

COVID-19, RSV, and Flu Updates, January 24

January 24, 2023, Tuesday

The peak of the winter “triple-demic” surge seems to be behind us.

Last Friday the Centers for Disease Control and Prevention moved the COVID-19 “community level” to medium across most of the region. Of the counties where we have hospitals, only Queens County remains at a “high” level. Our own case numbers also show that respiratory illnesses are on the decline.

According to our policies, masking is required in non-clinical, non-public areas only when the community level is “high,” so the new, lower level means you now need to wear a mask only in the following situations:

- When you are in an area where patients may be present, including all public areas
- At Mount Sinai Queens and other facilities in that borough, even if you are in a non-public area
- If you have not received a flu vaccine or do not have a “23 FLU” sticker on your ID badge—in that case, you still need to mask everywhere

Otherwise, you can take your mask off in non-clinical, non-public areas such as offices, labs, and the 42nd Street Corporate Services Center.

As of this morning, we had 163 inpatients with COVID-19 across the system, 20 of whom were in critical care. We had 10 inpatients with flu and 4 with respiratory syncytial virus (RSV). We peaked in late December at around 300 COVID-19 inpatients, 100 with flu, and 10 with RSV, so this represents excellent progress.

Nevertheless, these illnesses and other respiratory viruses have not gone away completely, so it’s wise to keep taking precautions. You can learn more in a [new Q&A](#) with Bernard Camins, MD.

If you haven't gotten your flu shot or bivalent COVID-19 booster yet, Employee Health Services (EHS) has pods [scheduled](#) through the end of this month. If you need a flu sticker for your ID badge, you can submit your documentation to EHS [here](#).

If you do test positive for COVID-19, you should [report it](#) to EHS and they will let you know when you can return to onsite work. If you have symptoms of a respiratory viral illness but do not test positive for COVID-19 by PCR, EHS says you can generally return to work 24 hours after your fever has gone away without the use of fever-reducing medicines. An exception is if you work in a high-risk area such as oncology, transplant, or the neonatal intensive care unit.

Although we didn't come anywhere close to the levels of last year's Omicron variant surge, I know this has been a challenging winter for a variety of reasons. It's perfectly all right to reach out for [support resources](#) if you think they will help, and I encourage you to do so. Hopefully, the road will be smoother from here on out. Please know how proud I am of all of you and what we've accomplished together over the past few years, and how thankful I am to call all of you my colleagues.

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