High Risk Area (Level 3) Travel Protocol with or without symptoms - Quarantine for 14 days after they left area of concern and monitor for symptoms.

- China (including Hong Kong)
- Iran
- South Korea
- Japan
- United Kingdom and Ireland (England, Scotland, Wales, Northern Ireland, and Republic of Ireland)
- Europe (Schengen Area): Austria, Belgium, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden, Switzerland, Monaco, San Marino, Vatican City
- Cruise Ship Travel

*Team members should monitor health and practice social distancing. (Take temperature two times a day and monitor for a fever. Watch for cough or trouble breathing. Stay home and avoid contact with others. Do not take public transportation, taxis during your quarantine time. Avoid crowded places and limit your activities in public. Keep your distance from others-6 feet)

Travel but not to CDC travel advisory areas without symptoms - If COVID-19 is spreading within your travel you may be at higher risk of exposure. Participate in the telephonic travel health screen via occupational health. Any areas of concern will be reviewed on a case by case basis.

Travel but not to a CDC travel advisory areas with symptoms - Stay at home if you feel sick with a fever, cough, or shortness of breath. Reported illnesses have ranged from mild symptoms to severe symptoms. Symptoms may appear 2-14 days after exposure. Call your local occupational health to complete your telephonic travel screen questionnaire. Any areas of concern will be reviewed on a case by case basis.

I have been on quarantine and I feel sick (fever 100.4 or higher, cough, or trouble breathing): Seek medical care, but call ahead before you go to the doctor or emergency room. Tell you provider about your recent travel and symptoms. Avoid Contact with others. Notify occupational health as you are able.

I am having symptoms but no awareness of exposure: Stay at home if you feel sick with a fever, cough, or shortness of breath. Take temperature two times a day and monitor for a fever. Watch for cough or trouble breathing. Seek prompt medical attention if your illness is worsening (e.g., difficulty breathing), call your doctor before seeking care and discuss your symptoms.

My spouse has been exposed and is in quarantine, do I need to be quarantined too? No, the CDC does not recommend testing, symptom monitoring or special management of people exposed to asymptomatic people with potential exposure. These people are not considered exposed to COVID-19.

Any special guidance for our team members that are at a higher risk of COVID-19 (elderly, those with medical co-morbidities, and potentially other individuals who are at a higher risk for complications from respiratory diseases, such as pregnant women) - They are at risk if they become infected, thus, everyone should wear appropriate PPE when working with patients.
COVID-19 Testing Criteria—Currently OH is not testing for COVID-19—Team members with no known exposure but symptomatic, upon negative influenza test and negative respiratory panel, a COVID 19 test will be recommended for:

1. Symptomatic individuals such as, older adults and individuals with chronic medical conditions and/or an immunocompromised state that may put them at higher risk for poor outcomes (e.g., diabetes, heart disease, receiving immunosuppressive medications, chronic lung disease, chronic kidney disease).
2. Healthcare personnel, who within 14 days of symptom onset had close contact with a suspect or laboratory-confirmed COVID-19 patient, or who have a history of travel from affected geographic areas within 14 days of their symptom onset.

Exposure protocol with symptoms—

If exposed to a COVID-19 patient, the following protocol will be used to determine work status

<table>
<thead>
<tr>
<th>Epidemiologic risk factors</th>
<th>Exposure category</th>
<th>Recommended Monitoring for COVID-19 (until 14 days after last potential exposure)</th>
<th>Work Restrictions for Asymptomatic HCP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prolonged close contact with a COVID-19 patient who was wearing a facemask (i.e., source control)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>HCP PPE: None</td>
<td>Low</td>
<td>Active</td>
<td>Can work while patient results are pending. If patient result is positive, exclude from work for 14 days after last exposure.</td>
</tr>
<tr>
<td>HCP PPE: Not wearing a facemask or respirator</td>
<td>Low</td>
<td>Active</td>
<td>Can work while patient results are pending. If patient result is positive, exclude from work for 14 days after last exposure.</td>
</tr>
<tr>
<td>HCP PPE: Not wearing eye protection</td>
<td>Low</td>
<td>Self with delegated supervision</td>
<td>None</td>
</tr>
<tr>
<td>HCP PPE: Not wearing gown or gloves</td>
<td>Low</td>
<td>Self with delegated supervision</td>
<td>None</td>
</tr>
<tr>
<td>HCP PPE: Wearing all recommended PPE (except wearing a facemask instead of a respirator)</td>
<td>Low</td>
<td>Self with delegated supervision</td>
<td>None</td>
</tr>
</tbody>
</table>

Prolonged close contact with a COVID-19 patient who was not wearing a facemask (i.e., no source control)

| HCP PPE: None             | Low               | Active                                                                            | Can work while patient results are pending. If patient result is positive, exclude from work for 14 days after last exposure. |
| HCP PPE: Not wearing a facemask or respirator | Low               | Active                                                                            | Can work while patient results are pending. If patient result is positive, exclude from work for 14 days after last exposure. |
| HCP PPE: Not wearing eye protection | Low               | Active                                                                            | None                                  |
| HCP PPE: Not wearing gown or gloves | 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                                  |

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.

COVID Staff/Provider Protocols
HCP in the high- or medium-risk category should undergo active monitoring, including restriction from work in any healthcare setting until 14 days after their last exposure.

HCP in the low-risk category should perform self-monitoring with delegated supervision until 14 days after the last potential exposure.

HCP in the no identifiable risk category do not require monitoring or restriction from work.

I have completed my quarantine-When can I return to work? - Please call your local occupational health clinic for a telephonic return to work screen.

Confirmed COVID-19-When can I return to work?-

Return to Work Criteria for HCP with Confirmed or Suspected COVID-19

1. Test-based strategy. Exclude from work until
   - Resolution of fever without the use of fever-reducing medications and
   - Improvement in respiratory symptoms (e.g., cough, shortness of breath), and
   - Negative results of an FDA Emergency Use Authorized molecular assay for COVID_19 from at least two consecutive nasopharyngeal swab specimens collected > 24 hours apart (total of two negative specimens)

2. Non-test-based strategy. Exclude 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 improvements in respiratory symptoms (e.g. cough, shortness of breath) and,
   - At least 7 days have passed since symptoms first appeared

After returning to work, HCP should:
   - Wear a facemask at all times while in the healthcare facility until all symptoms are completely resolved or until 14 days after illness onset, whichever is longer
   - Be restricted from contact with severely immunocompromised patients (e.g., transplant, hematology-oncology) until 14 days after illness onset
   - Adhere to hand and respiratory hygiene and cough etiquette (cover nose and mouth when coughing and sneezing, dispose of tissues in waste receptacle)
   - Self-monitor for symptoms and seek re-evaluation from Occupational Health if respiratory symptoms recur or worsen