



Sample Letter
Recipient- COVID-19
Expert Vaccine Allocation Panel

RE: Veterinarians and Staff as a Vaccine Priority Group

Dear EVAP Member,

The members of the Texas Veterinary Medical Association (TVMA) are extremely thankful for all of the human healthcare workers and caregivers who are on the frontlines battling SARS-CoV-2 (COVID-19) throughout our great state. They truly are heroes for putting themselves directly in the path of the virus to serve others and care for our most vulnerable populations. Science has now given us the wonderful gift of a vaccine that can potentially mitigate the worst effects of this pandemic, and we understand that decisionmakers are in the process of determining how to initially allocate potentially scarce supplies.

TVMA respectfully requests that Doctors of Veterinary Medicine (DVMs), Licensed Veterinary Technicians (LVTs), veterinary assistants and other veterinary team members be included within the priority recipient group for vaccination against COVID-19 during Phase 1B. Veterinarians and their teams are Essential Critical Infrastructure and do not have the option of working from home. They contribute directly to supporting the food and agriculture industries, providing essential services and critical support for the sufficiency, safety and marketability of our states' food supply. In addition, veterinarians actively participate in protecting public and animal health through surveillance for the SARS-CoV-2 virus in non-human animals. The surveillance function of the veterinary profession extends well beyond SARS-CoV-2, including additional protection of the public health by diagnosing, controlling and investigating zoonotic, foreign and emerging communicable diseases. Finally, humans and animals are inextricably linked, and therefore it is imperative to understand the connection and impact that veterinarians of all practice types have not only on animal health but also on human health and well-being.

There is no question that veterinarians are essential to infrastructure viability in the food and agriculture industry. The Cybersecurity and Infrastructure Security Agency (CISA) Essential Critical Infrastructure Workers Guidance framework recognizes this fact (pg. 11, bullet 4). Animal protein is a key part of our nation's food supply, and access to food that is sufficient in quantity, of high quality and safe to consume is obviously critical to maintaining good human health.

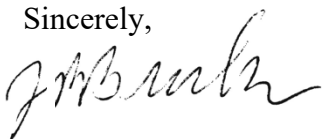
As essential businesses, veterinarians and their teams have provided services throughout the pandemic and, in doing so, have used creative approaches to implement important engineering and administrative risk management controls (e.g., social distancing, use of physical barriers, curbside service, telemedicine consults) and also have thoughtfully used (and conserved) personal protective equipment (PPE). The reality, however, is that veterinarians and veterinary staff are not always able to maintain physical distancing from each other or from the public when handling animals or performing medical procedures. The risk of regular and repeated exposure to other people is obvious and includes exposure to those members of the public who may be ill (symptomatic or not) with COVID-19 but whose animals continue to need care and who may

accordingly end up exposing veterinarians and their teams. However, the risks assumed when performing medical procedures on animals may be less recognized. Just as in human medicine, some of those medical procedures result in exposure to bodily fluids, including through aerosolization. Although SARS-CoV-2 appears to rarely affect non-human animals, we are aware that dogs, cats, mink, tigers and lions have acquired the infection naturally and that ferrets, bats, hamsters and macaques have been infected experimentally. As such, exposure to these species presents some level of risk for our doctors and our teams, including those working in animal research laboratories and zoo and wildlife facilities. Accordingly, the CDC has recommended the use of enhanced PPE when handling animals coming from environments where COVID-19 is known or suspected, particularly when such animals will undergo medical procedures that expose veterinarians and our staff to bodily fluids. Recognition of such heightened risk seems to support a recommendation for prioritized access to vaccination for veterinarians and our teams.

In addition to veterinarians' important roles in protecting the health and safety of our nation's food supply and the health of our pets, veterinarians provide critical surveillance for the presence of SARS-CoV-2 in non-human animals. Most are familiar with the theory that SARS-CoV-2 emerged from an animal source and then spilled over into the human population. And, as previously mentioned, several species of animals infected with SARS-CoV-2 have been reported by multiple countries. While, fortunately, evidence from risk assessments, epidemiological investigations and experimental studies to date does not suggest live animals or animal products play a role in supporting ongoing SARS-CoV-2 infections in humans, further study, including active surveillance, is needed to understand if and how different animals might be affected by SARS-CoV-2. Also important to acknowledge is the fact that the veterinarian's role in surveilling for disease extends beyond SARS-CoV-2 to identifying and reporting infections with other potentially zoonotic diseases and zoonotic pathogens. Monitoring infections in animals is critical to understanding the significance of such infections for animal health, biodiversity and human health.

Pets share our homes and have played an important role in supporting their owners' physical and mental well-being during this difficult pandemic. They provide an incentive for their owners to get at least a minimal level of exercise, and they have been an important source of emotional and social support as human-to-human contact has been reduced due to self-isolation and social distancing. Healthy veterinarians and their teams are absolutely critical to the availability and safety of our food as well as the health and well-being of pets. For all of these reasons, we urge you to include veterinary teams in Phase 1B of vaccine distribution.

Sincerely,



John Bruker, DVM
TVMA President