

From: [Mcquire, Ryan J Lt Col USAF 8 MDG \(USA\)](#)
To: [Rubin, Richard M Lt Col USAF 8 MDG \(USA\)](#)
Subject: FW: 7AF Close Contacts that are vaccinated
Date: Thursday, March 10, 2022 6:43:55 PM

FYSA

From: SWANSON, MATTHEW J Col USAF PACAF 7 AF/CS <matthew.swanson.1@us.af.mil>
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Sent: Thursday, March 10, 2022 1:38 PM
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+ Others for update

Mustang and team, JA and SG received approval by R1 to adj Close-Contact policy to the full extent of 7AF Component authority, using “if practical” wording opportunities in HHQ guidance.

It will roughly look like:

- Close-contact identification to CC/supervisor and other close contacts
- Required testing for unvax'd
- Vax'd don't have to be tested, but can if the broader team desires it (could be the individual, unit, or medical team).

SG is working wording through your MDG teams before submission for signature.

Vr, Edge

From: SWANSON, MATTHEW J Col USAF PACAF 7 AF/CS
Sent: Monday, March 7, 2022 10:27 PM
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Ok, thanks Mustang for helping me sharpen my pencil. The staff were in agreement the burden shifts from PH. Now it's prying apart assumptions in the policies.

Adding the CS team over the next 3 months who will have to flight follow and aggressively engage the removal of all these policies.

They also saw my email to USFK needing demanding we engage the SOFA Committee so that all SOFA members receive the same rights as citizens. We are again denied legal protections as the ROK is not recognizing SOFA prior positives which arrive through Incheon. USFK has a cutout for military aircraft passengers, but is missing the mark again on the point of a SOFA agreement. Impacting readiness, mental health, and so on.

Vr, Edge

From: WOOD, JOSHUA T Col USAF PACAF 51 FW/CC <joshua.wood@us.af.mil <<mailto:joshua.wood@us.af.mil>>>

Date: Monday, Mar 07, 2022, 10:11 PM

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Edge,

In priority order, here are the 'low hanging fruit' wins I'm hoping for...

1) No mandatory testing requirements for asymptomatic, fully vaccinated close contacts.

2) Do not consider fully vaccinated members close contacts at all, and skip them from the close contact tracing process (IE, <3% of our >1600 Cv +s were from fully vax'd close contacts)

-not requesting any changes to unvax'd

If #2 isn't feasible given the FHPG, then let's at least press with #1. Hopefully PH will soon get out of the contact tracing business altogether.

I hope this clarifies, and thanks for the follow up.

Mustang

Col Josh "Dog" Wood

Commander, 51st Fighter Wing

DSN: 315-784-5101

"Leading the Charge"

From: SWANSON, MATTHEW J Col USAF PACAF 7 AF/CS <matthew.swanson.1@us.af.mil
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Date: Monday, Mar 07, 2022 20:43

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Mustang, thanks for your clarifying call today. I was trying to can everything, which might have been too broad. Below are 4 different avenues, but not all are low hanging fruit. Pending your clarification.

I think if I read back your ask today, is that you no longer desire to test vaccinated close contacts as the policy reads

“if practical” and we’re no longer saying it’s practical?

Or, you were also saying the “should” in the unvaccinated section, also drive you to not test unvaccinated on day 5 either?

Or, perhaps you are asking to not accomplish close contract tracing?

Or, based on our telecon, you are asking to not consider fully vaccinated close contacts, and skip them in the contract tracing process.

Again, thanks for your time.

Vr, Edge

Clarifying question – is the desired change that fully vaccinated are (a) not considered close contacts or (b) are not tested while close contacts? I think it will be difficult getting to (a) due to FHPGs, but see a very reasonable way to yes on (b).

DoD FHPG (attached and pertinent paragraphs below) still requiring close contacts (regardless of vaccination status) and potential quarantine (depending on vaccination status). PACAF SG telecon last Friday said DoD working a playbook leveling all the covid guidance. The draft I have seen still has close contact definitions and requirements similar to FHPGs.

...The one part I think we all agree on is changing the ‘will’ test at day 5 to ‘may’ test for up to date and depending on the covid environment/IR on the base. Still working through the different guidance and acceptable wording.

The second issue is that the CDC has now removed Public Health from the contact tracing process except for specific settings and groups at increased risk. (<https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/prioritization.html>)

health departments should support public education to encourage people with COVID-19 to follow isolation guidance and inform close contacts about their potential exposure so close contacts can quarantine, get

tested, wear well-fitting masks, take precautions when traveling, and consider treatments as appropriate.

FHPG Sup 18, pg 2 first and second paragraph

- Regardless of COVID-19 vaccination status, DoD personnel who test positive for COVID-19 will remain out of the workplace for 5 calendar days. Individuals may return to the workplace after 5 calendar days, if either: (1) they have no symptoms; or (2) if they are afebrile for more than 24 hours and any remaining symptoms are resolving. Mask wearing must continue in the workplace for an additional 5 calendar days, even in circumstances in which mask wearing is not required by any other DoD guidance.

- Personnel with potential exposure to COVID-19 based on close contact with a person who has a laboratory confirmed, clinically diagnosed, or presumptive case will notify their commander or supervisor. "Close contact" is defined in reference (f).

FHPG Sup 15, pg 4 last paragraph and footnote 4, pg 5 first and second paragraph

4 Close contact is defined as someone who was within 6 feet of a person who has contracted COVID-19 for a cumulative total of 15 minutes or more over a 24-hour period starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to test specimen collection) until the time the patient is isolated and irrespective of whether the person with COVID-19 or the contact of such a person was wearing a face covering or mask or respiratory personal protective equipment. Not applicable to health care workers when following appropriate infection control precautions.

Management of Close Contacts⁴ of a Case (as determined by contact tracing):⁵

- When the close contact is an individual vaccinated with an FDA licensed or authorized COVID-19 vaccine, quarantine is required unless the individual has: (1) received an FDA licensed or authorized COVID-19 booster dose; or (2) it has been less than 6 months since completion of the primary series with an mRNA vaccine (i.e., Pfizer-BioNTech/Comirnaty or Moderna); or (3) it has been less than 2 months since receiving a Johnson and Johnson COVID-19 vaccine dose as a primary vaccination. Regardless of vaccination status, close contacts must wear a mask around others for 10 days, even if mask wearing is not otherwise required by DoD guidance, and if practical, test on day 3-5 following exposure. If symptoms develop, then the individual must get tested and isolate until test results are complete.

- Close contact individuals who are not fully vaccinated must quarantine for 5 days. The individual should wear a mask at all times when around other individuals, regardless of those individuals' vaccination status, and even if mask wearing is not otherwise required by DoD guidance. Testing should occur on day 3-5 after exposure, if practical. If no symptoms develop, quarantine may end after 5 days, but the individual must continue to wear a mask around others for an additional 5 days (i.e., masks must be worn for a total of 10 days after exposure, to include the time in quarantine). If any symptoms develop at any time, the individual should be tested for COVID-19 and advised to isolate.