December 11, 2023

Mandy Cohen, MD, MPH, Director Centers for Disease Control and Prevention 1600 Clifton Road Atlanta, Georgia 30329

Dear Dr. Cohen:

We write as public health experts with extreme concern and urgency regarding the draft updated *Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings*, approved and recommended to the Centers for Disease Control and Prevention (CDC) by the Healthcare Infection Control Practices Advisory Committee (HICPAC) at the committee's November 2-3, 2023, meeting. HICPAC ignored critical scientific evidence and input from experts, healthcare workers, and the public. The draft guidelines fail to protect healthcare personnel and patients from COVID-19, influenza, and other infectious pathogens transmitted by aerosols in healthcare settings. We urge you to reject HICPAC's recommended draft and begin a new process to formulate protective updates for the following reasons:

- 1. HICPAC's draft recommends insufficient standards and maximizes "flexibility" for healthcare employers, which would enable employers to downgrade needed infected control measures and prioritize financial considerations over protecting healthcare personnel and patients.
- 2. HICPAC's draft fails to fully and accurately recognize and characterize the science on aerosol transmission of infectious diseases. The draft proposes to drop the current "droplet" and "airborne" transmission categories and merge them into one new "air" transmission category, while continuing to recommend inadequate protection against inhalation of aerosol transmissible pathogens.
- 3. Under Routine Air Precautions, HICPAC's draft inappropriately recommends surgical masks as respiratory protection for healthcare personnel exposed to infectious diseases transmitted through the air. This is contrary to CDC's longstanding position and policy that surgical masks are **not** respiratory protection.^{1, 2} Rather, they are intended to serve as splash control or source control and do not protect the wearer against inhalation of aerosols. This

¹ NIOSH [2015]. Hospital Respiratory Protection Program Toolkit: Resources for Respirator Program Administrators. Atlanta, GA: Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, DHHS (NIOSH) Publication Number 2015-117 (revised 04/2022), https://doi.org/10.26616/NIOSHPUB2015117revised042022external icon.

² NIOSH [2015]. Workplace solutions: preparedness through daily practice: the myths of respiratory protection in healthcare. By Krah J, Novak D, Stradtman L. Cincinnati, OH: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, DHHS (NIOSH) Publication No. 2016-109. https://www.cdc.gov/niosh/docs/wp-solutions/2016-109/pdfs/2016-109.pdf.

HICPAC recommendation also undermines the application and enforcement of OSHA's Respiratory Protection standard (29 CFR 1910.134) for protection of healthcare personnel exposed to infectious aerosols.

- 4. HICPAC's evidence review regarding the use of surgical masks vs. respirators, which was relied upon by HICPAC in developing the recommended guidelines, reviewed only a narrow portion of the applicable scientific literature, and excluded and ignored the extensive evidence from observational and laboratory studies on disease transmission and effective control measures, as well as science regarding aerosol behavior and respiratory protection, which have important applications to protecting worker and patient health and safety in health care settings.
- 5. HICPAC's approach to assessing scientific evidence is overly focused on "real world" studies that fail to account for the deficiencies in many employers' respiratory protection programs, which significantly reduce the effectiveness of respirators.
- 6. HICPAC's draft fails to recommend the range of measures needed to protect healthcare personnel and patients from aerosol transmissible diseases, including ventilation, screening, and isolation, in addition to PPE.

We wrote to you in July 2023—with the support of over 1,000 public health experts—expressing our deep concerns regarding the HICPAC proposals that were presented at the June 2023 meeting.³ HICPAC's draft, as presented at the November 2-3, 2023, meeting, had no substantive changes from the June proposals. None of the many concerns that we and others have raised in letters and public comments have been acknowledged or responded to by HICPAC.

As we have repeatedly pointed out, HICPAC is composed exclusively of infectious disease and infection control professionals who work for large hospitals and healthcare organizations. It is not balanced and does not include individuals with the full range of the needed expertise and different perspectives, and views, as required by the Federal Advisory Committee Act regulations.⁴

By entrusting HICPAC to formulate infection control updates, the CDC is, in essence, enabling the healthcare industry to write its own standards—with no input from the frontline healthcare personnel and unions who will be carrying out the guidance and the patients and community members whose lives will be on the line. CDC is also ignoring public health professionals who

https://www.nationalnursesunited.org/sites/default/files/nnu/documents/0723 HICPAC experts letter backgrou nd_combined_FINAL.pdf.

³ Letter from Public Health Experts to CDC Director, Mandy Cohen on CDC/HICPAC's Plan to Weaken Guidance for Health Care Respiratory Protection and Infection Control, July 20, 2023.

⁴ 41 CFR 102-3.30(c), 102-3.60(b)(3) and Appendix A, Subpart B. <u>https://www.ecfr.gov/current/title-41/subtitle-</u> <u>C/chapter-102/subchapter-A/part-102-3?toc=1</u>.

have expertise and experience in a variety of fields with insights and findings that are essential to crafting science-based guidance to protect healthcare personnel and patients.

As CDC Director, it is your responsibility to provide science-based guidance and advice to protect the public from infectious diseases. It is your decision whether to accept or reject the HICPAC draft recommended Isolation Precaution Guideline. We call upon you to <u>reject</u> the deeply flawed, inadequate HICPAC draft. We urge you instead to begin a process to develop new draft guidelines that will protect healthcare personnel and patients from infectious diseases in healthcare settings—this time, with the full involvement and input of frontline healthcare personnel, unions, patients, and public health experts from a range of fields including infection prevention, industrial hygiene, respiratory protection, aerosol science, ventilation engineering, occupational medicine and nursing, and others.⁵

Sincerely,

The undersigned public health experts, health care workers, and public supporters.

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⁵ Follow-up Letter from Public Health Experts to CDC Director, Mandy Cohen on CDC/HICPAC's Plan to Weaken Guidance for Health Care Respiratory Protection and Infection Control, September 21, 2023. <u>https://www.nationalnursesunited.org/sites/default/files/nnu/documents/Followup_letter_to_Mandy_Cohen-</u> IP Guidelines and HICPAC 09212023.pdf.

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