September 21, 2023

Dr. Mandy Cohen Director Centers for Disease Control and Prevention 1600 Clifton Rd. Atlanta, GA 30329

Dear Dr. Cohen:

We are writing to acknowledge and follow-up on CDC's response to the July 20, 2023, letter from 900 public health and medical experts regarding updates to CDC's *Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings.* We again urge CDC to involve key experts and all stakeholders in the development process, and call upon CDC to follow past practice and hold public meetings on the Isolation Precaution Guideline as was done for the update of Guidelines on Tuberculosis in Health-Care Facilities in the 1990's.

In our earlier letter we expressed deep concerns that the draft guidelines being developed by a workgroup of the Healthcare Infection Control Advisory Committee (HICPAC) fail to protect health care personnel and patients exposed to infectious aerosols and the process for the developing the guidelines failed to include key stakeholders and was closed to the public and non-transparent. We outlined specific weaknesses in the draft guidelines, put forth recommendations for making the process more inclusive and more transparent and requested that any vote on the draft guidelines by HICPAC be delayed until these deficiencies were corrected.

We appreciate that CDC delayed the HICPAC vote on adoption of the recommended guidelines from the August meeting until the November meeting. But CDC's response failed to address any of the substantive concerns outlined in the experts' letter, including the serious problems with the scientific evidence review that concluded that surgical masks were as effective as NIOSH-approved N95 respirators in protecting against transmission of infectious aerosols.

Moreover, CDC has indicated that it has no plans to open-up the process to seek the input and involvement of other experts in key disciplines (e.g., industrial hygiene, respiratory protection, and ventilation), healthcare workers and unions and patient representatives in the development of the draft guidelines. Rather, CDC intends to rely on HICPAC – a committee that is composed almost exclusively of infection control professionals from hospitals and other medical organizations to develop the recommendations. Other stakeholders and the public will be allowed to provide written comments **after** HICPAC votes on recommended guidelines, with the barest minimum of input during their development.

At the most recent HICPAC meeting on August 22, 2023, only 45 minutes were allowed for 14 members of the public to present oral comments to the committee, out of the many more who wanted to speak. CDC limited written comments to one page. All who spoke expressed deep concerns about the failure of the proposed draft guidelines presented in June 2023 to protect healthcare workers and patients. Many relayed their personal experiences of being infected because of the lack of protections in

¹ 88 Fed. Reg. 45426 (July 17, 2023). https://www.govinfo.gov/content/pkg/FR-2023-07-17/pdf/2023-15038.pdf

healthcare settings. Others shared that due to being at increased risk, they or family members were not seeking necessary medical care afraid that they would become infected and seriously ill. ²

Unfortunately, there is no indication that HICPAC or CDC are taking the concerns that so many have raised into account. During the August 22, 2023, meeting, there was no acknowledgement of or response to any of the issues and serious concerns raised by the public at the previous HICPAC meeting in June, in the experts' letter or other earlier written comments.

We have no confidence that the HICPAC process will produce recommended guidelines that are responsive to these concerns and provide strong protections; and instead, will simply reflect the views of the healthcare industry.

We urge you to take a different course that provides for broad meaningful participation and input on the development of the Isolation Precautions Guidelines.

Specifically, we ask CDC, itself, not HICPAC, to convene public meetings that involve all key experts, healthcare workers, patients, other stakeholders, members of the public and other agencies to seek input on the scientific evidence on transmission and risk, recommended infection control measures and real-world experiences in healthcare settings.

This was the exact approach followed by CDC in the 1990's in response to another infectious disease of broad concern—tuberculosis— when it updated the Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health-Care Facilities.

In October 1992, CDC convened a two-day public meeting to bring together a broad range of experts and stakeholders to seek input on updating the tuberculosis guidelines:

"Announcement of Meeting on Tuberculosis Prevention in Health-Care Facilities

CDC will sponsor a meeting, "Issues in Preventing Tuberculosis Transmission in Health-Care Facilities," October 22-23, 1992, in Atlanta. The goal of the meeting is to review and assess the need to revise CDC guidelines for reducing the risk for tuberculosis (TB) transmission in health-care settings (1).

The meeting will bring together experts in TB prevention and control, nosocomial infection prevention, biosafety, and occupational safety and health, as well as representatives of labor, medical, hospital, and administration organizations. Topics will include patient management; TB isolation precautions; engineering controls, such as ventilation and ultraviolet irradiation; health-care worker TB screening; and personal respiratory protection, including discussion of recent recommendations by CDC's National Institute for Occupational Safety and Health (2).³

The input from this and another public meeting were utilized in developing the draft CDC TB guidelines which were then published in the Federal register for public comment, reviewed by the CDC in crafting the final recommended 1994 guidelines.

² https://www.youtube.com/watch?v=OqjC26DGr38. Public comments start at 1:41 of video. We urge you to listen.

³Announcement of Meeting on Tuberculosis Prevention in Health-Care Facilities, MMWR 41(38);716-717 https://www.cdc.gov/mmwr/preview/mmwrhtml/00017681.htm

"Public meetings were held in October 1992 and January 1993 to discuss revision of the 1990 TB Guidelines (2). CDC received considerable input on various aspects of infection control, including health-care worker (HCW) education; administrative controls (e.g., having protocols for the early identification and management of patients who have TB); the need for more specific recommendations regarding ventilation; and clarification on the use of respiratory protection in health-care settings. On the basis of these events and the input received, on October 12, 1993, CDC published in the Federal Register the Draft Guidelines For Preventing the Transmission of Tuberculosis in Health-Care Facilities, Second Edition (3). During and after the 90-day comment period following publication of this draft, CDC's TB Infection-Control Guidelines Work Group received and reviewed more than 2,500 comments."

To provide full public access and involvement, we ask that public meetings on the Isolation Precautions Guidelines be conducted online and allow for sufficient time for questions and discussion.

We also request that CDC establish a public docket on the Isolation Precaution Guidelines on *regulations.gov* and post the presentations, written comments (of any length), summaries, minutes, and proceedings from these public meetings and HICPAC meetings along with any scientific reviews and evidence presented or discussed at these meetings.

We appreciate your consideration of these recommended actions to open-up the process to seek and gain broad input on draft Guidelines on Isolation Precautions that will protect healthcare workers and patients from infections in healthcare settings, and we stand ready to assist CDC in this critical undertaking.

Sincerely,

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

*Organizations are listed for identification purposes only.

Mary Adamson Temple University Hospital

Alison Adcock, MD PhD

Rachel Adelson, Science and health communications (writer/editor) for 30+ years with graduate study in public health including epidemiology and health behavior/communication

David Alpern, MD

Dr. Lee Altenberg, PhD

I am an expert in population biology and served on the Hawai'i Pandemic Applied Modeling Workgroup (HiPAM) and am a member of the Models of Infectious Disease Agents Study (MIDAS Network).

Ameet R Kini, MD, PhD

Professor of Pathology and Laboratory Medicine, Loyola University Chicago Stritch School of Medicine

⁴Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Facilities, 1994. MMWR 43(RR13);1-132 https://wonder.cdc.gov/wonder/prevguid/m0035909/m0035909.asp

Mark Ames, AIHA

Christine Amidon MSN, APRN, FNP-C

Michelle Amos, LCSW, CT

River Andres, PA-C

Lauri Appelbaum, MSW LICSW

Susan Arbuck, MD MSc FACP

Lorraine Archie, RN, BSN, CGRN

Bernadette Archut, CPAN, RN

Micah Arsham, MS, LAc Licensed Acupuncturist

Melissa Augustine, RN, MLIS

Jessica Avizinis

Jessica Azrin, MPH Student George Washington University

William Bahnfleth

Professor of Architectural Engineering, Penn State

Amy Bahruth, MS, IH

Deputy Director, Occupational Safety and Health/Health Issues, American Federation of Teachers

Lori Bailey, PhD, PMHNP, Nurse Practitioner Bailey Mind and Body Connection

Daria Barkofsky, RN, BSN

Naomi Bar-Yam

World Health Network

Yaneer Bar-Yam, PhD

Professor and President, New England Complex Systems Institute, Co-founder WHN

Jordan Barab, Former Deputy Assistant Secretary of Labor for OSHA

Noor Bari, MBBS BSc Infection (Hons)

Dawn Barnard, RN

Crozer Chester Medical Center

Sherry Baron, MD, MPH

Barry Common Center for Health and the Environment, Queens College, City University of New York

Anne Barraza

Public Health Consultant, HHS Dept., Dona Ana County, New Mexico

Cassidy Bartkowski, RN BSN Geisinger CMC PCU

Myra Batchelder, MPA Founder, COVID Advocacy Initiative

Shana Bates, RN

Gail Bateson

Executive director (retired), Worksafe

Lisa Baum

Lead Occupational Health and Safety Representative, New York State Nurses Association

Victoria Becker, Adult Nurse Practitioner, MSN Retired from the Veteran's Administration

Joaquín Beltran Founder, ActionCareEquity.org

Cynthia Bembry

Trude Bennett, DrPH

Cheryl Berenson, RN, MS, MPH Public Health Medical Reserve Corps

Debbie Berkowitz

Fellow, KI Initiative for Labor and the Working Poor at Georgetown University

Dorineerriel-Cass

System Director Infection Prevention, Corewell Health

Meghan Betham, MSN RN

Luc Bherer, MD

Public health occupational medicine specialist

Stephane Bilodeau

Engineer, PhD, FEC; Adjunct Professor, Bioengineering Dept., McGill University; Editor, World Health Network

Linda Birnbaum, PhD Scientist Emeritus and Former Director, NIEHS

Julie Bjork, RN

Alana Black, MPH

Jenny Blair, MD

Janette Blandford

Registered Nurse - Caromont Regional Hospital

Nathan Blau, MD

Heather Blue, PhD **Epidemiologist**

Leslie Boden, PhD

Professor, Boston University School of Public Health

Lisa Bolin

Susan Bonadonna, MD Montefiore Medical Center

Liz Borkowski, MPH

Senior Research Scientist, Milken Institute School of Public Health, George Washington University

Bill Borwegen, MPH

Principal, Prevention at Work (2013-current)

Director, Occupational Health & Safety, Service Employees International Union (1983-2013)

Maria Bouikidis

Andrew Bowdle, MD PhD FASE Professor, University of Washington

Geoffrey Boyd

Family liaison. St. Joseph's Healthcare

Laurie Bramhall, BSN, RN

Sherre Branch, BSN, RNC-OB, C-EFM

Melissa Braveman, MD

Elisa Braver, PhD

Adjunct Associate Professor, Epidemiology and Public Health, University of Maryland School of Medicine

Amy Breau, BSN

Katherine Bridges, RN

Roselie Bright, ScD Retired federal epidemiologist

Susan Brokken

Clinical Laboratory Scientist (community hospital)

Karl Broman, PhD

Professor, University of Wisconsin-Madison

Lisa Brosseau, ScD, CIH

Research Consultant, University of Minnesota, Center for Infectious Disease Research and Policy

Debra Brothers, RN

Garrett Brown, MPH, CIH
Retired Cal/OSHA inspector and Headquarters staff

Eric W Brown, RN Temple University Hospital

Alisha Brown, RN

Glenn Brownton, MSW

Daniel Brustein, MD, MSIH, FACOEM

Sarah Bucic, MSN, RN

Meg Buckwalter, RN, PHN

Giorgio Buonanno

Professor, University of Cassino and Southern Lazio

Barbara Burgel

Professor Emerita, University of California San Francisco, Occupational and Environmental Health Graduate Nursing Program.

Joanne Cafiero

Disabilities Advocate and Researcher

Matt Calzia, BSN, RN

Oregon Nurses Association

Miguel Ángel Campano-Laborda, DArch Associate Professor, Universidad de Sevilla

Peter Canavese

Dean Carroll, MPH, OTR/L

Diane Carroll, RN

Jacqueline Cataldo, RN

Mark Catlin, BS Industrial Hygienist

Stephanie Chalupka, EdD, EN
Director, Master of Science in Nursing Program/Worcester State University

Krista Chan

Richard Chancellor, MSN, APRN, PMHNP-BC

Rachael Chavez, RN Clinical Research nurse, oncology

Joseph Chlubna Industrial hygiene tech

Stephen Christensen, PhD Translational Systems Immunologist/Biologist, Pfizer

David Christiani Professor, Harvard School of Public Health

Christie Agerter, RN

Brenda Christoffersen, RN

Richard Christopher, RN

Angela Cleghorn, RN

Harry Cloft, MD

Karen Cohen, RN Previous OC Health

Laura Cole, BS Pharm, RPh, MEM Biohazard Science

Aaron Collins

President, OpenAeros & MaskNerd

Kathy Condor

Director, Health Continuing Education, Allegany College of Maryland

Nancy Connell

Professor, Rutgers NJ Medical School

Ashley Conway

Registered Nurse and Assistant Professor, Rutgers University

Victoria Copeland, PhD, MSW

Allyson Corbo, MPH

Public Health Research Scientist

Ashley Corcoran, BSN, RN

Susan Cornutt, PA

Mary Counihan, MSW

Amy D'Alessandro, RN

Alicia Dabney

Frances Daily, BMBS, DTMH, DRANZCOG, FACTM

Annemarie Dallago, RN, BSN

Sherri Darrow

Epidemiologist University at Buffalo

Letitia Davis

Retired - Director of the Occupational Health Surveillance Program at the MA Department of Public Health

Matthew DeAngelis, MS, MSN, MBA, ANP-BC, COHN-S, CSP

Nancy Delagrave, physicist Scientific coordinator, Covid-Stop

George Delclos

Professor, The University of Texas Health Science Center at Houston School of Public Health

Connie Deline, MD

Mary Grace Delizo, CIH Senior Safety Engineer, Cal/OSHA

John Dement, PhD, CIH
Professor Emeritus, Duke University Medical Center

James Deshotels, SJ, MSN, MPH retired

Terri Desilets, APRN

Meg Desilets, BS BMED

Renee Despres, PhD, MPH

Kendra DiRentis, RN,

Ronald Dobbin, MSc (Occ Hyg) London

Marian Downing, RBP, CBSP, SM(NRCM)

Angela Duke, MD, MPH

Jered Ebenreck

Former contact tracer/ MPH candidate

Andrew Ecker, MD

Arlene Eisen

Safety Analyst, MPH

David Eldredge

CEO of NALTIC Industrials, & Adjunct Chemistry Professor at slcc.edu

Cynthia Ellwood

Principal; Associates in Occupational + Environmental Health, LLC

Cheryl Elmer, LMFT

Moriah Engelberg, MPH candidate

William Engle, RN

Jane Evered, PhD RN

Alex Fay, BSN, RN

Eric Feigl-Ding

Epidemiologist, Faculty, NECSI

Adina Feldman
Infection Preventionist, MD Anderson Cancer Center

Heather Fercho, MA

Jared Fernandez, RN

Victoria Ferry, RN CCRN

Estelle Fields, RN

Margaret Filios, Sm, RN

Adam M. Finkel, ScD, CIH

Clinical Professor of Environmental Health Sciences, University of Michigan School of Public Health. Former Director of Health Standards, OSHA, 1995-2000.

Shannon Finn MSW

Rhea Finn, PharmD, RPh

Mei Firestone, MD

Reed Floarea

Christina Floyd Registered Nurse/Temple University Hospital

Lisa Foreman, APRN-BC

Heather Forsyth, PsyD LP Clinical Psychology

Jennifer Fox

Greta Fox, FNP-BC

Family & Community Health NP, Founding member & Expert Advisor, World Health Network

Simone Frank, MPH

Timothy Frasca, MPH, retired

Alice Freund Industrial Hygienist

Danielle Friedman MD, MBA Physician / hospital

Samuel Friedman, PhD Research Professor, NYU Grossman School of Medicine

Nick Furlong

Palliative Care Medical Director and Physician

Kathleen Gadd, MLIS Health sciences librarian

Jorge Gago Physician

Emily Galpern, MPH

Kit Galvin, MS CIH

Senior Research Scientist, Retired, University of Washington

Susan Gardner

Assistant Professor Meredith College

Adriana Garriga-Lopez

Associate Professor of Anthropology at Florida Atlantic University

Fiona Gau

Certified Safety Professional

Laurie Gelb, MPH

Principal, Profit by Change

Noemi Gerena, FNP-BC

Cora Gherga

Margaret Gillott-Fountain, RN BSN

Frances Gilmore

Industrial hygienist (retired) with People's CDC

Thomas Glendon, LCSW

Galina Godovskaya, Nursing

Marji Gold

Ronald Gold

Deborah Gold, MPH, CIH

Liza Goldman Huertas, MD, IBCLC

Heather Goldsmith, Registered Nurse

Andrew Goldstein, MD, MPH Assistant Professor, NYU School of Medicine

Angy Paola Gómez Sua Industrial microbiologist, HSE postgraduate, SCHO member.

Abbie Goodyear

Andrea Gordon, MD

Jeoffry Gordon, MD, MPH Physician Outbreak manager

Bonnie Gorman, RN

Cindy Gorr, Nursing

Perry Gottesfeld Executive Director, Occupational Knowledge International

Merry Grande, MPH

Jean Grassman, PhD CPH CIH
Associate Professor, CUNY Graduate School of Public Health and Health Policy

Kevin Graulich

Patricia Graves, BSN, RN

Linda Green, MD

Sue Greene, MS, MA

Therese Guise

Pamela Guthman, DNP, RN APHN-PHN

Craig Haen, Therapist, Private Practice

Christine Hammerle, RN

Jennifer Hardimon, RN

Thomas Harkanson, RN

David Harrington

Steven Harris

President, Rational, LLC

Sophia Harris, BSN, RN Temple University

Allan Harrison

Linda Haslam-Stroud, RN

Maggie Hawthorne, MPH Consultant

Meghan Hayes, RN

Crozer

Matthew Healy, PhD

Senior Computational Biologist, Enveda Biosciences

Rhonda Heatley, RN

Dr. Kevin Hedges CIH, COH

Occupational Hygienist, Occupational Health Clinics for Ontario Workers and Workplace Health Without Borders WHWB (International)

Kimberly Henken, MSN, RN

Paul Hennessy

Eduardo Hermida, MD Anesthesiologist

Jay Herzmark, RN MSN CIH (ret) Director, SafeWork Washington

Sandra Hew

Erin Hipple

Assistant Professor, Graduate Social Work, West Chester University

Richard Hirsh

Chair and Founder, Developing World Outreach Initiative

Brenna Hogan, MPH, CIH

Sally Holder, RN

Winn Holly, RN BSN

Sarah Holstein, MD, PhD Professor of Medicine

Michael Horowitz, CIH, retired from Cal/OSHA

Aurora Horstkamp, MD

Jeffrey Hotchkiss Reiki Community Health & Wellbeing

Rebecca Hubert, RN

Joseph Hughes Senior policy advisor

Katherine Hughes, RN

Barry Hunt

CEO Prescientx; President Canadian Association of PPE Manufacturers

Jaylee Hurst

Secretary Treasurer, Healthcare Division Director, ADN, Former Critical Care and OR RN

Wanda Huskins, RN

Michelle Imber, PhD, ABPP Clinical Neuropsychologist, private practice

Ryan Irving, RN BSN CCRN

Elleb Isaacs, MD

Donald Isbell, R.N. MA retired

Sig-Linda Jacobson, MD

Karen Jakpor, MD, MPH

Ronald Januzelli

Sherry Jester, MD

Jose-Luis Jimenez, PhD

Distinguished Professor and CIRES Fellow; University of Colorado-Boulder

Mary Jirmanus Saba Co-founder, Massachusetts Coalition for Health Equity

Lara Jirmanus, MD, MPH
Primary Care Physician, Clinical Instructor, Part-Time, Harvard Medical School

Joanna Nobbe, PT, DPT, MA, OCS New York Presbyterian Hospital, NYC

Nancy Johnson, Occupational Health and Safety Specialist (retired ONA)

Jayda Jones, MPH

Michael Jordan, MD MPH FIDSA

Teny Joseph, PharmD

Steven Joyal, MD Chief Medical Officer, Life Extension

Joy Kaaz, RN, BSN, retired

Henry Kahn

Professor Emeritus, Emory Univ School of Medicine (Family & Preventive Medicine)

Emmeline Kaiser Microbiologist, Unilever R&D

Pat Kane, RN Executive Director, New York State Nurses Association

Nadria Kasumu, CRNP Temple University Hospital

Madelaine Katz, MPH

Sharon Kenoski, Retired NP

Lohitha Kethu, MA

Bridget Khabbaz

Maxim Kiefer, MS, CIH
Director, CDC/NIOSH Western States Office (Retired)

Jean Kim, DDS General dentistry Katherine Kirkland, DrPH, MPH General occupational and environmental health-retired

Rosemary Kirousis, MPH, FNP-BC

Gwen Klemm, LLMSW

Susan Klitzman

Senior Associate Dean for Administration and Professor of Environmental and Occupational Health Sciences, CUNY Graduate School of Public Health and Health Policy, NY, NY

Jenna Knudsen, RN, BSN

Inga Knudson, RN

Julia Kocich, Medical editor

Julia Koehler, MD

Associate Professor of Pediatrics, Harvard Medical School

Bill Kojola, MS, Industrial Hygienist

Chelsea Kolander, MPH/MSW

Kate Koliha, BSN RN Epidemiologist

Denise Kornblatt, RN

Merrit Koskelo, MD, PhD Physician Scientist, Health Equity Liaison

Mary Koslap-Petraco

Deborah Kowalczyk, Registered Nurse

Emily Kraser, RN

Sonia Kreidenweis, PhD Professor

Paula Krick, RN

Nancy Krieger, PhD

Professor of Social Epidemiology, American Cancer Society Clinical Research Professor, Harvard T.H. Chan School of Public Health (Boston, MA)

Asata Kromah, Nursing

Catherine Kull, Geriatric Rehabilitation

Carol Kull, RN

Patricia Kullberg, MD MPH

Medical Director and Assistant Health Officer Multnomah County Health Department (retired)

Sunny Kung, MD

Alecia Kurey, Registered Dental Hygienist

Brenda Laboda, BSN, RN, CWCN, CWS

Amy LAGRANGE, GCFP LMT

Dexter Lai, Pharmd

Liz LaManche, MSW

Paul Landsbergis, PhD, MPH

Yolanda Lang, PhD, MSN, CRNP, COHN, FAAOHN
President, American Association of Occupational Health Nurses (AAOHN)

Regina LaRocque, MD MPH Associate Professor of Medicine, Division of Infectious Diseases, Massachusetts General Hospital/Harvard Medical School

Zoey Laskaris, PhD
Occupational Epidemiologist, Barry Commoner Center at Queens College CUNY

Samantha Lattof, PhD MSc CEO, Maila Health

Joanne Laudeman RN BSN

Natasha Laurent PASNAP

Susan Lawson

Nataliya Lazarusl, ICU RN

Matthew Leafblad, MD

Linda LeBeau RN BSN CCRN

Soo-Jeong Lee University of California San Francisco

Marina Lent
Director, Local Health Department

Michelle Lescault, RN

Nancy Lessin, MS

Billy Lester Indoor Air Research and Aerosol Scientist

Marianne Levitsky Industrial hygienist, Workplace Health Without Borders

Roger Lewis, PhD, CIH, FAIHA Professor Emeritus Environmental and Occupational Health

Professor Shirley Lin Assistant Professor of Law, Brooklyn Law School

Bruce Lippy, PhD, CIH, CSP, FAIHA President, The Lippy Group, LLC

Christine Locke, BSN, RN PHN APHN

Elisabeth Loftus, RN

Andrea Logan-Caron, MSN RN CEN

Elizabeth Lombardo, RN

Ericson Lopez Bio Abundance LLC

Nicole Louis-Garraud, RN

Aryn Louisignau, MA Social worker, PASNAP

Andre Lowe, BS, MS, MBA
ABSA member, NEBSA board member, Boston Biosafety Committee member

Jenna Luche-Thayer

Dana Ludwig
Data Scientist (and licensed physician), UCSF

Alston Lundgren, MD, FAAFP, FAAMA

Coleen Lunsford, RN

Jackie Lutz

Elizabeth Lyons

Pamela Mackay, RN Elizabeth MacKenzie, PhD Licensed Psychologist, West Seattle Psychological Services

Tupi Maestas, RN and SEIU1199NW

Tina Maestas, RN

Jeffrey Maggio

Cynthia Mahoney, MD

Heidi Mailer, RN

Cathy Maisonave Geisinger

Kathleen Malkin, Sr. Lecturer

Genevieve Marchand, PhD Researcher IRSST

Brittany Marcinkevich, RN

Megan Margavage

Olabisi Marinho

Mary Marshall, RN, MSN, ANP

Erica Marsilii

Barbara Materna, PhD, CIH Retired Chief, Occupational Health Branch, California Department of Public Health

Diane Matthew Brown

Stephanie Maurer, RN

Maureen May, RN

Joan Mayer, MPH

International Health Consultant with various organizations

Shirlene Mayger, BSN, RN

Michelle Mc Abee, MPH

Jeane McCans, RN

Kelly Mccloskey, RN BSN

Meghan McCoy, MD

Melissa McDiarmid, MD MPH DABT

Professor Medicine, Epidemiology and Public Health, University of Maryland School of Public Health, Baltimore, MD

Suzanne McDonald, RN

Leslie McGary, RN OCN

Debbie McGee, RN

Hayley McMahon, MSPH, CPH Doctoral Student, Emory University Rollins School of Public Health

Stacy McNall, DNP, APNP

Tracy McNally, MFM Sonographer

Ann McNitt, BSN RN

Meghan McNulty, PE Senior Engineer, Servidyne

Kathleen McPhaul, PhD, MPH, RN

Research Associate Professor, University of Maryland School of Public Health

Tanisha Merritt, BSN

Brittany Meyer

David Michaels

Professor, George Washington University School of Public Health; Assistant Secretary of Labor for OSHA (2009-2017)

Rebecca Millberg, RN BSN

Anne Miller

Executive Director, Project N95

Mary Ellen Miller

Associate Professor, Retired, DeSales University; Board Certified in Advanced Public Health Nursing (PhD, RN, PHNA-BC)

Carrie Miller, MEM, MPH

Felicia Miller, RN

Sharon Miller, RN

Mary Miller, RN, MN

Occupational Health and Safety Section/American Public Health Association

Donald Milton, MD, DrPH

Professor, Environmental and Occupational Health, University of Maryland School of Public Health

Gina Miranda Diaz, MSN, MPH, DNP, APHN-BC

Amber Mitchell, DrPH, MPH

Carole Mitchell, RN

Jack Mohr

CSU Channel Islands

Celeste Monforton, DrPH, MPH Texas State University

Josh Montrenes, PhD

Shay Moody, RN

Adam Moore, MPH

David Moore, MPH, CIH Principal Consultant, CEO

John Morawetz

Lidia Morawska

International Laboratory for Air Quality and Health, WHO Collaborating Centre for Air Quality and Health, Queensland University of Technology

James Morris, PhD QA Manager Lisa Morrow, DNP, FNP, LAc

Karen Mulloy

Associate Professor, Case Western Reserve University School of Medicine

Shamirah Munn

Dawn Munn, RN

Linda Rae Murray, MDPH
Past President American Public Health Association

Diane Myers, RN

Brendon Nacewicz, MD PhD

Carrissa Nandlal

United States Public Health Service Officer

Michael Natt

Patient Advocate/Expert, Long Covid Support

Amanda Nawrot

Associate Nursing Professor/RN

Kenya Ned, Registered Nurse

Kelly Nedrow

Alina Neganovs, Registered Nurse

Linda Nelson, DNP, MPH, APRN

Sarah Nelson, MSc

David Newman

Industrial Hygienist, EOHS Associates LLC

Magdaline Ngoh

Mark Nicas

Emeritus Adjunct Professor, School of Public Health, University of California, Berkeley

Brittany Noble, LCSW

Amber Noffke, RN

Teresa Noga, RN

Kathleen Norlien MS, CPH

Minnesota Department of Health and belong to Minnesota Public Health Association (past president)

Belinda Novik, MSCP, MD, PhD Medical psychologist, retired

Kate Nyhan, MLS

Harvey Cushing/John Hay Whitney Medical Library, Yale University

Lisa O Connor

Teresa O'Mara, LCSW, MSSW

Kara O'Neal, PhD Immunologist, PhD

Jessica Offir, PhD

Health Risk Intervention Expert, Retired

Michael Olesen

Currently unaffiliated infection preventionist

Elizabeth Oram

Nurse Practitioner, City University of New York

Rosa Maria Orriols

International Commission on Occupational Health- Women in global health - Societat catalana Salut laboral

Kayla Ortiz, MPH, CHES

Research Assistant, University of Pittsburgh

Oyewale Oyediran

Biorisk Manager in University

Theodore Pak, MD, PhD

Fellow in Infectious Diseases, Massachusetts General Hospital

Merly Palathinkal, MSN RN CNOR

Hilda Palmer

Judith Pare

Director/Division of Nursing Massachusetts Nurses Association

Deborah Parker, BSN

Rachel Parker, MSW

Leigh Parris, BSN, RN

Crystal Pasiliao, PhD

Gina Passantino, MEd

Palak Patel, Infection Preventionist

Stephen Patterson, CIH, CHMM Global Director of Industrial Hygiene

Elise Pechter MPH, CIH (ret) National COSH Adviser

Kyle Peerless, MPH

California Department of Public Health, Occupational Health Branch

Priscilla Penkert, RN, BSN

Janina Pepe

L. Perdue

Ricky Perry

Licensed Creative Arts Therapist in New York State, Board-Certified Music Therapist

Elizabeth Peterson, BSN, RN

Miriam Pham

Elterneigeninitiative-Berlin, Charité-Berlin

Elle Pierce, BSN, RN, CPN

Lisa Pompeii

Professor, Division Director, Cincinnati Children's Hospital Medical Center

Christine Pontus

Associate Director Health & Safety - Massachusetts Nures Association

Carol Poper, retired RN

Deborah Portley, BSN RN CCTC

Leah Postman

Laura Price, MA Epidemiology, Santa Barbara County Public Health, Retired

Cheryl Pride, RN

Janice Prudhomme, DO, MPH
Retired Annuitant, Cal/OSHA Medical Unit

Frances Prudinski, RN PASNAP

Barbara Pullman, RN BSN

Laura Punnett, ScD Professor, Univ. of Massachusetts Lowell

Sara Putnam, MPH from Columbia Mailman School of Public Health Work experience: NYC Department of Health and Mental Hygiene - including in emergency response roles, New York Academy of Medicine, International Society for Urban Health, Columbia University SPH, and WHO HIV/AIDS Department

Maria Pyra, PhD MPH Feinberg School of Medicine, Northwestern University

Devin Quinn

Caitlin Quinn, Health Teacher

Margaret Quinn, ScD, CIH Professor Emeritus and Director, Safe Home Care Project, Dept of Public Health, University of Massachusetts Lowell, USA

Em Rabelais, PhD, MBE, MS, MA, RN

Richard Rabin, MSPH

Gilberto Ramos-Pesquera, MD

Rosa Ramos, MD

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Shea Witzberger William Wright Noga Wizansky Adeline Wu Anna Wolak Sabrina Wu Constance Wold Sarah Wu, EdS MA CCC-SLP Jean Wolitzer Victoria Wu, PhD Sarah Wong Ellen Wuertz Kimberly Woo Katherine Wurth Pria Wood, PhD Rev. Chris Wylie **Connie Woods** Cynthia Yock, RRT, MS

Judy Woods Jennifer Young

Martha Young
Jen Zaman
Honesty Zamudio
Sita Zarcufsky
Jillian Zdepski
Judith Zerden
Christine Zimmermann

Kailey Zitaner

Cc:

The Honorable Xavier Becerra, Secretary U.S. Department of Health and Human Services

The Honorable Dr. Rachel Levine, Assistant Secretary for Health U.S. Department of Health and Human Services

Dr. John Howard, Director National Institute for Occupational Safety and Health Centers for Disease Control and Prevention

Dr. Daniel Jernigan, Director National Center for Emerging and Zoonotic Infectious Diseases Centers for Disease Control and Prevention

Dr. Alexander J. Kallen, Designated Federal Officer
Healthcare Infection Control Practices Advisory Committee
Prevention and Response Branch, Chief
National Center for Emerging and Zoonotic Infectious Diseases
Centers for Disease Control and Prevention

Dr. Michael Bell, Deputy Director
Division of Healthcare Quality Promotion
Centers for Disease Control and Prevention

Arati Prabhakar, PhD, Director White House Office of Science and Technology Policy (OSTP) Assistant to the President for Science and Technology

The Honorable Neera Tanden
Assistant to the President and Domestic Policy Advisor

The Honorable Julie A. Su, Acting Secretary U.S. Department of Labor

The Honorable Douglas L. Parker, Assistant Secretary for Occupational Safety and Health U.S. Department of Labor