

August 2, 2021

Dear Mr. Cooper and Mason City School Board members,

We are writing to you as a group of concerned physicians in the Mason City School district. For the past year we have not only dealt with COVID in our personal lives, but also our professional ones. While we are grateful that the country is in a better place now with COVID than we were a year ago, we also know that the pandemic is not over yet and that now is not the time to abandon precautions. This is especially true for children under the age of 12 who are not yet eligible for a COVID vaccine and are therefore still vulnerable to COVID infection and any resulting ill effects. With the emergence of new, more transmissible variants, such as the Delta variant which has been shown to be transmissible even by vaccinated individuals due to high viral load, COVID mitigation strategies are even more important now, particularly in unvaccinated populations.

The most recent email from Tracey Carson sent to parents on July 27, 2021 regarding 21-22 Safety Protocols for Returning to School, includes the protocol for masks, which has been determined to be “strongly recommended”, but nonetheless optional, for all students and staff, regardless of vaccination status. This recommendation is in direct opposition to guidance released by the Centers for Disease Control (CDC), the American Academy of Pediatrics (AAP), the Ohio Department of Health (ODH), the Warren County Health District (WCHD), Cincinnati Children’s Hospital and Medical Center (CCHMC) and Ohio Governor Mike DeWine, all of whom strongly support mandatory masking for students and staff. The CDC and AAP have both released updated school guidance strongly recommending **universal masking for all students and staff, regardless of vaccination status**. Unfortunately, none of these entities has the ability to overtly mandate masks, but instead they can make the recommendation of universal masking, which they have all done. It is ultimately up to the school district to implement such a requirement.

We are writing to implore you to continue to require universal masking of students and staff indoors at all Mason City Schools in accordance with these guidelines. Optional masking is simply not sufficient, as masks are most effective when all parties are wearing them. Parents, students, and staff should not be given the choice to mask when this choice endangers the health of other children and staff.

The most recent data for our region shows increasing transmission (as measured by R values), increasing incidence, increasing hospitalizations, and increasing test positivity rates (with the 5-17-year-old age group among the highest positivity rates), likely fueled by the Delta variant. As medical professionals, we can also attest that we are unfortunately under-testing due to many symptomatic patients refusing testing, and we are concerned that many parents of sick students will do the same. With the Delta variant currently causing surges across the country, and outbreaks occurring in youth summer camps where masks and vaccines were not required, we can expect our local COVID numbers to continue to worsen. While we are grateful that a large proportion of adults in our community are fully vaccinated, the fact still remains that children under the age of 12 are not vaccinated, a large percentage of students aged 12-18 are still not vaccinated, and parents have no guarantee that their child’s teacher will be vaccinated.

The updated CDC guidance for COVID prevention in schools recommends “universal indoor masking for all teachers, staff, students, and visitors to K-12 schools, regardless of vaccination status.” The guidance does not promote or even suggest optional masking. Furthermore, the guidelines explicitly state that when 3 feet of physical distancing cannot be guaranteed (as will be the case at Mason City Schools at full in-person capacity), “it is especially important to layer multiple other prevention strategies, such as indoor masking.” Per most recent CDC data, Warren County has a “substantial” level of community COVID transmission. Based on CDC guidelines, Mason City Schools should therefore be offering screening testing to students and staff weekly. If the current protocol is implemented, three major pillars of mitigation – mandatory masking, guaranteed physical distance of at least 3 feet, and screening testing – will not be met. This is unacceptable.

Mason City Schools district did an exemplary job of listening to public health advice last school year, which allowed for safe and successful in-person learning. We truly believe, and science supports, that masks played a large role in this success. Universal masking works - this can no longer be debated - and children have proven that they can mask effectively. At Mason City Schools specifically, this is illustrated by the fact that the vast majority of COVID cases occurred from unmasked settings (both in the community and in extracurricular school activities) versus minimal to virtually no in-class transmission.

Beginning in the spring, the practice of universal masking also allowed for a great reduction in the number of students that were required to quarantine following COVID exposure, and Mason even set an example nationally with regard to potential ability to decrease quarantine time when all parties were appropriately masked. For vaccine ineligible children, if masks are not worn by all, there will be many more students required to miss school per CDC and ODH quarantine guidelines, including students who choose to mask, if the student/staff who tests positive is unmasked. We all share in the collective goal of getting all students back in school safely and *keeping* them in school. Universal masking will undoubtedly help achieve this goal. Without a virtual learning option this school year, more students will be in each classroom, which means less ability to social distance and an even greater importance on masking. Masks also had the added benefit last year of keeping other viral respiratory illnesses at exceptionally low levels. This too kept more kids in school, decreased COVID testing burden, and lessened the stress on families of having to determine if an illness was COVID or not.

We empathize with the desire to return to “normalcy”; the pandemic has certainly taken a toll on all of us. We are hopeful that by the end of this calendar year, and possibly sooner, all school-aged children will have the ability to be fully vaccinated. Until that time, we unequivocally ask that the Mason City School board and administration continue to listen to scientific advice, including mandatory masking of all children and staff at all schools. This decision should not be political or emotional, but rather rooted in science and aligned with the recommendations of public health experts and medical professionals, whose job it is to guide us through this pandemic. It is also our hope that the Mason City School board and administration will continue to actively encourage all eligible students and staff to take advantage of the highly effective and safe COVID vaccines, which are truly our only way to end this pandemic.

We thank you for all of your incredibly hard work this past year. As physicians in the Mason and Deerfield Township community, we ask that you make the right choice to keep our students, staff, and community safe.

Respectfully,

- Mouhamad Abdallah, MD – cardiology
- Ajay Agarwal, MD – radiology
- Kirti Agarwal, MD – radiology
- Masood Ahmad, MD – allergy and immunology
- Aman Ahmed, MD – geriatrics
- Samina Ahmed, MD – pediatrics
- Shyam Allamaneni, MD – general surgery
- Daniel Almeida, MD – pediatric psychiatry
- Wafa Akkad, MD – family medicine
- Aparna Ambe, MD – internal medicine
- Asimul Ansari, MD – cardiology
- Asma Ansari, MD – dermatology
- Saba Ansari, MD – internal medicine and geriatrics
- Senu Apewokin, MD – infectious disease
- Farhan Arif, MD – nephrology
- Imran Arif, MD – cardiology
- Prajit Arora, MD – internal medicine
- Shoaib Asgher, MD – family medicine
- Alicia Bachus, MD – family medicine
- Joseph Benjamin, MD – radiology
- Lindsey Benjamin, DO – family medicine
- Caroline Billingsley, MD – gynecologic oncology
- Anantha Brahmamdam, MD – internal medicine
- Mark Callow, MD – neurology
- Stephanie Callow, MD – neurology
- Smitha Chandra, MD – internal medicine
- Roja Chimakurthi, MD – nephrology
- Saba Chughtai, MD – psychiatry

- Sara Continenza, MD – emergency medicine
- Dena Costa, MD – obstetrics and gynecology
- Edward Crane, MD – hematology/oncology
- Rebecca Miller Crane, MD MHSA
- Catrina Crisp, MD – urogynecology
- Kalpan Desai, MD – internal medicine
- Ashley Endres, MD – pediatrics
- Ariana Fisher, MD – pediatrics
- Robert E. Foster, MD – ophthalmology
- Martin Gnoni, MD – infectious disease
- Chandan Gupta, MD – family medicine
- Sandeep Gupta, MD – cardiology
- Mounira Habli, MD – maternal fetal medicine
- Husam Hamed, MD – family medicine
- Matthew Hardin, MD – internal medicine and pediatrics
- Yasmin Hassoun, MD – allergy and immunology
- Jonathan Howell, MD PhD – pediatric endocrinology
- Laura Howell, MD – pediatrics
- Brittany Hubbell, MD – pediatric hospital medicine
- Erin Hurlburt, MD – family medicine
- Amir Izhar, MD – nephrology
- Haseeb Jafri, MD – cardiology
- Danielle Johnson, MD – psychiatry
- Yemisi Jones, MD – pediatric hospital medicine
- Adrienne Jordan, MD – pathology
- Jyothi Joseph-Hayes, MD – endocrinology
- Ravi Juluri, MD – gastroenterology
- Anil Kakumanu, MD – internal medicine
- Maram Khabbaz, MD – family medicine and geriatrics
- Faiz Khaja, MD – ophthalmology
- Sara Khaja, MD – family medicine
- Ahmed Khalil, MD – anesthesiology
- Vidhya Kunnathur, MD – gastroenterology
- Elizabeth Leenellett, MD – emergency medicine
- Tom Lin, MD – pediatric gastroenterology
- Prashanth Lingam, MD – cardiology
- Melinda Mahabee-Gittens, MD – pediatric emergency medicine
- Junaid Malik, MD – pulmonary and critical care medicine
- Padma Mangu, MD – endocrinology
- Abdul-Mannan Masood, MD – internal medicine
- Ryan Matley, MD – emergency medicine
- Wojciech Mazur, MD – cardiology
- Tricia Minton, MD – pediatric psychiatry
- Mona Mislankar, MD - dermatology
- Swetha Narayana, MD – family medicine
- Saira Noor, MD – nephrology
- Stephanie Oliviera, MD – pediatric gastroenterology
- Ankur Patel, DO – pediatric otolaryngology
- Shivani Patel, DO – pediatric hospital medicine
- Snehal S. Patel, MD – nephrology
- Mini Pathrose, MD – family medicine
- Amit Rajput, MD – nephrology
- Tina Rajput, MD – pediatrics
- Srinivas Rajsheker, MD – cardiology
- Radhika Rajsheker, MD – hematology and oncology
- Scott Reeves, MD – pediatric emergency medicine
- Juan Ramirez, MD – hospital medicine
- Jill Roth, DO – obstetrics/gynecology
- Yasmin Sabet, MD – rheumatology
- Bassel Salem, MD – neurology
- Aisha Sethi, MD – pathology
- Bimal Shah, MD – anesthesiology
- Parthiv Shah, MD - cardiology
- Arundhati Sharma, MD – internal medicine
- Beth-Erin Smith, MD MPH – family medicine
- Jeffery Spatz, MD – emergency medicine
- Melissa Squires, MD MPH – pediatric neurology
- Melissa Summers, MD – orthopaedic surgery
- John Szawaluk, MD – cardiology
- Daniel Tanase, MD – pulmonary and critical care medicine
- Kirubel Tefera, MD – hematology and oncology
- Elizabeth Templin, MD – pediatrics
- Varsha Thomas, MD – pediatric endocrinology
- Ali Usmani, MD - cardiology
- Sudhaker Vadivelu, DO – pediatric neurosurgery
- Brinder Vij, MD - neurology
- Malti Vij, MD – internal medicine and obesity medicine
- Andrew R. Vogel, DO – pulmonary and critical care medicine
- Abid Yaqub, MD – endocrinology
- Nadia Yaqub, MD – endocrinology