



Robert N. Golden, MD



Joseph E. Kerschner, MD

## A New Road Map for our Nation's Response to COVID-19

Robert N. Golden, MD; Joseph E. Kerschner, MD

Our state, our nation, and indeed the global village is experiencing the worst pandemic in a century.

Here in Wisconsin, new COVID-19 infections continue to rise. As we write this essay, the virus has killed more than 1,050 Wisconsinites — almost 210 in the past 30 days alone.<sup>1</sup> Similar data trends occur nationwide. In total, the Centers for Disease Control and Prevention (CDC) reports more than 5.4 million cases and almost 170,000 deaths in the US since January 21, 2020.<sup>2</sup> And for those who survive, we still don't know the long-term consequences or future health challenges they will face.

Our country needs a new path forward in the battle against the virus. The state's two medical schools — the University of Wisconsin School of Medicine and Public Health and the Medical College of Wisconsin — are heading up this fight by launching innovative COVID-19 clinical trials, developing rapid diagnostic testing, studying the complexities of this virus, and increasing our capacity to offer telehealth and virtual visits.<sup>3-7</sup> Our physicians, nurses and other health care professionals are working tirelessly. However, these frontline fighters

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**Author Affiliations:** Robert N. Golden, MD, is the dean of the School of Medicine and Public Health and vice chancellor for medical affairs, University of Wisconsin-Madison. Joseph E. Kerschner, MD, is the dean of the School of Medicine and provost and executive vice president of the Medical College of Wisconsin in Milwaukee, Wis.

need support from everyone to limit the spread of this virus.

The doctors, scientists and medical educators of the Association of American Medical Colleges (AAMC) — of which both our organiza-

organized plan of attack — particularly for supplies, testing, and standards.

Combatting COVID-19 requires robust and intact supply chains. Shortages in laboratory equipment, personal protective equip-

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tions are members — have concluded that we must take a stand together. The AAMC recently released a road map to reset the nation's approach to the pandemic. It proposes evidence-based steps for immediate action.<sup>8</sup> Each step outlined in the road map is essential in its own right, but taken together, they constitute a coordinated national response that is sorely needed. The current patchwork approach — in which institutions such as ours are left to fend for ourselves, competing with other facilities for resources — costs lives and causes needless suffering.

Wisconsin's medical schools support this plan. COVID-19 has not been contained by the current patchwork approach. To win the war against this virus, we desperately need an

ment (PPE) and other vital medical supplies (which our institutions and others throughout Wisconsin have already encountered) leave everyone vulnerable.<sup>9-10</sup> To address this, we have adopted policies to conserve PPE usage, developed creative efforts to obtain new PPE and consolidated efforts within our facilities to create efficiencies and centralized supplies of PPE. Many hospitals, particularly those in hot spots, are struggling with the reality of PPE shortages, but it's not enough.

The AAMC plan urges the federal government to invoke the Defense Production Act<sup>11</sup> or other means to increase domestic production of such supplies. So no facility is caught short, the government should set thresholds and develop regional warehouses and stock-

piles, with attention to greatest-need areas.

To fight effectively, we need to know where the enemy is. That requires testing. We embrace AAMC's recommendation for enhanced COVID-19 daily testing (2.3 million tests per day to keep pace with positivity rates) to identify flare-ups.<sup>12</sup> This will require federal coordination of testing and supply levels. We need a central web portal for records so we can react swiftly to shortages in testing supplies. We also need rapid delivery of test results. And as tests become more available, test results need to be delivered more quickly. This is critical. Since COVID-19 spread often occurs before an infected person shows symptoms,<sup>13-15</sup> three things are essential: readily available testing, rapid reporting of results, and contact tracing when an individual is positive.

We need common tactics to battle this virus. We support national standards for face coverings. Our nation needs uniform criteria for stay-at-home orders, reopening businesses, and in-person instruction at K-12 schools. We support the AAMC's guidance for face coverings.<sup>16</sup> While there are horrible disparities among certain populations<sup>17-18</sup> and some location-specific challenges, the way the virus spreads depends on human biology. That does not vary from city to city or state to state. National standards will allow all communities to make informed decisions.

These steps must be taken immediately. The road map also charts a longer-term path forward to help minimize or prevent the next pandemic, because a "lasting peace" in this war requires planning. Large-scale changes are needed in at least two areas: broadening health insurance coverage and strengthening our public health infrastructure. These long overdue changes will help minimize or prevent the next pandemic — and, even more, they will make the delivery of healthcare more equitable for all Americans.

Our nation has not faced a health challenge on this scale in more than a century, since the influenza pandemic of 1918.<sup>19-20</sup> Since then, health care and the life sciences have advanced by leaps and bounds. Yet the 1918 pandemic and the current one call on some of the same fundamental human qualities: resilience, compassion and, above all, a recogni-

tion that we are in this together. The people of our two medical schools and affiliated health systems remain ready to join with others to do our part.

We encourage physicians throughout Wisconsin to support this road map, which provides a clear path away from the ravages of COVID-19 and toward a safe, healthy state.

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