July 12, 2021

Dr. Rochelle P. Walensky, MD, MPH, Director
Centers for Disease Control and Prevention
1600 Clifton Rd.
Atlanta, GA 30329

Dear Dr. Walensky:

On behalf of National Nurses United, the largest labor union and professional association for registered nurses in the United States, I am writing to urge you once again to update the U.S. Centers for Disease Control and Prevention (CDC) Covid-19 guidance. Our suggestions are based on science and the precautionary principle and are made in order to protect nurses, other essential workers, patients, and the public from Covid-19.

The Covid-19 pandemic is far from over. In the United States, the CDC reports a 16.0 percent increase in daily new cases over the previous week. More than 40 states have seen an increase in daily new cases over the previous two weeks, and more than 25 states have seen an increase in hospitalizations. Due to domestic and global travel, the United States cannot be viewed in isolation. Globally, incidence remains high with several regions around the world seeing significant increases in cases and emergence of new variants of concern.

Variants of concern, including the Delta variant, continue to spread quickly. Preliminary data from Israel and the United Kingdom indicate that Covid-19 vaccines may be less effective against the Delta variant than other variants. New variants, such as the Delta

---

Plus and Lambda variants, have and will continue to emerge and pose a threat while the virus continues to spread.6

It should come as no surprise that cases are rising following the rapid reopening of many states and the removal of public health measures, including the CDC’s May 13 guidance update that told vaccinated individuals they no longer needed to wear masks, observe physical distancing, avoid crowds, or get tested or isolate after an exposure, within only a few exceptions. The CDC’s guidance failed to account for the possibility—which preliminary data from the United Kingdom and Israel now indicates is likely—of infection and transmission of the virus, especially variants of concern, by fully vaccinated individuals.7,8

The CDC’s May 13, 2021 guidance also failed to protect medically vulnerable patients, children, and infants who cannot be vaccinated, and immunocompromised individuals for whom vaccines may be less effective. While Covid-19 vaccines are important public health tools, and the vaccination effort has been truly historic, Covid-19 vaccines are not enough by themselves to combat the pandemic. As NNU outlined in a scientific brief on May 17, 2021, a multiple measures approach remains necessary to protect public health.9

The threat of this virus remains very real. To protect public health, we call upon the CDC to:

• Reinstate the recommendation for everyone to wear masks when in public or in physical proximity to others outside their own household.

NNU strongly urges the CDC to reinstate universal masking, irrespective of vaccination status, to help reduce the spread of the virus, especially from infected individuals who do not have any symptoms. SARS-CoV-2, the virus that causes Covid-19 disease, spreads easily from person to person via aerosol transmission when an infected person breathes, speaks, coughs, or sneezes. Asymptomatic or pre-symptomatic infected individuals can spread infectious SARS-CoV-2 aerosols during breathing and speaking, without coughing or other respiratory symptoms. Studies indicate that approximately half of all transmission events are from cases that have no symptoms.10

---

According to the CDC, only 48 percent of the total population in the United States have been fully vaccinated as of July 11, 2021, which means there are still many unvaccinated individuals, many of whom are not yet eligible for vaccination, including children under the age of 12 years and infants, who remain vulnerable to infection, hospitalization, and death as well as long-term impacts from infection.

While Covid-19 vaccines are effective at preventing severe illness and death from the virus for vaccinated individuals, no vaccine is 100 percent effective and the emergence and spread of variants of concern may reduce vaccine effectiveness. In particular, the Delta SARS-CoV-2 variant poses a significant concern as it is already dominant in the United States. As noted above, preliminary evidence indicates infection in and transmission from vaccinated individuals with the Delta SARS-CoV-2 variant.11,12

Masks are a simple and effective tool, especially when used in combination with other measures to reduce the risk of Covid-19.13 Further, on June 25, 2021, in response to reports of the rapid spread of the Delta SARS-CoV-2 variant, the World Health Organization urged fully vaccinated people to wear masks. As Dr. Mariângela Simão said, “...vaccine alone won’t stop the community transmission and we need to ensure that people follow the public health measures.... People need to continue to use masks consistently, be in ventilated spaces, hand hygiene, respiratory etiquette, the physical distance, avoid crowding.”14

- Update health care infection control and other Covid-19 guidance to fully recognize aerosol transmission.

National Nurses United (NNU) welcomed the CDC’s May 7, 2021 update to its Scientific Brief on Transmission,15 which, for the first time, recognized the overwhelming scientific evidence that Covid is aerosol-transmitted. This was a long overdue step in the right direction following months of advocacy by NNU and allies, including NNU’s petition signed


by 44 labor unions and allied organizations, representing more than 13 million members, sent to the CDC in February 2021.16

However, even after recognizing the scientific evidence on aerosol transmission, the CDC refused to update its Covid-19 guidance accordingly, stating, “Although how we understand transmission occurs has shifted, the ways to prevent infection with this virus have not. All prevention measures that CDC recommends remain effective for these forms of transmission.”

As a result, Covid-19 guidance created by the Trump Administration, including dangerous crisis standards that allow for reuse of single-use personal protective equipment (PPE), are still in place and continue to endanger nurses’ lives every day. NNU strongly urges the CDC to update its Covid-19 guidance for nurses and other frontline workers to fully recognize aerosol transmission, including prioritizing engineering controls, such as ventilation and air filtration, and respiratory protection and revoking crisis standards for PPE.

Over the past 16 months of the pandemic, the CDC’s refusal to fully recognize aerosol transmission of SARS-CoV-2 has led to weak guidance, leaving workers and the public unprotected. As a result, nurses and other health care workers, in addition to countless workers in every industry, have been infected, leading in many cases to hospitalization, death, and long-term health impacts from Covid-19. This is the result of employers following weak CDC guidance leading to lack of work protections.

The CDC’s recognition of the science is an important step forward, but the agency continues to fail to fully recognize aerosol transmission of Covid. Fully recognizing Covid aerosol transmission would require the CDC to update and strengthen its Covid guidance to provide protection from inhalation of the virus in the air.

- **Require tracking and transparent reporting of Covid infections among health care workers and other essential workers.**

More than 16 months into the pandemic, there is still no uniform national framework to track and report Covid infections among health care workers and other essential workers. As of July 11, 2021, only 18.91% of Covid-19 case reports received by the CDC have known health care provider status.17 As NNU observed in our updated *Sins of Omission* report:18

Unceasing (and well-deserved) praise is heaped upon the heroics of our health care workforce by hospital and health care industry executives and politicians alike. The

---


simple fact is that in our modern data-driven world, “we treasure what we measure.” The flip side of that is that what we fail to measure is devalued, ignored, and dismissed. It is simply an outrage that a year into the Covid-19 pandemic, we do not have comprehensive, consistent health care worker death and infection data.

The CDC has failed to effectively track health care worker infections and deaths from Covid-19. As of July 11, 2021, the CDC reports that 1,691 health care workers have died from Covid-19. But NNU has tracked reports of at least 3,956 health care workers who have died from Covid-19, as of July 9, 2021.²⁹

Timely and accurate surveillance data remains important to an effective Covid-19 pandemic response and protecting nurses and other health care workers. NNU urges the CDC to improve tracking and require transparent reporting of Covid infections among health care workers and other essential workers.

- **Track infections in people who are fully vaccinated, including mild and asymptomatic infections.**

The CDC’s decision at the beginning of May to only track vaccine breakthrough infections if they result in hospitalization or death was imprudent and short-sighted. Many questions about SARS-CoV-2 and Covid-19 vaccines remain unanswered. For instance, it remains unclear how effective Covid-19 vaccines are for immunocompromised individuals, how long protection may last, and how well Covid-19 vaccines prevent asymptomatic and mild infections and transmission of the virus. Careful study of breakthrough infections in fully vaccinated individuals, regardless of symptoms, is critical to determining vaccine effectiveness and duration of vaccine protection or whether emerging SARS-CoV-2 variants are becoming more resistant to vaccines. This data is necessary to fully understand impact of emerging SARS-CoV-2 variants.

While hospitalization and death are serious outcomes of Covid infection that are important to prevent, when opting to study only breakthrough infections resulting in hospitalization or death the CDC failed to acknowledge the harm caused by long Covid. Long Covid is a condition that refers to symptoms that can persist for several weeks or months following initial infection with the virus. Studies have shown that long Covid is not predicated on the severity of symptoms or disease. Chronic impacts of Covid-19 can occur among previously healthy individuals, across all age groups, including children.²⁰ Preventing the risk of Covid-19 infection, not just hospitalization and death, is necessary to prevent the risk of long Covid. Further, systemic tracking of vaccine breakthrough infections is critical to understand the impact of vaccines on long Covid.

---


In Conclusion

The pandemic is not over, and the United States once again stands on the precipice of rising cases. Nurses and health care workers stand ready to care for the sickest patients and to be a crucial part of the pandemic response. But our members need safe workplaces in order to ensure the safety of their patients and communities. NNU strongly urges that the CDC strengthen and improve its guidance to protect nurses, our patients, and the public. If you have any questions about the contents of this letter or would like to set up a meeting, please contact Kenneth Zinn, NNU’s political director, at 202-297-4976 or at kzinn@nationalnursesunited.org.

Sincerely,

Bonnie Castillo, RN
Executive Director
National Nurses United

cc: The Honorable Xavier Becerra, Secretary, US Department of Health and Human Services
    The Honorable Marty Walsh, Secretary, US Department of Labor
    Mr. Jeffrey Zients, White House Coronavirus Response Coordinator