

DEPARTMENT OF VETERAS AFFAIRS
Robert J. Dole VA Medical Center/589A7
Wichita, Kansas

Employee Health SOP
March 20, 2020

Guidance Pertaining to Employee COVID-19 Exposure

1. **PURPOSE:** To provide guidance for employees and employee health providers regarding COVID-19 exposure

2. **POLICY:** To effectively manage employees who may have been exposed to COVID-19 virus.

3. **PROCEDURES:**

a) Potential COVID-19 employee high-risk, moderate-risk, and low-risk exposures (as defined below by CDC) are to be reported to VHAWIC PANDEMIC EMPLOYEE HEALTH TEAM an email group consisting of Employee Health provider, Infectious Disease physician, Human Resources Officer, and Infection Control Practitioner for the facility) by the supervisor of the potentially affected employee via encrypted email to the group and a direct call to the Employee Health Clinic at 316-685-2221 x53389.

b) The Infection Control Practitioner, or designee, confirms the COVID-19 diagnosis of the exposure source patient.

c) The employee's supervisor completes the COVID-19 exposure tracking sheet. (Appendix A).

d) The supervisor submits the exposure tracking sheet to VHAWIC PANDEMIC EMPLOYEE HEALTH TEAM via encrypted email

e) After the exposure is confirmed, the supervisor will instruct the exposed employee to contact the Employee Health Clinic by phone at extension 53389 for evaluation.

f) The consultation with the Employee Health Clinic or designee may specify any of the below:

1. The employee go home and quarantine for 14 days
2. The requirement that the employee wear a face mask (not N-95) while working at a VA facility during the 14 days following exposure to a patient with COVID-19 infection.
3. The employee will be added to a tracking system for the 14 days following exposure to a patient with COVID-19 infection that includes:

a) Employee contacts employee health at 316-685-2221 x53389 Monday-Friday 0800-1630 to provide daily reports on symptoms and fever, and employee sends an email to VHAWIC PANDEMIC EMPLOYEE HEALTH TEAM to provide a daily report on symptoms and fever. Weekends, holidays and 1630-0800 email VHAWIC PANDEMIC EMPLOYEE HEALTH TEAM. **If the employee has symptoms or fever, the employee will remain at home. That employee should contact their primary care physician for testing.**

b) Location where the employee will work that day (e.g. office, hospital, clinic)

4. Staff education:

- a) Guidance to remain home if they develop any symptoms prior to work.
- b) Health checks for fever and respiratory symptoms while at work.
- c) Immediately report to supervisor and go home if they become symptomatic while at work. Call X 53389 employee health and email VHAWIC PANDEMIC EMPLOYEE HEALTH TEAM to report symptoms.

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2. Employee Health staff will utilize the CDC guidance to determine risk level, provide duty status recommendations and staff education, and carry out tracking as indicated.

a) CDC guidance as below:

- High-Risk Exposure: HCP who have had prolonged close contact (being within 6 feet for a prolonged period; having unprotected direct contact with infectious secretions or excretions of the patient) with patients with Covid19 who were not wearing a facemask while HCP nose and mouth were exposed to material potentially infectious with the virus. Being present in the room for procedures that generate aerosols or during which respiratory secretions are likely to be poorly controlled (intubation, extubation, bronchoscopy, nebulizer therapy, CPR) on patients with Covid19 when the HCP's eyes, nose, or mouth were not protected is high-risk also.
- Medium-Risk Exposure: HCP who had prolonged close contact with patients with Covid19 who were wearing a facemask while HCP nose and mouth were exposed to material potentially infectious with the virus. For example, HCP wearing gown, gloves, eye protection, and facemask (not N95) during an aerosol-generating procedure would be medium risk. If same PPE but no aerosol-generating procedure, that would be low-risk.
- Low-Risk Exposure: generally, refers to brief interactions with patients with Covid19 or prolonged close contact with patients who were wearing a facemask for source control while HCP were wearing a facemask or respirator. Use of eye protection, in addition to a facemask or respirator would further lower the risk of exposure.
- HCP: HealthCare Provider
- Prolonged Exposure: generally, means 30-60 minutes or more
- PUI: Person Undergoing Investigation
- Currently, this guidance applies to HCP with potential exposure in a healthcare setting to patients with confirmed COVID-19. However, HCP exposures could involve a PUI who is awaiting testing. Implementation of monitoring and work restrictions described in this guidance could be applied to HCP exposed to a PUI if test results for the PUI are not expected to return within 48 to 72 hours. A record of HCP exposed to a PUI should be maintained and HCP should be encouraged to perform self-monitoring while awaiting test results. If the results will be delayed more than 72 hours or the patient is positive for COVID-19, then the monitoring and work restrictions described in this document should be followed.

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Epidemiologic risk factors	Exposure category	Recommended Monitoring for COVID-19 (until 14 days after last potential exposure)	Work Restrictions for Asymptomatic HCP
Prolonged close contact with a COVID-19 patient who was wearing a facemask (i.e., source control)			
HCP PPE: None	Medium	Active	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing a facemask or respirator	Medium	Active	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing eye protection	Low	Self with delegated supervision	None
HCP PPE: Not wearing gown or gloves ^a	Low	Self with delegated supervision	None
HCP PPE: Wearing all recommended PPE (except wearing a facemask instead of a respirator)	Low	Self with delegated supervision	None
Prolonged close contact with a COVID-19 patient who was not wearing a facemask (i.e., no source control)			
HCP PPE: None	High	Active	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing a facemask or respirator	High	Active	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing eye protection ^b	Medium	Active	Exclude from work for 14 days after last exposure
HCP PPE: Not wearing gown or gloves ^{a,b}	Low	Self with delegated supervision	None
HCP PPE: Wearing all recommended PPE (except wearing a facemask instead of a respirator) ^b	Low	Self with delegated supervision	None

*HCP not using all recommended PPE who have only brief interactions with a patient regardless of whether patient was wearing a facemask are considered low-risk. Examples of brief interactions include: brief conversation at a triage desk; briefly entering a patient room but not having direct contact with the patient or the patient's secretions/excretions; entering the patient room immediately after the patient was discharged.

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3. Employees may return to work wearing a facemask throughout their shift, if asymptomatic and low risk.
4. Close contact is defined as:
 - a) Being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case.
 - b) Having direct contact with infectious secretions of a COVID-19 case (e.g. being coughed on)
5. Employees with presumptive unprotected exposure (i.e. to a person under investigation) should wear a mask, monitor themselves for fever by taking their temperature twice a day and remain alert for respiratory symptoms (e.g., cough , shortness of breath, sore throat) awaiting source testing information.
6. If healthcare personnel exposed to a person with COVID-19 infection (or person under investigation) develop even mild symptoms consistent with COVID-19, they will immediately cease patient care activities, and notify their supervisor and Employee Health clinic by phone (x53389) prior to leaving work. Or, if at home, will call their supervisor first, then Employee Health clinic by phone (x53389) and remain at home. They should contact their primary care physician to arrange for testing.
7. To prevent transmission, employees should not present to work for the purpose of being evaluated in the Employee Health clinic for symptoms.
8. Employee Health can be reached at extension 53389 or email to VHAWIC PANDEMIC EMPLOYEE HEALTH TEAM. CDC Guidance for Risk Assessment and Public Health management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease (COVID-19) can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>
9. For employees returning from travel:
 - When an employee is identified as having travelled from an area of concern, the supervisor is to contact VHAWIC PANDEMIC EMPLOYEE HEALTH as soon as possible. This information is requested:
 - Area Travelled to
 - Date they returned from the area
 - Areas travelled through on the way/way back
 - Presence of symptoms
 - Known contacts with ill individuals
 - Do not allow the employee to work until there is guidance from the Pandemic Employee Health Team.
 - If the employee has travelled home from a country or area with widespread or ongoing community spread (Level 3 Health Notice), the recommendation is to quarantine at home for 14 days, starting with the last day of presence in an area of concern.
 - These areas are changing daily; each employee should be evaluated on a case by case basis for a work decision. The decision about a return to work will depend on the employee's presence or

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absence of symptoms, on the situation in the area in which they travelled, and assessment of work location and duties.

- Link to CDC page for Level 3 Health Notices: <https://wwwnc.cdc.gov/travel/notices>
- Supervisors are not to make these decisions without contacting and guidance from the Pandemic Employee Health Team. Supervisors should identify which employees are or have been traveling and instruct them to contact Employee health as soon as possible upon return to allow for adequate time for Employee health evaluation.

4. RESPONSIBILITIES:

- Employee Health Provider** (physician/nurse practitioner/physician assistant): Responsible for carrying out the policy. They may refer an employee to other personnel for consultation or treatment; however, all employee outpatient medical care will remain the responsibility of, and under the direction of, the Employee Health Provider.
- Infection Control Physician and Infection Control Practitioner**: Provide advice and assistance in implementing an effective blood and airborne pathogen control program for Employee Health Service. Employee Health Service will notify the Infection Control Physician and Infection Control Practitioner of all blood and/or airborne transmissible incidents.
- Human Resources Team Leader**: Renders advice and assistance on Human Resources aspects of the Employee Health program and works closely with the Employee Health Provider.
- Employee Health LPN**: Provides administrative support for Employee Health Services through the establishment and processing of records and applicable databases. Assists with phone calls to prioritize response to cases, and data base processes.
- Employees**: Notify their supervisor of their intention to seek evaluation/management for potential COVID-19 exposure. Following release from employee health, employees will report back to their supervisor for final disposition.
- Supervisors**: Familiarize employees with the Employee Health program. Ensure that employees report as scheduled for tests and examinations. Emphasize to employees the intent of this program and its importance to the employee's health and welfare.

5. OWNING SERVICE: Emergency Department

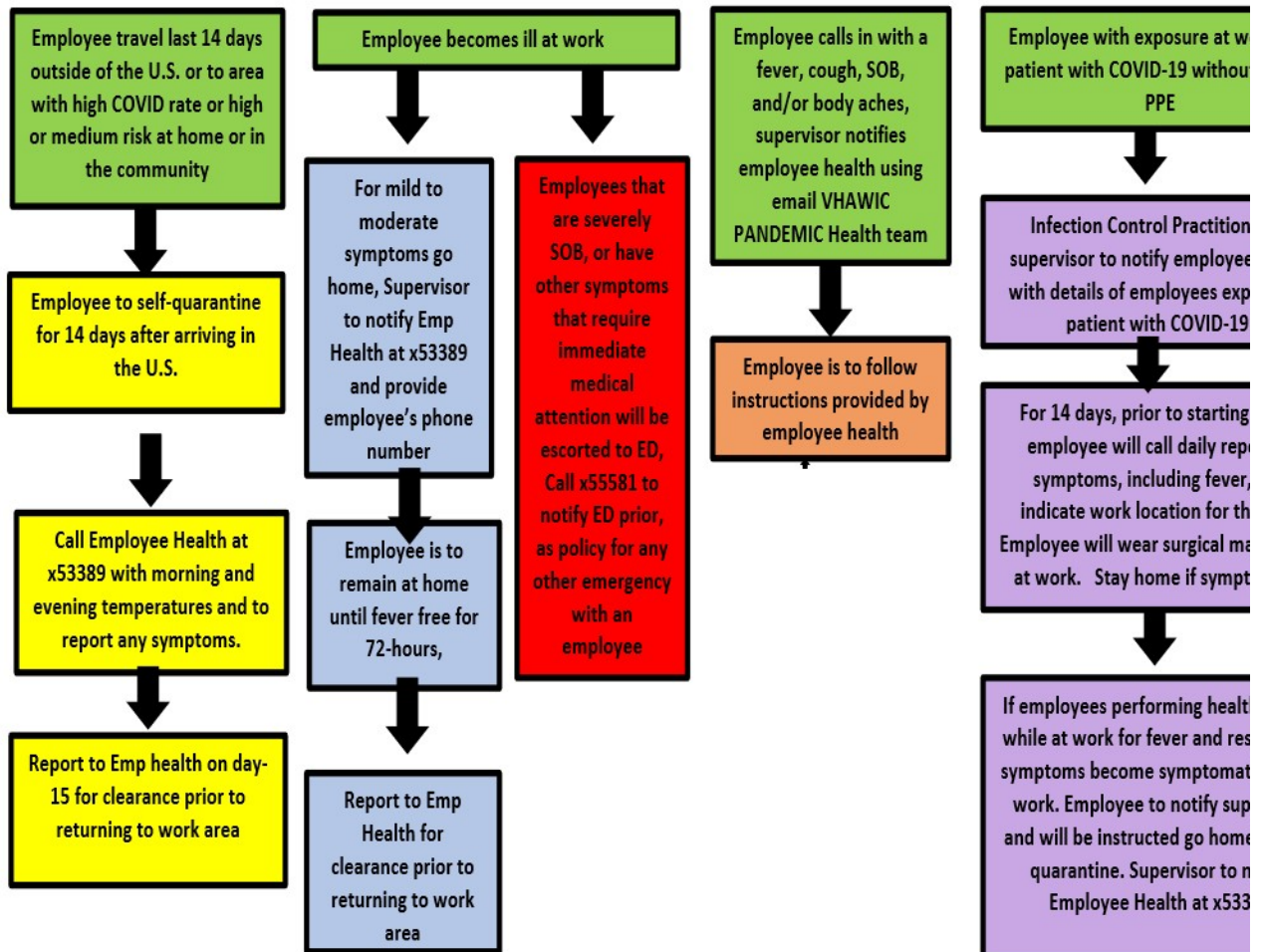
6. REFERENCES:

- CDC Health Notices for Travel. <https://wwwnc.cdc.gov/travel/notices>
- CDC Guidance for Risk Assessment and Public Health management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease (COVID-19). <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

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Guidance for Health Care Personnel with Potential Risk for COVID-19



Note: If exposure is work-related, employee has the option to file workers' compensation via ECOMP, otherwise, employee to follow-up with their Primary Care Provider. Employee to consult with their supervisor/manager and HR for type of leave.

VA Medical Center Employee Health Clinic 316-685-2221, x53389



Employee Health: updated March 20

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Recoverable Signature

X

Patricia M. Petrakis, M.D.

Dr. Patricia Petrakis, M.D.

Chief of Emergency Department

Signed by: patricia.petrakis@va.gov

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APPENDIX A



VHA EMPLOYEE TRIAGE – COVID-19 EXPOSED HEALTHCARE PERSONNEL (HCP) INTERVIEW SHEET

NOTE: PAGES 1 AND 2 REMAIN IN EMPLOYEE MEDICAL FOLDER, PAGES 3 THROUGH 7 ARE FOR EMPLOYEE TO MAINTAIN IN HIS/HER PERSONAL RECORDS

EXPOSED EMPLOYEE NAME:		Age/Gender:	Phone:
Service:		Position:	
Symptoms at time of exposure (if applicable):			
Date of exposure:	Location of exposure:		
Contact with a <u>confirmed</u> COVID-19 patient: Y N		Patient first initial of last name: Patient last 4 SSN: Date of confirmed COVID-19 contact:	
Circumstance of contact (ask about prolonged close contact):			
Was patient with confirmed COVID-19 <u>wearing a facemask</u> at the time of employee exposure?			
PPE used by employee:		Was there a PPE breach during contact?	
Level of risk for exposed HCP (CIRCLE ONE): (See <i>CDC Epidemiologic Risk Classification for Asymptomatic Healthcare Personnel Following Exposure to Patients with Coronavirus Disease (COVID-19) or their Secretions/Excretions in a Healthcare Setting, and their Associated Monitoring and Work Restriction</i>)			

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Recommendations, found here <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html>):

HIGH**MEDIUM****LOW****NO IDENTIFIABLE RISK**

Recommendations for work restrictions (CIRCLE ONE):

ADVISE TO REMAIN AT WORK

EXCLUDE FROM WORK FOR 14 DAYS AFTER LAST EXPOSURE

IF EMPLOYEE IS ADVISED TO REMAIN OUT OF WORK, SUPERVISOR IS TO BE NOTIFIED (*DO NOT GIVE THIS FORM TO SUPERVISOR*).

ADVISE EMPLOYEES OF THE FOLLOWING:

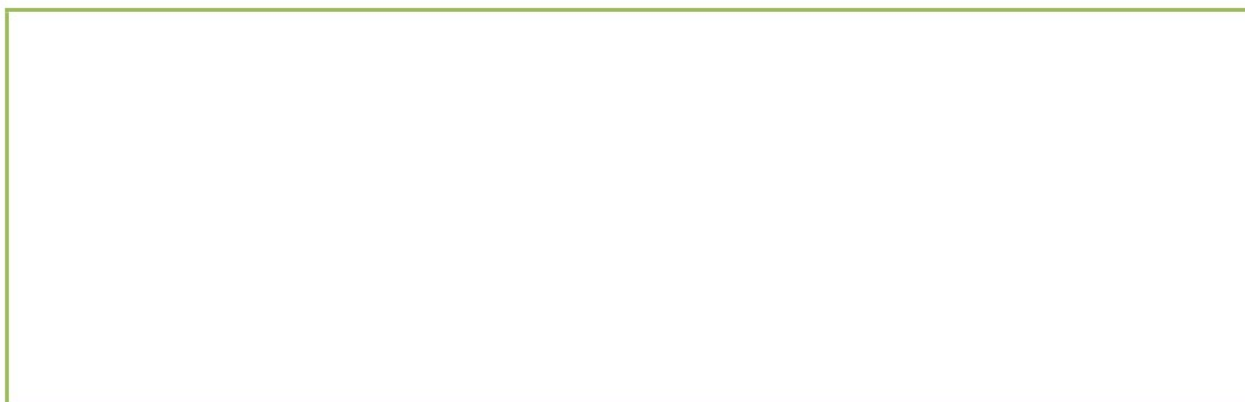
HCP in the HIGH, MEDIUM, OR LOW RISK EXPOSURE groups should still report temperature and absence of symptoms each day prior to starting work. Facilities could have exposed HCP wear a facemask while at work for the 14 days after the exposure event if there is a sufficient supply of facemasks. **If HCP develop even mild symptoms consistent with COVID-19, they must cease patient care activities, don a facemask (if not already wearing), and notify their supervisor or employee health services prior to leaving work.**

PROVIDE EMPLOYEES WITH SYMPTOM AND TEMPERATURE LOG IF IN HIGH MEDIUM, OR LOW RISK EXPOSURE GROUPS (PAGES 3-5):

Additional Notes:

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**CHECK YOUR HEALTH AND RECORD TEMPERATURE EVERY DAY:****Step 1** Do health checks every morning and every night:

- Take your temperature.
- In addition to fever, be alert for any other symptoms of COVID-19, including cough or difficulty breathing.
- Write your temperature and any symptoms in the log included in this booklet.

Before you take your temperature:**Wait 30 minutes after eating, drinking, or exercising.****Step 2** If your employee health department asks you to report your temperature and any symptoms, follow their instructions.**Wait at least 6 hours after taking medicines that can lower your temperature, like:**

- Acetaminophen, also called paracetamol
- Ibuprofen
- Aspirin

**Step 3** If you have fever (fever is 100.0°F/37.3°C* or higher), cough, or trouble breathing:

1. Do not go out in public.
2. Advise employee health services via phone – do *not* report to employee health for evaluation.
3. If you cannot reach your health department, seek medical advice – call ahead before you go to a doctor's office or emergency room. Tell them about your recent exposure to a patient with confirmed COVID-19.
4. Avoid contact with others.
5. Do not travel while sick.
6. Cover your mouth and nose with a tissue or your sleeve (not your hands) when coughing or sneezing.

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7. Wash hands often with soap and water for at least 20 seconds to avoid spreading the virus to others.
8. Wash your hands with soap and water immediately after coughing, sneezing, or blowing your nose. If soap and water are not readily available, you can use an alcohol-based hand sanitizer that contains 60%-95% alcohol. Always wash hands with soap and water if hands are visibly dirty.

Contact information for Employee Health Services:

316-685-2221 ext. 53389 or email: [VHAWIC PANDEMIC EMPLOYEE HEALTH TEAM](#)

Adapted from: CDC COVID-19 CARE (Check and Record Everyday) Booklet

<https://www.cdc.gov/coronavirus/2019-ncov/travelers/care-booklet.html>

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HOW TO TAKE YOUR TEMPERATURE:



1. Turn the thermometer on by pressing the button near the screen.



2. Hold the tip of the thermometer under your tongue until it beeps. Do not bite the thermometer.



3. Read your temperature on the screen. If your temperature is 100.0°F/37.3°C* or higher, you have a fever.



4. Write your temperature in the 14-Day Symptom and Temperature Log in this booklet.



5. Clean your thermometer with soap and water and dry it well.

* Fever is either measured temperature $\geq 100.0^{\circ}\text{F}$ or subjective fever. Note that fever may be intermittent or may not be present in some patients, such as those who are elderly, immunosuppressed, or taking certain medications (e.g., NSAIDs). Clinical judgement should be used to guide testing of patients in such situations. Respiratory symptoms consistent with COVID-19 are cough, shortness of breath, and sore throat. Medical evaluation may be recommended for lower temperatures ($< 100.0^{\circ}\text{F}$) or other symptoms (e.g., muscle aches, nausea, vomiting, diarrhea, abdominal pain headache, runny nose, fatigue) based on assessment by public health authorities.

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HCP in any of the risk exposure categories who develop signs or symptoms compatible with COVID-19 must contact their established point of contact (public health authorities or their facility's employee health program) for medical evaluation prior to returning to work.

Adapted from: CDC COVID-19 CARE (Check and Record Everyday) Booklet

<https://www.cdc.gov/coronavirus/2019-ncov/travelers/care-booklet.html>

SYMPTOM AND TEMPERATURE LOG:

NAME:

SERVICE:

POSITION:

DATE	SYMPTOMS	TEMPERATURE
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DAY 1	<div><div></div><div></div><div></div></div>	
DAY 2	<div><div></div><div></div><div></div></div>	
DAY 3	<div><div></div><div></div><div></div></div>	
DAY 4	<div><div></div><div></div><div></div></div>	
DAY 5	<div><div></div><div></div><div></div></div>	
DAY 6	<div><div></div><div></div><div></div></div>	
DAY 7	<div><div></div><div></div><div></div></div>	
DAY 8	<div><div></div><div></div><div></div></div>	
DAY 9	<div><div></div><div></div><div></div></div>	
DAY 10	<div><div></div><div></div><div></div></div>	
DAY 11	<div><div></div><div></div><div></div></div>	
DAY 12	<div><div></div><div></div><div></div></div>	
DAY 13	<div><div></div><div></div><div></div></div>	
DAY 14	<div><div></div><div></div><div></div></div>	

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