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U.S. coronavirus death toll rises; New York, Los Angeles region confirm new cases

Inside C2

World's busiest border falls quiet with millions of Mexicans barred from U.S.

A general view of the Paso del Norte International Border Bridge, where the flow of people has decreased as new travel restrictions aimed at containing coronavirus disease (COVID-19) have stopped millions of Mexicans living close to the U.S. border from crossing back and forth, in Ciudad Juarez, Mexico March 30, 2020. REUTERS/Jose Luis Gonzalez

TIJUANA/CIUDAD JUAREZ, Mexico (Reuters) - The world's busiest land border has fallen quiet as restrictions to contain the coronavirus prevent millions of Mexicans from making daily trips north, including many who work in U.S. businesses.

At least 4 million Mexicans residing in cities along the 1,954-mile (3,144-km) border have been hit hard by the restrictions on non-essential travel. The measures effectively invalidate visas allowing short crossings into U.S. cities to visit family, get medical care or shop.

While such B1/B2 "border crossing cards" are officially recreational, Reuters spoke to nearly two dozen residents of Tijuana, Nogales and Ciudad Juarez who use their cards to reach jobs or to care for relatives on the U.S. side of the frontier.

All said they could no longer make the crossing, dealing another blow to businesses already suffering from shutdowns on the U.S. side of the border, including vital industries like agriculture.

"I don't know what I'm going to do without money. I'm just waiting for a miracle," said 28-year-old Rosario Cruz, a mother of two young children who works for a cleaning company that subcontracts with major retailers in California.

The coronavirus restrictions prohibit all non-essential travel across the border. However, the restrictions have not been widely imposed on U.S. citizens traveling to Mexico.

The U.S. Immigration and Customs Enforcement agency said it did not have an estimate of how many Mexican tourism-related visa holders work without permission in the United States. But U.S. and Mexican immigration experts say the practice is common.

According to the U.S. State Department Report of the Visa Office more than 4 million border cards have been issued since 2015. The cards are valid for 10 years.

A general view of the Paso del Norte International Border Bridge, where the flow of people has decreased as new travel restrictions aimed at containing coronavirus disease (COVID-19) have stopped millions of Mexicans living close to the U.S. border from crossing back and forth, in Ciudad Juarez, Mexico March 30, 2020. REUTERS/Jose Luis Gonzalez
Before the coronavirus restrictions, over 950,000 people entered the United States from Mexico on foot or in cars on a typical day, according to 2019 U.S. Customs and Border Protection (CBP) agency data.

Andrew Selee, president of the Washington-based Migration Policy Institute, said limiting transport to contain the epidemic was understandable, but in cities such as San Diego or El Paso "businesses that really should be open in the middle of a crisis might find that they don't have employees."

"We're talking about farm work, we're talking about caregiving, and probably food production like canning and warehousing operations," he said.

RIPPLE EFFECT?
Once teaming border crossings used by pedestrians and cars have emptied because of the measures, and people's fear of catching the virus. In U.S. border cities like El Paso and San Diego, the impact is already being felt.

Cindy Ramos-Davidson, chief executive of the El Paso Hispanic Chamber of Commerce, said the lack of Mexican shoppers was "devastating" for retail businesses downtown. She was also concerned about day labor for nearby farms that grow chiles, tomatoes, hay, and alfalfa.

"They depend on farm workers, the day workers," she said, adding that some of these employees use tourism-related visas to enter the United States.
Farm workers are designated "essential" travelers under the new DHS rules, but only those with the right paperwork. Workers usually able to cross using border cards are now stuck on the Mexican side.

Southern DAILY Make Today Different

LOCAL NEWS

With hospitals under siege, U.S. to build hundreds of temporary coronavirus

WASHINGTON/NEW YORK (Reuters) - The United States aims to build hundreds of temporary hospitals to ease pressure on medical centers struggling to keep up with a surge of coronavirus patients, officials said on Tuesday, a day after the number of U.S. deaths hit a new daily high.

The U.S. Army Corps of Engineers, which converted a New York convention center into a 1,000-bed hospital in the space of a week, is searching for hotels, dormitories, convention centers and large open space to build as many as 341 temporary hospitals, the chief of corps said on Tuesday.

"The scope is immense," Lieutenant General Todd Semonite of the corps told the ABC News "Good Morning America" program. "We're looking right now at around 341 different facilities across all of the United States."

The U.S. caseload rose by more than 20,000 confirmed cases on Monday, overwhelming hospitals that are running out of doctors, nurses, medical equipment and protective gear.

A record 575 people died, pushing the death toll past 3,000 on Monday, more than the number killed in the attacks of Sept. 11, 2001, as the caseload rose to more than 163,000, according to a Reuters tally of official statistics.

RELATED COVERAGE
New York governor says brother, CNN anchor Chris Cuomo, has coronavirus
U.S. coronavirus deaths reach 3,393, exceeding death toll in China: Reuters tally
U.S. officials estimate the death toll could reach 100,000 to 200,000.

The corps, the engineering arm of the U.S. Army, joined with New York state officials to convert New York's Jacob Javits Convention Center into a facility to treat non-coronavirus patients. The conversion will relieve the pressure on hospitals treating patients with COVID-19, the respiratory ailment caused by the novel coronavirus.

FILE PHOTO: Brigadier General Doug Cherry talks to soldiers and a member of the U.S. Army Corps of Engineers at the CenturyLink Field Event Center, where a field a hospital for non-COVID-19 cases will be built, as efforts continue to help slow the spread of coronavirus disease (COVID-19) in Seattle, Washington, U.S. March 28, 2020. REUTERS/

In addition, construction of a 68-bed field hospital began on Sunday in Manhattan's Central Park. Provided by the Mount Sinai Health System and non-profit organization Samaritan's Purse, the makeshift facility is expected to begin accepting patients on Tuesday, Mayor Bill de Blasio said.

The converted convention center is blocks away from the Hudson River pier where the U.S. Navy hospital ship Comfort docked on Monday. The floating hospital will take up to 1,000 non-coronavirus patients starting on Tuesday. Another temporary New York hospital is planned for the USTA Billie Jean King National Tennis Center where the U.S. Open is played.

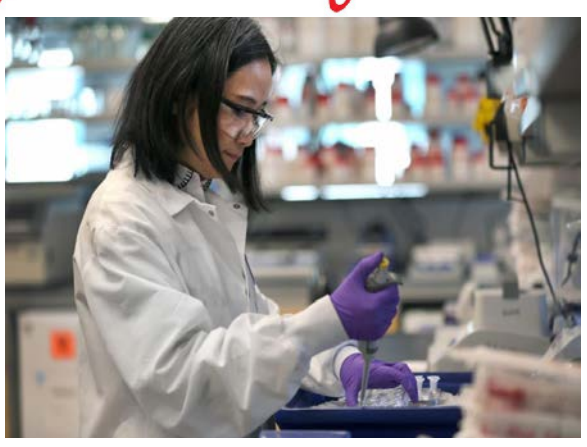
In Los Angeles, the USNS Mercy, similar to the Comfort, is already treating patients. Authorities in New Orleans, Los Angeles and Chicago were setting up field hospitals and convention centers in their cities.

EMOTIONAL TOLL
In the New York City suburbs, nurses are bracing for a surge of patients. The medical surgery unit at New York-Presbyterian Hospital's Hudson

Stay home! **BUSINESS** *Work safe!*

J&J To Begin Human Trials Of Covid-19 Vaccine By September And Could Have Product Ready By Early 2021

U.S. Has Signed A $450 Million COVID-19 Vaccine Contract With Johnson & Johnson



Researcher Xinhua Yan works in a lab at Cambridge, Maryland, February 28, 2020. (Photo/Boston Globe Via Getty Images)

Compiled And Edited By John T. Robbins, Southern Daily Editor

The Trump administration is spending nearly half a billion dollars on one company in the race to find a coronavirus vaccine.
That's according to a $456 million order with Johnson & Johnson's Pharmaceuticals arm Janssen, which specified a "new vaccine asset for 2019 Novel Coronavirus (COVID-19)," Forbes found. It's the largest reported amount spent on a vaccine project to date, even though the pharma giant hasn't yet started any clinical trials as other firms have.
The deal was signed with the Health and Human Services Office of the Assistant Secretary for Preparedness and Response (ASPR) on March 27, 2020. It followed another order, made as part of the same contract with Janssen, for $150 million on March 20, 2020, for a "new antiviral" for COVID-19.
A spokesperson from Johnson & Johnson didn't provide any more details on the specific order, but confirmed the $456 million award related to a collaboration with ASPR's Biomedical Advanced Research and Development Authority (BARDA), as announced in February.

That work was built on previous contracts for developing countermeasures for other influenzas. The value of the coronavirus-specific work hadn't previously been revealed and is the largest known contract for a coronavirus vaccine to date.
It forms part of a deal between the U.S. government and Johnson & Johnson to co-invest $1 billion into vaccine research, development and clinical testing. The company says it now expects human clinical studies for its vaccine candidate to go ahead, at the latest, by September 2020. It anticipates the first batches of vaccine to be available for emergency use in early 2021.
Earlier this month, Johnson & Johnson also announced a collaboration with the Beth Israel Deaconess Medical Center in developing potential preventive vaccine candidates for COVID-19. The company is looking to use the same technologies it used for developing vaccine candidates for Ebola, Zika and HIV. At the time, the firm announced it hoped to identify a vaccine candidate by the end of the month for clinical trials. A spokesperson confirmed Johnson & Johnson still hoped to announce progress on that before the end of the week.

Elsewhere, BARDA has announced it's working with another pharma company, Sanofi Pasteur, on a different kind of vaccine. As described by BARDA, Sanofi will create an exact genetic match to proteins of the virus. "The protein's DNA will be combined with DNA from a virus harmless to humans and used to rapidly produce large quantities of antigen, which stimulate the immune system to protect against the virus."

Vaccine trials already happening

Despite those contracts, neither Johnson & Johnson nor Sanofi have actually tested any potential vaccine.
Others have progressed further. In mid-March, the first phase of a clinical trial evaluating an investigational vaccine kicked off at Kaiser Permanente Washington Health Research Institute in Seattle, Washington. It was developed by scientists at the National Institute of Allergy and Infectious Diseases (NIAID) with Massachusetts-based biotech company Moderna.

U.K. Prime Minister Boris Johnson is now a COVID-19 patient.

U.K. Prime Minister Boris Johnson—now a COVID-19 patient—announced a record £210 million funding to the Coalition for Epidemic Preparedness Innovations (CEPI), which is supporting the development of vaccines to make them globally available and is seeking $2 billion to do so. Elsewhere in the U.K., the University of Oxford announced last week that its researchers had started screening volunteers for an upcoming vaccine trial. Imperial College London has also announced work on a vaccine.
According to the World Health Organization (WHO), there are only two vaccines going through trials: the NIAID-backed treatment and another in China from CanSino Biological and the Beijing Institute of Biotechnology.
Despite the global rush to get a vaccine out as soon as possible, it's highly unlikely anything will be made available this year. Though it'll be rolled out much faster than a typical preventative medicine, Dr. Richard Hatchett, CEO at CEPI, has previously said it'll take somewhere between a year and 18 months before the world has access to a coronavirus vaccine.
The COVID-19 coronavirus pandemic poses a unique challenge for healthcare providers. There are no approved treatments for this disease, nor are there any approved vaccines.

Dr. Rhonda Flores studies protein samples at Novavax labs in Rockville, Maryland, March 20, 2020. (CABALLERO-REYNOLDS/ AFP VIA GETTY IMAGES)

That's put big drug companies, universities and biotech startups on the hot seat. Since the 2003 outbreak of SARS, another variety of deadly coronavirus, they've been researching ways to handle diseases that can be produced by this family of viruses. When a coronavirus is capable of infecting humans, it typically attacks the respiratory system, which can make them particularly deadly.
It usually takes about 10 to 15 years to develop a vaccine. The good news: leaps in technology, such as the ability to rapidly sequence virus genomes and to create vaccines out of messenger RNA, are speeding up the process of development. Developing new drug treatments can also take time—about a decade from discovery to getting on the market. But here technology also provides an advantage. New types of antiviral drugs and immunotherapy treatments can treat a wide range of diseases. Which means that drugs already in the development pipeline or already treating diseases in patients could be useful to fight COVID-19, shortening the time it will take to make an effective medicine. (Courtesy https://www.forbes.com/)

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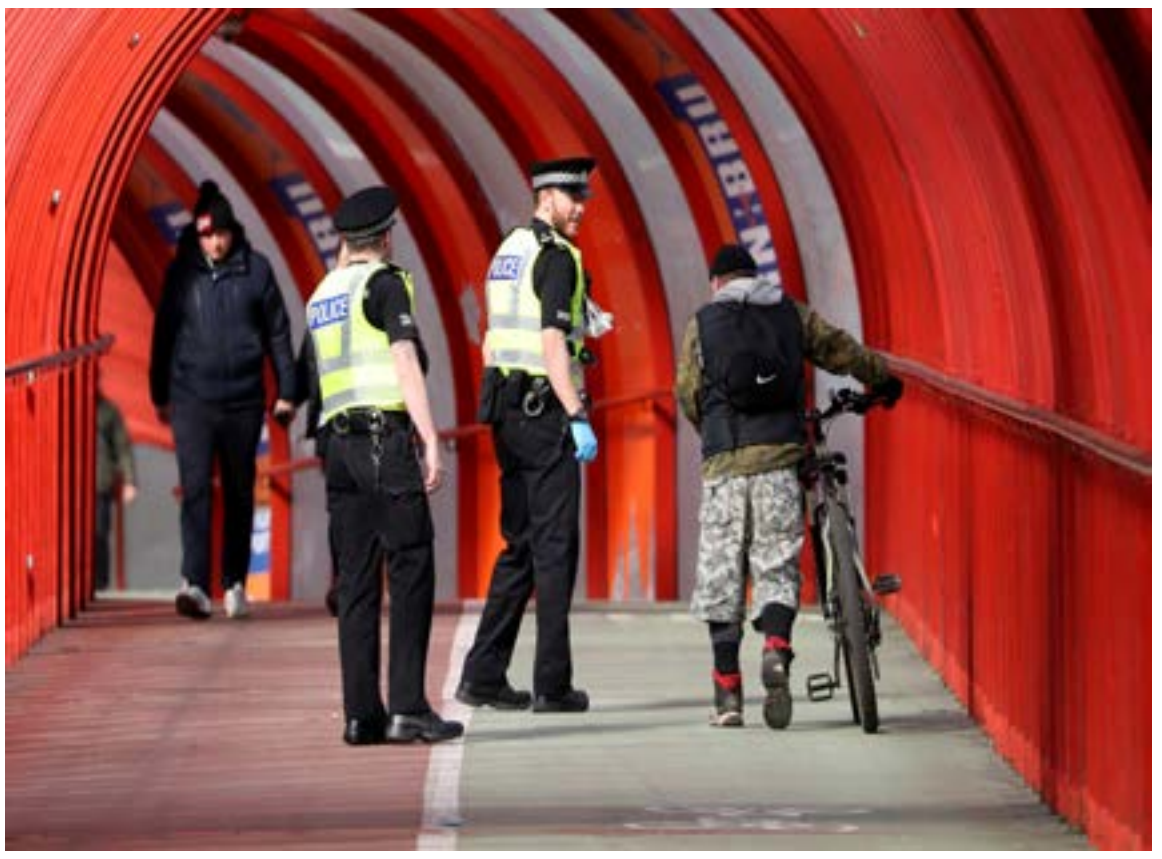
Editor's Choice

Cyclists on Buchanan Street in Glasgow as the spread of the coronavirus disease (COVID-19) continues, Glasgow, Scotland, Britain, March 31, 2020. REUTERS/Russell Cheyne



Police talk to cyclists near the SEC Centre in Glasgow as the spread of the coronavirus disease (COVID-19) continues, Glasgow, Scotland, Britain, March 31, 2020. REUTERS/Russell Cheyne

General view of George Square in Glasgow as the spread of the coronavirus disease (COVID-19) continues, Glasgow, Scotland, Britain, March 31, 2020. REUTERS/Russell Cheyne

Luz Vidal, president of the SINTRACAP union which represents 500 nannies, is seen outside the house where she works to talk whit Reuters after Chilean government announced a total quarantine for wealthy areas of the capital Santiago, following the outbreak of coronavirus disease (COVID-19) in Santiago, Chile March 30, 2020. Picture taken March 30, 2020. REUTERS/Ivan Alvarado

Residents on Coral Street sing and dance from their homes as the spread of the coronavirus disease (COVID-19) continues, Saltburn by the Sea, Britain, March 31, 2020. REUTERS/Lee Smith

People leave the subway after Mexico declared a health emergency and issued stricter rules aimed at containing the coronavirus disease (COVID-19), in Mexico City

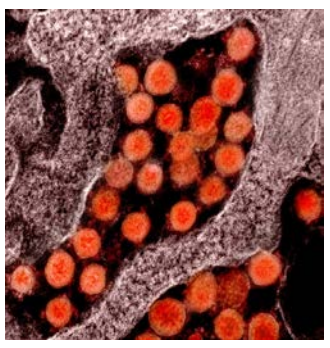
Medical staff assess for COVID-19 at public Victoria Health Unit, BC

Police outside the SEC Centre in Glasgow as the spread of the coronavirus disease (COVID-19) continues, Glasgow, Scotland, Britain, March 31, 2020. REUTERS/Russell Cheyne

Southern DAILY Make Today Different

COMMUNITY

FDA Approves Five-Minute COVID-19 Test From Abbott Labs



Transmission electron micrograph of new coronavirus particles, isolated from a patient. (Photo/National Institute of Allergy and Infectious Diseases-Rocky Mountain Laboratories)

Overview

The FDA has approved emergency use of a new coronavirus test that delivers positive results in 5 minutes and negative results in 13

Compiled And Edited By John T. Robbins, Southern Daily Editor

Abbott Laboratories is unveiling a coronavirus test that can tell if someone is infected in as little as five minutes, and is so small and portable it can be used in almost any healthcare setting.

The medical-device maker plans to supply 50,000 tests a day starting Wednesday, said John Frels, vice president of research and development at Abbott Diagnostics.

The molecular test looks for fragments of the coronavirus genome, which can quickly be detected when present at high levels. A thorough search to definitively rule out an infection can take up to 13 minutes, he said.

Abbott has received emergency use authorization from the U.S. Food and Drug Administration "for use by authorized laboratories and patient care settings," the company said Friday.

The U.S. has struggled to supply enough tests to detect the virus, even as the outbreak threatens to overwhelm hospitals in New York, California, Washington and other areas. After initially restricting testing to high-risk people, and problems with a test designed by the Centers for Disease Control and Prevention, U.S. regulators have rushed out diagnostics made by the world's leading commercial-testing companies.

"This is really going to provide a tremendous opportunity for front-line caregivers, those having to diagnose a lot of infections, to close the gap with our testing," Frels said. "A clinic will be able to turn that result around quickly, while the patient is waiting."

The technology builds on Illinois-based Abbott's ID Now platform, the most common point-of-care test currently available in the U.S., with more than 18,000 units spread across the country.

It is widely used to detect influenza, strep throat and respiratory syncytial virus, a common bug that causes cold-like symptoms.

The test starts with taking a swab from the nose or the back of the throat, then mixing it with a chemical solution that breaks open the virus and releases its RNA. The mixture is inserted into an ID Now system, a small box weighing just under seven pounds that has the technology to identify and amplify select sequences of the coronavirus genome and ignore contamination from other viruses.

The equipment can be set up almost anywhere, but the company is working with its customers and the Trump administration to ensure the first cartridges used to perform the tests are sent to where they are most needed. They are targeting hospital emergency rooms, urgent-care clinics and doctors' offices.

Abbott's m2000 RealTime system recently got U.S. Food and Drug Administration approval for use in hospitals and molecular laboratories to diagnose the infection. That system can churn through more tests on a daily basis, up to 1 million a week, but it takes longer to get the results.

Abbott plans to provide at least 5 million tests a month between the two systems.

Other companies are also rolling out faster testing systems.

Henry Schein Inc. on Thursday said its point-of-care antibody test, which looks for evidence that a person's immune system has already fought off the infection, was available. The blood test can be given at the point of care and delivers results in about 15 minutes, though it can't be used to definitively diagnose a current infection.

The medical device is small and compact enough that it can be used in nearly any healthcare setting, expanding the number of places it can be used to detect the novel virus. The medical device, which is about the size of a toaster, is portable and can be set up anywhere, from a physician's office to an urgent care clinic, the company boasted in a press release.

Abbott Laboratories claims its ID NOW COVID-19 test could dramatically change the battle against the novel coronavirus in the US. The test runs on Abbott's ID NOW platform, which is the most common point-of-care test in the US. It is also used to test other viruses including Influenza A&B, Strep A and respiratory syncytial virus (RSV) testing.

Abbott has received emergency use authorization (EUA) from the U.S. Food and Drug Administration (FDA) for the fastest available molecular point-of-care test for the detection of novel coronavirus. (Photo/Abbott Laboratories)

After Abbott Laboratories received approval from the FDA for its ID NOW COVID-19 test on Friday, the medical device company announced that it would be ramping up its production to make 50,000 units per day starting next week. According to a spokesperson from Abbott, the tests will be available beginning on April 1.

The FDA also approved Abbott's m2000 RealTime system for coronavirus detection last week. With the two systems combined, the medical device company claims it will produce about 5 million tests for the novel virus in April.

Abbott Laboratories is working with the Trump Administration to deploy the tests to sites where they will have the most impact and will likely target hospital emergency departments, urgent-care clinics, and physicians' offices.

The Abbott ID NOW COVID-19 detects the presence of nucleic acid from SARS-CoV-2 by "identifying a small section of the virus' genome, then amplifying that portion until there's enough for detection."

The molecular testing technology delivers COVID-19 results in minutes. Other coronavirus testing methods require health workers to take samples from possible coronavirus patients to be delivered to testing labs, taking hours or even days to get results.

However, Abbott n0ted that ID NOW COVID-19 EUA is not FDA cleared or approved, meaning it can only be used by authorized laboratories and patient care settings.

According to Abbott Laboratories, its ID NOW COVID-19 test is the fastest available molecular point-of-care test. However, other companies producing medical devices with even faster testing capabilities are racing to receive approval from the FDA. Henry Schein Inc. is developing a point-of-care antibody test, however, it cannot definitely diagnose an infection, Bloomberg reported.

The US government has been criticized

for its lagging response to the coronavirus, including its low testing capabilities after weeks and delays in producing its own coronavirus test. However, the testing capabilities in the US are finally beginning to catch up, resulting in a surge of confirmed cases across the country going from 32,000 on March 22 to over 100,000 today.

While the US testing capabilities are now in a better place, the healthcare system still faces extreme shortages of critical medical supplies to treat COVID-19 patients, including ventilators and personal protective gear for health workers, including masks.

(Courtesy https://www.latimes.com/ and businessinsider.com)

休城社區 Daily News

1200元派錢何時收到? 財政部長:預計這三周

【美南新聞記者蕭永群報導】國會與美國總統特朗普於上周五完成歷史鉅額2兆元的經濟刺激方案的簽署,以因應疫情造成的經濟衝擊. 其中最直接攸關民衆的,就是過去持續討論的「派錢」議題、擴增失業補助範圍、以及3500億的小企業貸款方案.

此次派錢的款項便是從這筆2兆元的刺激方案中而來,美國財政部長史蒂芬·姆努欽(Steven Mnuchin)於29日表示,民衆可以期待支票將在這叁周內匯入戶頭,雖然不少專家認爲實際執行應該要花更長時間,民衆才能拿到錢.

根據這個刺激方案,每位民衆將會收到1200元的支票,伴侶的話一共2400元,若是有孩子,每位孩童則會有額外500元. 但若是年收入高於7萬5000元的個人將會收到較少款項,也就是說,只要收入大於7萬5000元,每多出一百元就會少5元的紓困金,但凡年收高於9萬9000元者,就不會收到這筆補助金.

此外,值得注意的是,必須要有「社安號」(SSN),才有辦法領取這個補助.「非居民外國人」(non-resident aliens)則是完全被排除在補助範圍.

目前仍不確定官方需要多長時間才能核發款項,但姆努欽上周日表示,預計在法案簽署後的叁周派出第一筆款項. 法案中也指出,這筆錢應該「越快送出越好」. 姆努欽表示,到時若是有人沒有收到這筆錢,可以到網上進行個人資料登記,讓國稅局(IRS)核對.

然而不少專家認爲應該會耗時更久,2001年美國國稅局根據新的減稅計劃,發出了退稅支票,花了6週的時間. 而在2008年,刺激方案簽署後,花了3個月的時間.

然而,這次的支票應該會比以往來的快,越來越多民衆通過電子系統報稅,並把銀行信息提供給了IRS,這些納稅人可能會更快地收到這筆錢.

姆努欽指出,他的首要目標就是「提供給美國勞工和公司所需的資金,希望讓美國經濟渡過接下來的八到十週.」他也對小企業商家喊話:「快回去僱用您們的員工,因爲政府付錢給你這麼做.」

糖城首個冠狀病毒檢測站啓用

【美南新聞記者蕭永群報導】面對冠狀病毒疫情升溫,全州開始大規模檢測,如今一處新的公家冠狀病毒檢測站,於今日在糖城的Smart Financial Centre啓用,一早現場已排起長長車潮.

這個新檢測站和以往最大的不同就是,所有檢測都能在這個檢測站完成. 過去,要前往公家檢測站,必須先事先上網填寫問券、進行檢查,一旦被認爲符合資格、出現疑似症狀,才會收到一組「驗證碼」,透過驗證碼才能到現場檢測點進行測試. 也就是說,如今只要出現症狀需要檢查的人,不用再先上網做事前線上檢測、也不需要有驗證碼才能接受檢查.

若想要做檢查,民衆可以直接到現場,會有專業醫療人員進行症狀評估、旅遊史調查,來決定你需不需要進一步測試. 然而,測試仍然是優先給有出現症狀者、高危險族群檢查. 若被認爲是需要進一步檢查,現場能夠直接提供一條龍服務,讓民衆現場註冊、移至檢測蓬. 目前要待檢測結果出爐大約需要4至24小時. 檢測站將於31日啓用,開放時間爲周間早上9點至下午4點.

休城小學老師疫情期間開車上街送暖

【本報記者韋霓休斯頓報導】自從新型冠狀病毒疫情爆發以來,美國民衆的生活都發生根本上的轉變,從就學、工作、購物、娛樂、社交、飲食等等,太多方面都和原來的習慣模式截然不同. 以教育爲例,小朋友不去學校了,而在網上接受課程,身邊不再是同學與老師,而是面對著電腦,有些則加上關心的父母、或是祖父母陪在身旁.

老師們路過社區溫馨打招呼

爲了鼓勵疫情期間待在家裡的小朋友,Anne McCormick Sullivan Elementary小學所有的老師們開著車,有的還穿著可愛的斑點狗狗裝,路過每一個社區跟孩子們揮手打招呼,大聲說:Hi! Love you! Miss you! Thank you for all youdid. 小朋友們也開心的回應說: Hello! Hello! I miss you!

在這特殊時期,看到老師們這樣有心,家長們都非常感謝老師們的愛,能這樣子鼓勵孩子們繼續讀書學習. 長長的車隊大概有100多輛車,浩浩蕩蕩,讓疫情下原本空曠的社區街道展現了不尋常的氣勢. 接下來,小學生的網課也正式開啓了.

家長們超感動

的確,Anne McCormick Sullivan Elementary小學此舉眞的非常溫暖,讓家長們好感動、小朋友們也很開心. 在困境中,教導學生們仍然樂觀面對,說出對彼次的愛與想念. 雖然要保持距離,老師們只能待在車上揮手,但孩子們與家長們內心所感受的卻無比溫馨.

逆境中,心的溫度決定一切

老師們給孩子們樹立了非常好的榜樣模範,讓他們知道,在某些困難的狀況下,我們還能做些什麼讓事情變得不一樣. 鼓勵小朋友能正面面對事情,即使在逆境中,心的溫度決定處理事情的力度與高度.