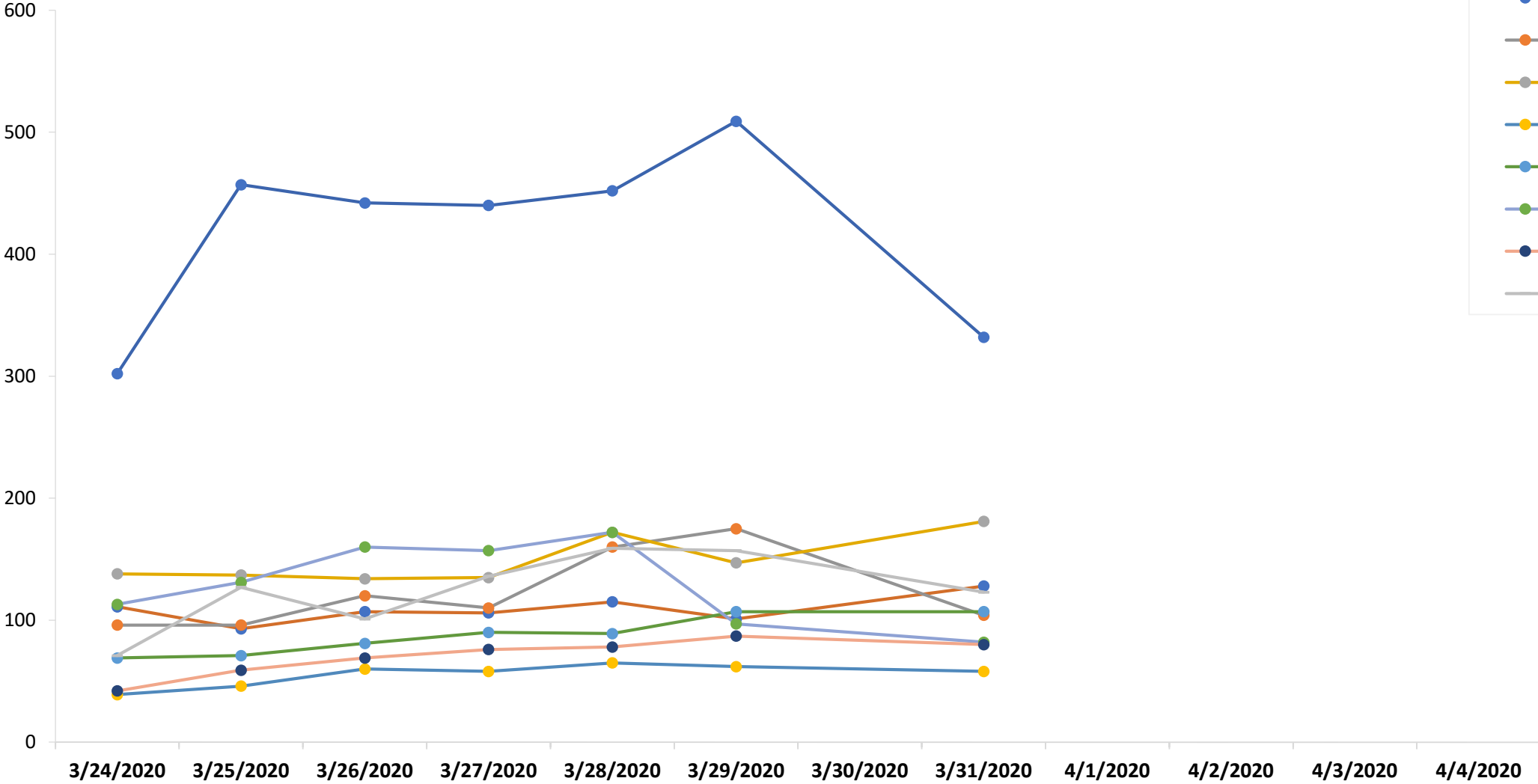
Total COVID-Positive Patients



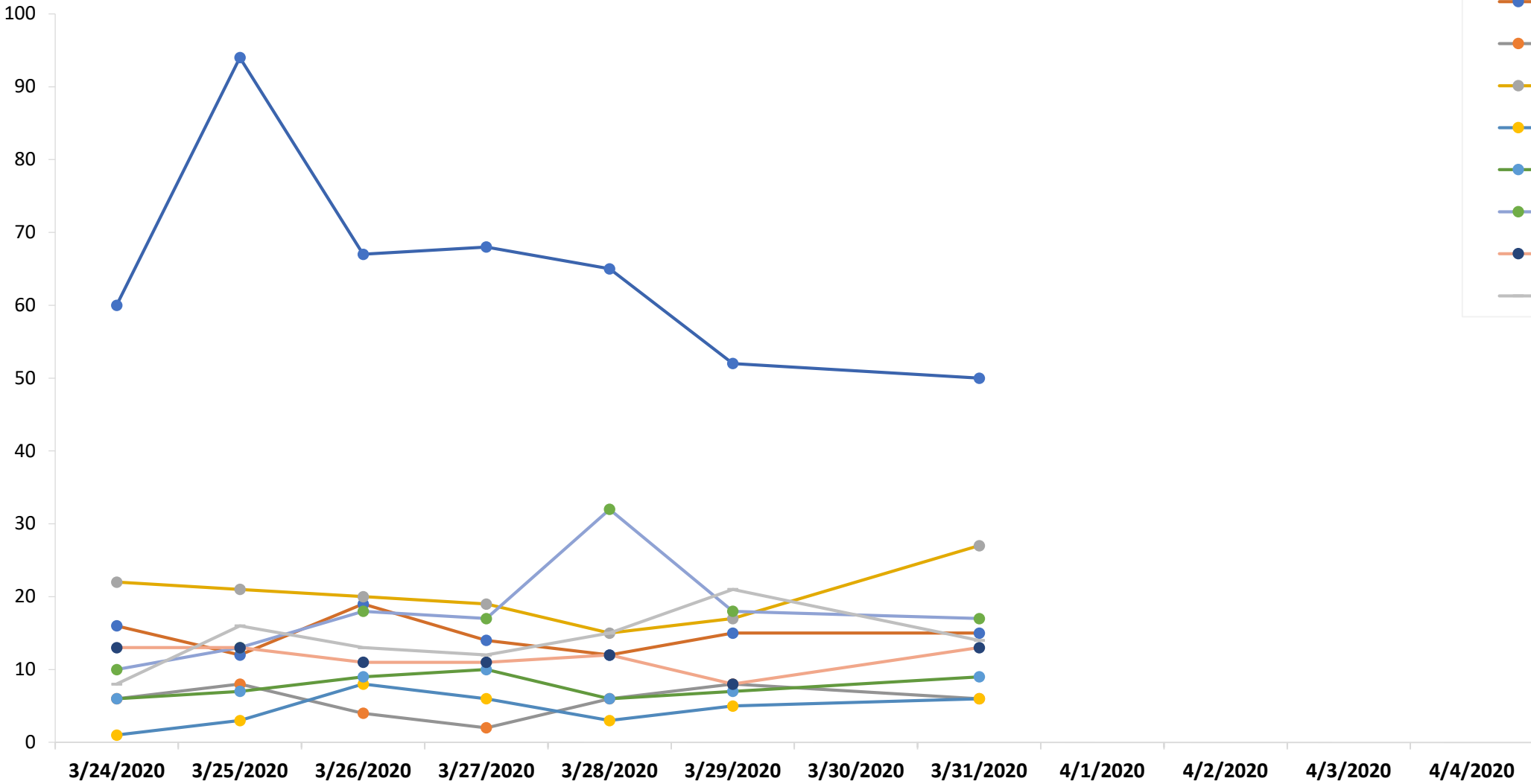
Total COVID-Positive, # on Vents



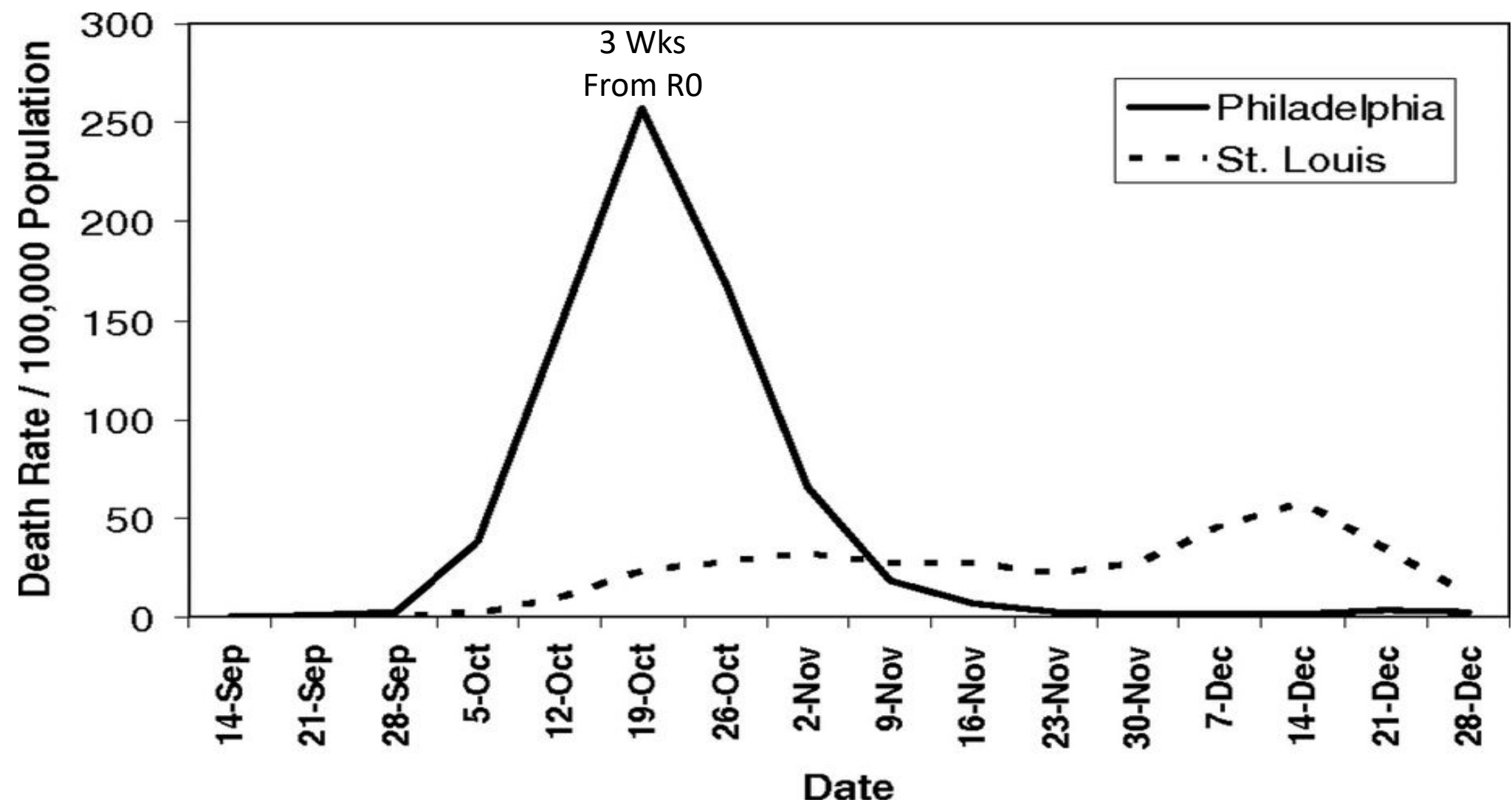
Total COVID-Pending Patients



COVID-Pending, # on Vents



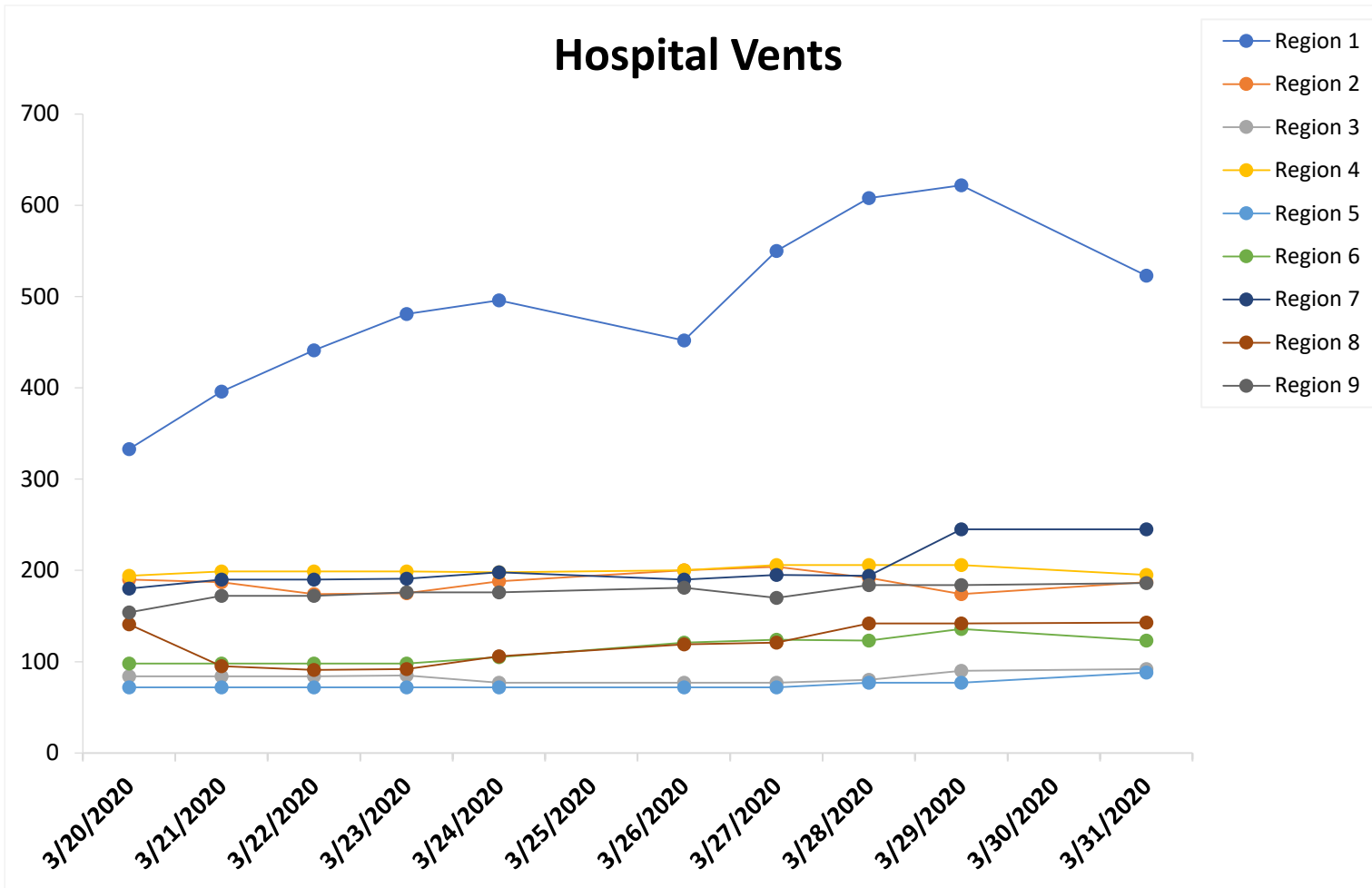
Philadelphia got less of a warning about the 1918 flu — the chart shows its first cases were ahead of St. Louis’s — and that limited its ability to respond somewhat. But even given that, Markel said, Philadelphia just did a much worse job than St. Louis at putting in place social distancing measures. Philadelphia, as just one example, didn’t cancel a World War I parade as the 1918 flu picked up, which [likely led to thousands of infections](#).



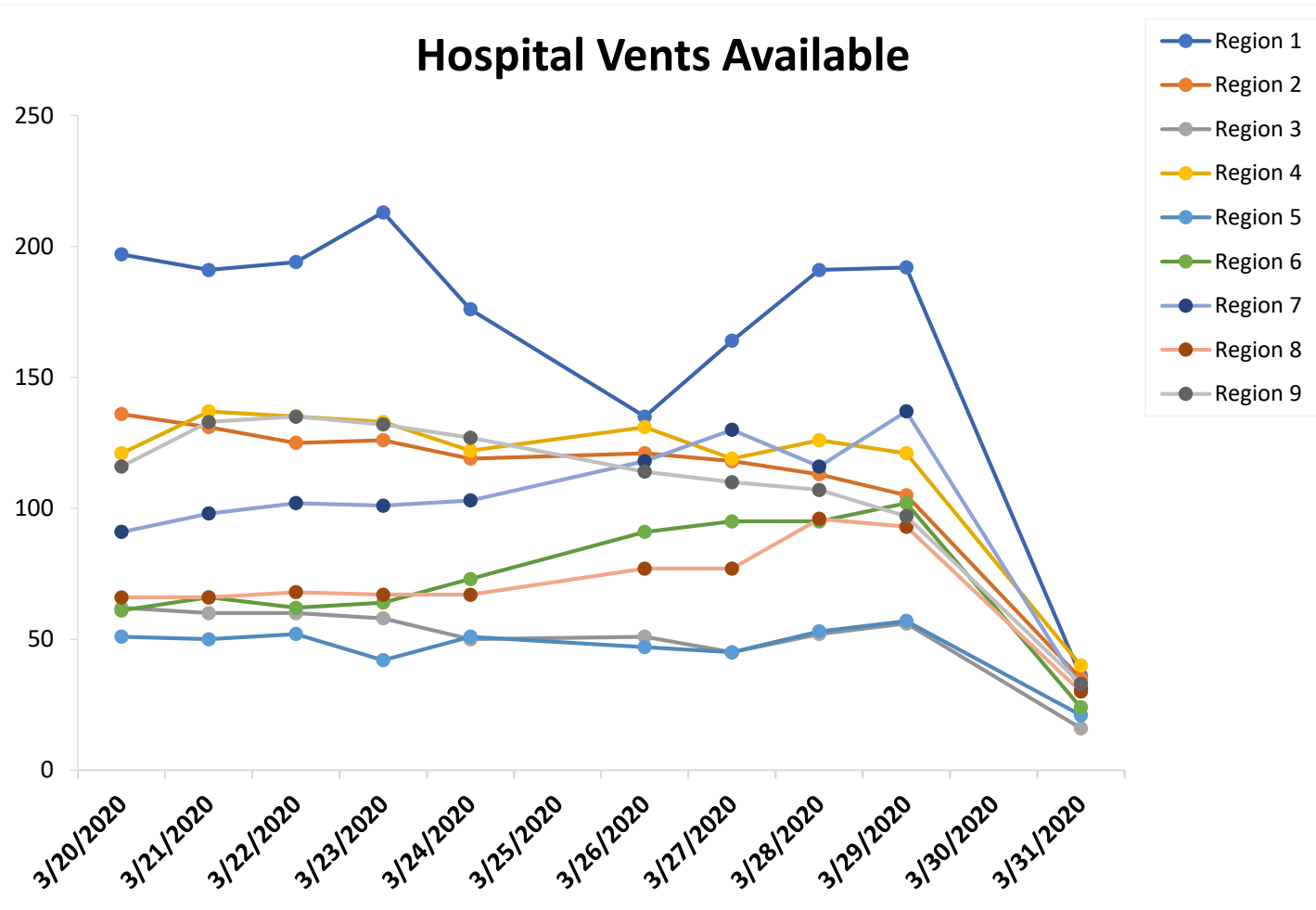


Ventilation report

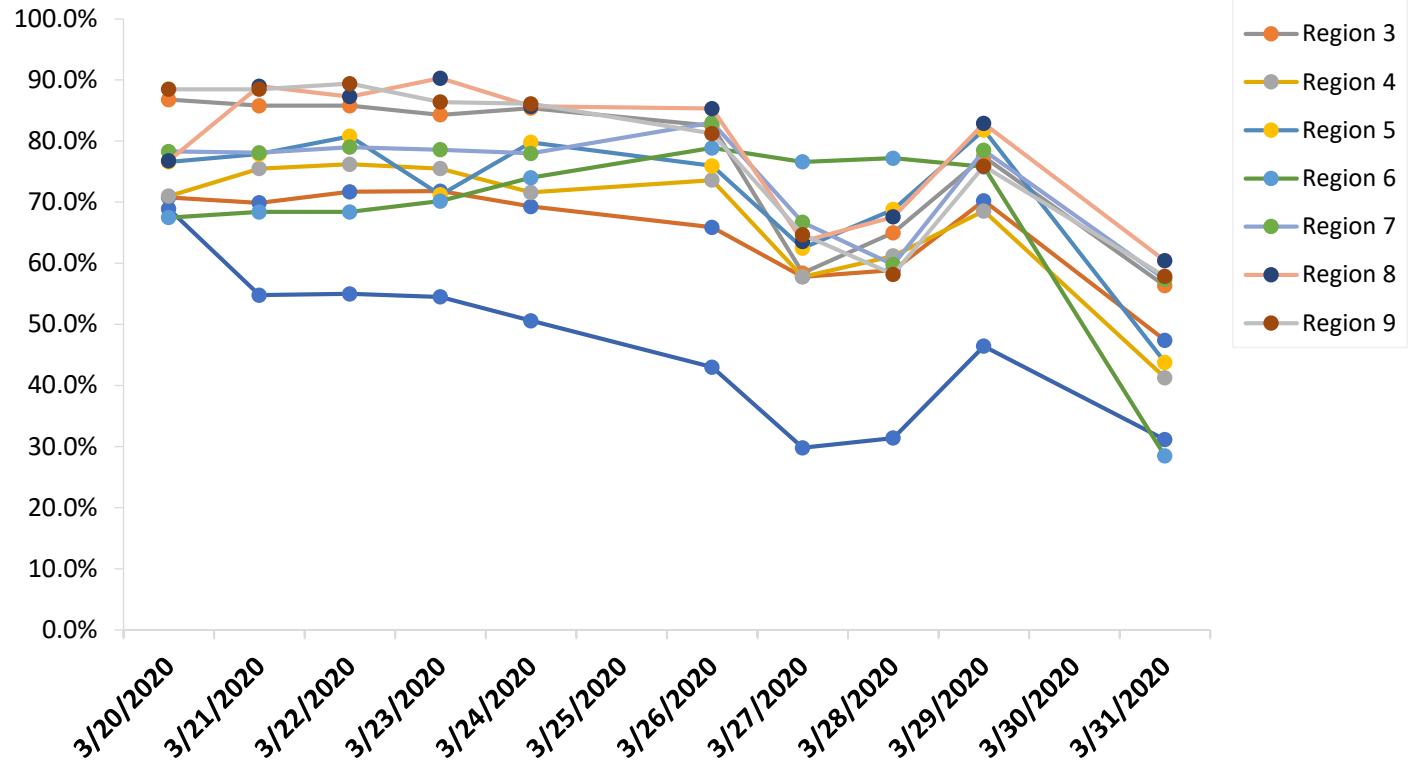
Hospital Vents



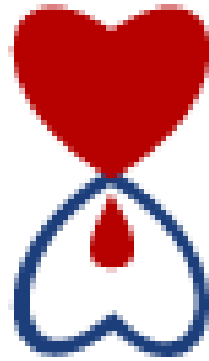
Hospital Vents Available



% Available



The State of the Blood Supply



THE BLOOD CENTER

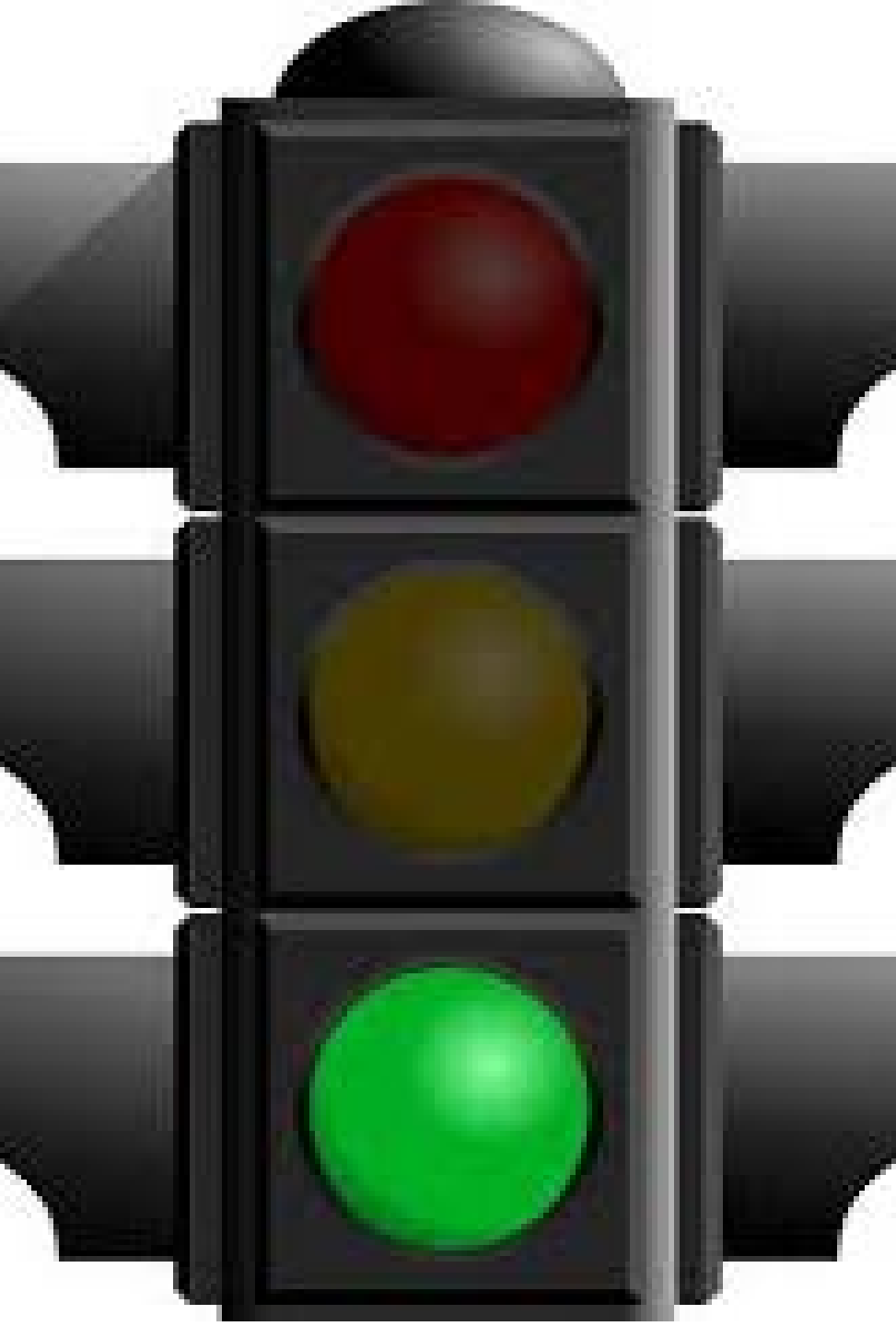
Serving you for life!

**HEALTHY DONORS
NEEDED NOW!**

Our Donor Centers are OPEN!

SCHEDULE YOUR APPOINTMENT TO DONATE!

(Must be done at least a day in advance)



Did You Know?

About 40% of the population can donate, only about 5% actually do.

- **The Blood Center** supplies Southeastern Louisiana and the Mississippi Gulf Coast www.thebloodcenter.org
- Current inventory levels are at a three day supply and adequate to meet ***current*** patient demands and any potential short term surge in usage.
- Current blood collections are keeping pace with demand – based on ***current*** trends – *but this must be replenished daily as it is the blood on the shelf that saves a life*

Ask yourself if you're feeling healthy... Good! continue on.

- **Schedule a blood donation**. Blood already on the shelves saves lives, and maintaining a sufficient blood supply is essential to ensure patients in need receive optimal treatment.
- **Begin the health screening** via [FastLane](#) *on the day of your donation* BEFORE you enter a donor center or mobile blood drive
- **Eat a good meal and don't forget your ID**
- **Arrive as close to your appointment time as possible** to reduce your wait and follow the [social distancing measures](#) suggested by the CDC
- After your donation, **consider sharing with friends and family** what you did on social media. It's good, positive, and you may encourage someone else into donating

The Blood Center would like to emphasize that sanitation, cleanliness, and safety for our donors, patients, and staff has always been #1. Every day, as a part of our regular operations, our donor centers follow appropriate infection control standards put forth by the U.S. Food and Drug Administration (FDA)

Dr David Mushatt Update



Rapid COVID-19 Testing

- Per the SARS-CoV-2 Diagnostic Pipeline site

<https://www.finddx.org/covid-19/pipeline/?avance=all&type=Rapid+diagnostic+tests&status=all§ion=immunoassays>

- Rapid immunoassays in development= 117
 - Some are antigens (Ag)
 - Some are IgM/IgG antibodies
 - Proof of concept, in development, some approved in Europe/China

STANDARD Q COVID-19 IgM/IgG Duo SD Biosensor

- Rapid testing for antibodies within 10 mins
- 10ul of specimen : whole blood, serum, plasma

Combined positive test results are used to calculate total Duo test sensitivity

		PCR		Total
		Positive	Negative	
STANDARD Q COVID-19 IgM+IgG	Positive	27	1	28
	Negative	6	29	35
Total		33	30	63

Sensitivity : 81.8%, Specificity : 96.6%

- STANDARD Q COVID-19 IgM + IgG showed 81.8% of sensitivity and 96.6% of specificity.

• Limitations

- Small “N”
- Works best after at least 7-10d *post* symptom onset
- We don’t know extent of cross-reactivity with other circulating coronaviruses

- Test results of the specimens collected after 8 days and 10 days from the date of symptom onset below.

Test result of the specimens collected after 8 days from the date of symptom onset

		PCR		Total
		Positive	Negative	
STANDARD Q COVID-19 IgM+IgG	Positive	25	1	28
	Negative	2	29	31
Total		27	30	57

Sensitivity : 92.6%, Specificity : 96.6%

Test result of the specimens collected after 10 days from the date of symptom onset

		PCR		Total
		Positive	Negative	
STANDARD Q COVID-19 IgM+IgG	Positive	23	1	24
	Negative	1	29	30
Total		24	30	54

Sensitivity : 95.8%, Specificity : 96.6%

* Based on result of test with positive specimens, it was found that IgM antibody diagnosis with STANDARD Q COVID-19 IgM/IgG Duo Test was effective for diagnosis SARS-CoV-2 from the time when after about 7 days from the date of symptom onset. And STANDARD Q COVID-19 IgM/IgG Duo Test showed a high specificity in the test with negative specimens.