

RECOMMENDATIONS FOR EXPOSED, POTENTIALLY EXPOSED, OR SYMPTOMATIC HEALTHCARE PROVIDERS (HCP)

**The recommendations below provide a summary of CDC and PA Department of Health guidelines for healthcare providers (including first responders) and law enforcement personnel. They do not reflect the opinions of the authors, AHN, AHNEMM, or USACS. The reference to these CDC guidelines is provided below.*

General information

- Coronavirus disease 2019 (COVID-19) is a respiratory illness caused by the SARS-CoV-2 virus that spreads from person to person through respiratory droplets. Droplets commonly form when an infected person coughs or sneezes, and can then land in the mouth/nose/lungs of people who are nearby.
- Symptoms may appear 2 to 14 days after exposure to the virus. 80% of patients develop minimal-mild symptoms. Symptoms can include fever, cough, difficulty breathing, and shortness of breath.
- Transmission of the virus can occur following close contact with an individual who has COVID 19 including:
 - Being within 6ft of an individual with COVID-19 for a prolonged period of time.
 - Direct contact with bodily fluids (blood, phlegm, or respiratory droplets) from a person with COVID-19
 - **If proper PPE is worn, contact with an individual with COVID-19 does not constitute an exposure unless there is a failure of the PPE.**

Exposure Categories (Appendix)¹

- **High Risk Exposure**
 - HCP who have had prolonged close contact with patients with COVID-19 who were not wearing a facemask while HCP nose and mouth were exposed to potentially infectious material
 - Being present in the room for procedures that generate aerosols or during which respiratory secretions are likely to be poorly controlled (e.g., cardiopulmonary resuscitation, intubation, extubation, bronchoscopy, nebulizer therapy, sputum induction) on patients with COVID-19 when the healthcare providers' eyes, nose, or mouth were not protected
- **Medium Risk Exposure**
 - HCP who had prolonged close contact with patients with COVID-19 who were wearing a facemask while HCP nose/mouth were exposed to material potentially infectious with the virus
 - HCP wearing a gown, gloves, eye protection and a facemask (instead of a respirator or N95 mask) during an aerosol-generating procedure are considered to have a medium-risk exposure.
- **Low Risk Exposure**
 - Brief interactions with patients with COVID-19 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.

Actions Following Exposure/Potential Exposure

- Implementation of monitoring and work restrictions 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 monitoring and work restrictions should be followed.
- Healthcare providers in any risk exposure category who develop signs/symptoms compatible with COVID-19 must contact their established point of contact (infection control officer or occupational health) for medical evaluation prior to returning to work.
- **High/Medium Risk Exposure**
 - Active monitoring, including restriction from work in any healthcare setting until 14 days after their last exposure. If they develop any fever (measured temp > 100.0 or subjective fever) OR respiratory symptoms (cough, shortness of breath, sore throat) they should immediately self-isolate and notify their established point of contact.
- **Low Risk Exposure**
 - Self-monitoring with delegated supervision until 14 days after the last potential exposure. This includes temperature and symptoms check prior to starting work, in conjunction with the occupational health or infection control personnel.

- **Proper adherence to recommended infection control practices, including all recommended PPE, should protect HCP who have prolonged close contact with patients infected with COVID-19.**
- **Community or travel-associated exposures²**
 - HCP who have a community or travel-associated exposure should undergo monitoring as defined by that guidance. Those who fall into the *high-* or *medium- risk* category described there should be excluded from work in a healthcare setting until 14 days after their exposure.
 - HCP who develop signs or symptoms compatible with COVID-19 should contact their established point of contact (public health authorities or their facility's occupational health program) for medical evaluation prior to returning to work.
- **Additional Info For Asymptomatic Exposures**
 - **Facilities could consider allowing asymptomatic HCP who have had an exposure to a COVID-19 patient to continue to work after options to improve staffing have been exhausted and in consultation with their occupational health program.** These HCP 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 occupational health services prior to leaving work.

Summary of Pennsylvania Department of Health Recommendations³

- **(3/17/2020) Interim Guidance on Discontinuing Home Isolation/Quarantine and Returning to Work Criteria for Healthcare Providers with COVID -19.**
 - Recommends persons with COVID-19 under home isolation be released from isolation after a minimum of 7 days after symptom onset and after 72 hours of being afebrile (WITHOUT the use of fever-reducing medications) and feeling well. **This includes healthcare providers diagnosed with COVID-19.**
 - Healthcare providers diagnosed with COVID-19 must be excluded from work until:
 - At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications AND improvement in respiratory symptoms...and,
 - At least 7 days have passed since symptoms first appeared
 - Returning healthcare providers diagnosed with COVID-19 must wear a facemask at all times and be restricted from caring for severely immunocompromised patients for 14 days after symptom onset, as well as adhere to strict hand and respiratory hygiene and monitor for symptoms.

For example, if day 0 is the onset of illness, persons with COVID-19 that are well on day 3 and afebrile and feeling well for 72 hours must remain isolated until day 7. Someone with COVID-19 who is still symptomatic on day 7, and has symptoms until day 10, cannot be released until day 13.

- **(3/14/2020) Interim COVID 19 Specimen Collection and Testing Guidance**
 - Call DOH for consultation for the following patients: ...symptomatic healthcare workers...
 - 1-877-724-3258 to have patients tested at a state health center.
 - All positive tests must be reported to DOH.
- **(3/11/2020) Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed COVID-19 in Healthcare Settings**
 - Facilities and organizations providing healthcare should implement sick leave policies for HCP that are non-punitive, flexible, and consistent with public health guidance
- **(3/09/2020) Interim U.S. 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)**
 - Exposed HCP that are asymptomatic may continue to work
 - Healthcare facilities must report any at-risk HCP who develops symptoms to DOH at 877-PA-HEALTH or your local health department

References

1. Interim U.S. 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). Available at: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html> . Accessed 3/18/2020 @0953.
2. Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential Coronavirus Disease 2019 (COVID-19) Exposures: Geographic Risk and Contacts of Laboratory-confirmed Cases. Available at: <https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html> . Accessed 3/18/2020 @0953.
3. PA Department of Health Coronavirus Resources. Available at: <https://www.health.pa.gov/topics/disease/Pages/Coronavirus%20Resources.aspx> . Accessed 3/18/2020 @ 1002.
4. CDC Interim Guidance for Emergency Medical Services (EMS) Systems and 911 Public Safety Answering Points (PSAPs) for COVID-19 in the United States. Available at: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-for-ems.html> . Accessed 3/18/2020 @0933.

Appendix

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=healthcare personnel; PPE=personal protective equipment

^aThe risk category for these rows would be elevated by one level if HCP had extensive body contact with the patients (e.g., rolling the patient).

^bThe risk category for these rows would be elevated by one level if HCP performed or were present for a procedure likely to generate higher concentrations of respiratory secretions or aerosols (e.g., cardiopulmonary resuscitation, intubation, extubation, bronchoscopy, nebulizer therapy, sputum induction). For example, HCP who were wearing a gown, gloves, eye protection and a facemask (instead of a respirator) during an aerosol-generating procedure would be considered to have a medium-risk exposure.