COVID-19 OCCUPATIONAL HEALTH GUIDELINES (NON- HEALTHCARE) (Version 5 – Updated: December 7, 2020)

SCENARIO 1: Employee has acute respiratory illness/other COVID-19 symptoms (fever*, cough, shortness of breath, sore throat, headache, body aches, fatigue, nausea, vomiting diarrhea, loss of smell, loss of taste):

If at home:

1. Stay home. Call personal healthcare provider to determine testing/ treatment unless an emergency. If seeking emergency medical care, call ahead to notify of symptoms. Wear a cloth face covering before arriving at health provider or before emergency medical services arrive.
2. Notify Supervisor and HR right away.
3. HR notifies local health department and consults with them for recommendations on contact tracing and notifications; as well as infection control/ quarantine measures.
4. Minimally, HR ensures employees who have symptoms of respiratory illness and were in isolation at home do not come to work until:

   ▪ **In cases of laboratory-confirmed COVID-19 with mild to moderate illness:**
     o They are free of fever (<100.4°F, <38.0°C)* for at least 24 hours without the use of fever-reducing medicine **and**
     o Other symptoms have improved (for example, cough, shortness of breath) **and**
     o At least 10 days have passed since symptoms first appeared

   ▪ **In cases of laboratory-confirmed COVID-19 with severe to critical illness/severely immunocompromised**
     o They are free of fever for at least 24 hours without the use of fever-reducing medications **and**
     o Other symptoms have improved **and**
     o At least 20 days have passed since symptoms first appeared

   ▪ **In cases of suspected COVID-19 with one negative result from at least** one respiratory specimen tested using an **FDA-authorized molecular viral assay** to detect SARS-CoV-2 RNA**:**
     o Confirm with doctor there is no further clinical suspicion (i.e.: follow step 5).

   NOTE: In most situations, a test-based strategy is no longer recommended to determine when to discontinue isolation for an employee confirmed positive with COVID-19.

5. Return to work clearance obtained from employee's provider if employee had a negative COVID-19 test before end of recommended isolation period above, OR was seriously ill (hospitalized) OR is severely immunocompromised.

If at work:

1. Separate from other employees and don or continue to wear facemask. Go directly home immediately.
2. Follow steps 1-4 above.
3. Using proper PPE and safety protocols, company performs CDC recommended cleaning and disinfection and appropriate surface testing of areas the employee was exposed to while symptomatic at work, including vehicles.

SCENARIO 2: Employee has/ had close contact (household or within 6 ft.) with a confirmed or suspected case of COVID-19, or tests positive for COVID-19, but has no symptoms:

1. Stay home or go home. Call healthcare provider before seeking testing or treatment unless an emergency. If seeking emergency medical care, call ahead to notify of symptoms. Wear a cloth face covering before arriving at health provider.
2. Notify Supervisor and HR right away.
3. *CDC recommends non-tested, asymptomatic persons (including essential and non-healthcare critical workers), identified as having close contact with a confirmed or suspected COVID-19 case be **quarantined at home for 14 days and monitor symptoms** from the date of last contact with the ill individual. Wear a cloth face covering when in public or around other people.
   - If *remains asymptomatic and cannot quarantine for 14 days*, CDC states a **10 day quarantine** is acceptable without a test; or **7 day quarantine** with a negative FDA-authorized PCR or antigen test collected within 48 hours of 7th day, with continued monitoring up to 14th day.
   - Wear a face covering, practice distancing when in public or around other people.
4. CDC recommends non-tested, asymptomatic critical workers who may have had exposure to a person with suspected or confirmed COVID-19 wear a face mask at all times while at work for at least 14 days from the date of last contact with the ill individual, self-monitor temps, and practice social distancing in the workplace as able. The employer should screen employee temperature and symptoms before shift start, increase air exchange in the building, and increase cleaning of commonly touched surfaces.
5. CDC recommends **laboratory-confirmed, asymptomatic** persons be isolated at home for **at least 10 days (20 days or follow provider recommendations if severely immunocompromised)** since the date of their first positive COVID-19 viral diagnostic test and have no subsequent illness or symptoms.

   - Employee practices social distancing and wears a cloth face covering when other people are present.

6. If employee becomes symptomatic, follow appropriate steps under Scenario 1.

SCENARIO 3: Employee planning/post travel

1. If traveling for essential business purposes, consult local public health for recommendations regarding quarantine/ return to work and follow CDC guidelines.
2. If international or domestic travel outside of own community is personal and cannot be avoided, the employee is recommended to **social distance as able for 14 days and monitor symptoms** upon return.
3. If employee develops fever or symptoms after returning from travel, follow Scenario 1 guidelines.

*Temperature thresholds are based on CDC guidelines for oral temperature indication of a fever. Normal adult body temperature is usually between 97°F and 99°F. While temperatures at or above 99°F may indicate onset of illness or infection, it is important to note that human body temperatures can also fluctuate depending on age, personal health conditions, and time of day and a temperature over 99°F may be normal. Also important to note is that some individuals may be at the pre-symptomatic or post-symptomatic stage of illness with a lower body temperature than 100.4°F and still be able to transmit pathogens to others or to surfaces. Therefore, it cannot be assumed that a temperature below 100.4°F indicates the person is well or does not have COVID-19 or some other illness in their system; or a temperature above indicates that diagnosis. Fever (≥100.4°F) is just one symptom of potential illness and is recommended for screening of non-healthcare employees. Finally, follow thermometer manufacturer guidelines for fever indicators as ranges will depend on the type and accuracy of thermometer.   In general, the following correlations apply:

- *A rectal temperature is 0.5°F (0.3°C) to 1°F (0.6°C) higher than an oral temperature.*
- *An ear (tympanic) temperature is 0.5°F (0.3°C) to 1°F (0.6°C) higher than an oral temperature.*
- *An armpit (axillary) temperature is usually 0.5°F (0.3°C) to 1°F (0.6°C) lower than an oral temperature.*
- *A forehead (temporal) scanner is usually 0.5°F (0.3°C) to 1°F (0.6°C) lower than an oral temperature.*

*It is recommended to compare with your most current state or local public health guidelines (which supersede CDC guidelines) when using this document.