PLACER COUNTY COVID-19 UPDATE
Nov. 5, 2021

FAQs (broken out from full epidemiology report – see report for additional data)

How are antigen tests, including at-home tests, reported and included in data?

Per CDPH: “For clinical care and for public health investigation and follow-up purposes, all patients with positive antigen test results should be considered true cases.

However, for the purpose of surveillance, per the most recent updated interim CST case definition for COVID-19, positive antigen tests are considered presumptive, rather than confirmatory laboratory evidence of acute infection. Per the case definition, if ‘the patient has tested positive for SARS-CoV-2 by an antigen test of a respiratory secretion’ they are considered probable cases for public health reporting purposes.”

Labs are required to report antigen results to Public Health like any other COVID test results. At-home self-tests should be reported through the product’s mobile app or via an individual’s regular health care provider. Data from self-testing may be useful for case investigation and contact tracing, yet is not consistently reported, so individuals are encouraged to seek confirmatory PCR testing. It is expected that these results are underreported.

Additionally, at-home self-tests that come back positive do not meet the laboratory criteria to be counted as ‘Confirmed’ or ‘Probable’ cases. Laboratory tests must be performed by a CLIA-certified provider in order to meet this criteria.

Probable cases are not included in Public Health’s COVID-19 dashboard, where metrics such as “Total Cases” and “Positivity Rate” reflect lab-confirmed positive PCR results.

Public Health has received an estimated 4,348 probable cases from antigen testing dating back to June 28, 2020 (by specimen collection date).

How has mortality during this late summer/fall wave compared to previous surges?

As always, death reporting typically lags both case and hospitalization reporting significantly. Public Health requires a death certificate in order to count a COVID-19 death on its dashboard, which can sometimes be received weeks after the actual date of death (this requirement may differ slightly from CDPH practice, meaning local death figures may lag state figures for Placer County occasionally). The chart on page 4 shows deaths by month of death (versus report date) to better indicate trends.

Deaths in August-September 2021 averaged 72.4 years, compared to age 80.8 years in December-January of 2020-21 (see chart on page 4). September had the third highest number of deaths over the past 20 months.

What are the ingredients in COVID-19 vaccines?

Vaccine ingredients vary by manufacturer. None of the vaccines contain eggs, gelatin, latex or preservatives. All COVID-19 vaccines are free from metals such as iron, nickel, cobalt, lithium, and
rare earth alloys. They are also free from manufactured products such as microelectronics, electrodes, carbon nanotubes, or nanowire semiconductors.

To find a full list and learn more about the ingredients in authorized COVID-19 vaccines, click here.

What is changing about the Placer County COVID-19 data dashboard?

The following adjustments have recently been made to the dashboard:

**Additional doses and boosters:** The dashboard now reports an aggregate figure of additional vaccine doses administered to immunocompromised individuals after CDC approval on Aug. 13, as well as booster doses. Since these are primarily self-attested qualifications, Public Health is not able to verify eligibility validity and includes data on any dose beyond the primary vaccination series.

**Percent fully vaccinated:** This figure represents a percentage of the total population – not just the eligible population. The latter is calculated using different population estimates as described in the Sept. 3, 2021 Epidemiology report.

**Reinfection data:** Following changes to the CSTE case definition that took effect on Sept. 1, 2021, “Total Cases” on the dashboard may now include the same individual more than once if they meet reinfection criteria (>90 days from first test and new test OR sequencing data demonstrates differing lineages between first test and new test), after the Sept. 1 date (reinfection cases prior to this date are not included). The standalone post-Sept. 1 reinfection total is also included.

**Partial vaccination data:** Individuals who are partially vaccinated have been disaggregated from the post-vaccination case rate chart to better reflect trends among the three groups (unvaccinated, partially vaccinated and fully vaccinated).

**Dashboard navigation tip:** Dashboard features automatically resize depending on the size of your screen. However, this resizing works best if you zoom your browser in or out and find a zoom level that will work best for your specific screen size. Smaller screens such as laptops should try decreasing their zoom (zooming out), while larger screens such as large desktop monitors should try increasing their zoom (zooming in).