

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

How widespread is the Omicron variant in Placer County?

The rapid increase of COVID-19 cases and hospitalizations beginning in late December strongly suggests that the highly transmissible Omicron variant is spreading widely in Placer County as it is throughout the region. COVID-19 variants are not identified directly by either a polymerase chain reaction (PCR) or antigen (rapid) tests, but rather by a separate genomic sequencing process used on a sample of cases. (Though some markers in PCR tests may be indicative of certain variants, whole genome sequencing is required to definitively identify variants). While genomic sequencing is more widely employed in California than in many other states, it is not universal and lags case reporting. As of this report, it's too early to know what proportion Omicron makes up of recent COVID-19 confirmed cases, yet it is expected to be dominant locally within a matter of weeks, if it is not already. Early evidence suggests the Omicron variant may result in more mild illness than other variants. However, unvaccinated people tend to be more vulnerable to severe illness and hospitalization caused by Omicron and other variants still circulating. And its significantly higher rate of transmission, already contributing to a surge in hospitalizations, is likely to strain the medical systems we share. In light of this concern, Placer Public Health on Jan. 4 [extended its Health Warning](#) from late summer of 2021, encouraging residents to use high-quality medical masks when indoors around others and to get fully vaccinated, including booster shots. The California Department of Public Health has issued a [statewide order](#) requiring all Californians, regardless of vaccination status, to wear face coverings in indoor public settings from Dec. 15, 2021, to Feb. 15, 2022.

Nearly two years into the pandemic, how does COVID-19 compare with other leading causes of death for Placer County residents in recent years?

COVID-19 has caused or been a significant condition contributing to the death of nearly 500 Placer County residents since March 2020. On average, approximately 1% of Placer residents die each year, of a variety of causes. Mortality rates and causes are complex, and vary over time according to a variety of factors including population age composition, and access to health care and education resources, among many others. In recent years, Placer County has consistently ranked highly compared with other California counties in most population health metrics. Due to the complexity and nuances of the raw death data, Placer County Public Health relies on the state to analyze the top causes of death in our community. The last completed analysis was in 2019, however they have a preliminary analysis for 2020 available to review [here](#). According to preliminary analysis that can be reviewed [here](#), COVID-19 has become the fifth-leading cause of death for Placer residents in 2020 and the second-leading cause of death for all Californians.

How many of Placer's school-aged children have received COVID-19 vaccines?

As of Jan. 6, 2022, 48% of Placer youth ages 5-17 have received at least one dose of COVID-19 vaccine. Vaccination rates are higher among ages 12-17, who have been approved to receive COVID-19 for a longer period. Booster doses for ages 12-17 have been approved and recommended by the FDA and CDC. Booster dose appointments for those groups are now available in [MyTurn.ca.gov](https://myturn.ca.gov).

Who should get a COVID-19 booster shot and why is it important?

Booster shots are recommended and approved for everyone ages 5 and over who has received their full initial vaccination series more than 6 months ago, although this recommendation by vaccine type may change. As with many vaccines, the immunity COVID vaccines provide wanes over time, and new virus variants emerge that are better able to overcome the protection they offer. Booster shots have been through the same safety and effectiveness review process as all other vaccines, and have been shown to further protection against all COVID variants. While evidence suggests that those who have received a full vaccination series but not a booster still have good protection against severe illness and death, Omicron's high number of mutations give it an increased ability to infect even fully vaccinated individuals, making boosters even more important for those who are eligible.

What types of COVID tests are available and what is the difference?

There are two types of tests for COVID-19: diagnostic and antibody. Diagnostic tests can show if you have an active infection and need to isolate yourself from others. Molecular and antigen tests are types of diagnostic tests that can detect an active infection. Samples for diagnostic tests are usually collected with a nasal or throat swab, or saliva collected in a tube, and do not require administration by a medical professional. Antibody tests look for antibodies in your immune system produced in response to the virus that causes COVID-19. Antibody tests should not be used to diagnose active infection, as antibodies can take several days or weeks to develop after you have had an infection. Samples for antibody tests are typically blood from a finger stick or a blood draw and must be done by a medical professional.

It is important to understand the differences between home collection tests versus at-home tests because the differences determine where the sample is collected, where the test is processed and how quickly the results are known. Home collection tests are collected at home but analyzed by a laboratory for final diagnosis, whereas at-home tests and final results are completed and interpreted by the consumer. If you want to be sure the test you are buying is authorized, please visit the [Federal Drug Administration's tables](#) of molecular, antigen and serology and adaptive immune response for more information.

Are positive rapid (antigen) tests counted as confirmed cases, and what should I do if mine comes back positive?

Labs are required to report antigen results to Public Health like any other COVID test results. Positive antigen tests performed by CLIA-certified labs and providers are counted as 'Probable' cases rather than 'Confirmed' cases. In contrast, 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. It is expected that these results are underreported. 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. If your at-home test comes back positive, you should isolate in accordance with [CDC guidance](#) and seek confirmatory PCR testing.

How widely available are COVID therapeutics locally?

Two antiviral drugs have received emergency use authorization from the U.S. Food and Drug Administration: Pfizer's Paxlovid and Merck's Molnupiravir. Both are oral medications that can help reduce the severity of COVID-19 symptoms. Paxlovid is authorized for the treatment of mild to moderate COVID-19 in adult and pediatric patients ages 12 years and older weighing at least 40 kg, with positive SARS-CoV-2 test, who are at high risk for progressing to severe COVID-19, including hospitalization or death. Molnupiravir is authorized for the treatment of mild to moderate COVID-19 in adults ages 18 years and older, who are at high risk for progressing to severe COVID-19 and for whom alternative COVID-19 treatment options are not accessible or clinically appropriate. The new oral antivirals are in limited supply and will likely not be available to physicians to prescribe in the short term. Allocation of both oral antivirals will be to pharmacies and providers able to dispense the medication. The number of courses allocated to each county is determined using the overall COVID-19 cases in that county combined with an equity measure based on the Healthy Places Index. Learn more about currently approved antivirals and distribution protocols on the California Department of Public Health's website [here](#).

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).