**Post-exposure Protocol for COVID-19**

**Purpose**

The purpose of this protocol is to provide guidance in the event of an exposure to COVID-19.

**Roles**

Every employee will follow these steps in an event of an exposure to COVID-19.

**Process**

* In the event of an exposure to a confirmed or suspected case of COVID-19, the employee will immediately:
	+ Inform his/her supervisor of exposure
	+ Submit to an exposure risk assessment, which breaks down each risk category, found here: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

**Risk Categories**

**A healthcare professional (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 occupational health program) for medical evaluation prior to returning to work**

1. ***High- and Medium-risk* Exposure Category
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. If they develop any fever (measured temperature >100.0 F or subjective fever) OR respiratory symptoms consistent with COVID-19 (e.g., cough, shortness of breath, sore throat)[\*](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html#note1) they should immediately self-isolate (separate themselves from others) and notify their local or state public health authority and healthcare facility promptly so that they can coordinate consultation and referral to a healthcare provider for further evaluation.
2. ***Low-risk* Exposure Category
HCP in the *low-risk* category** should perform self-monitoring with delegated supervision until 14 days after the last potential exposure. Asymptomatic HCP in this category are not restricted from work. They should check their temperature twice daily and remain alert for respiratory symptoms consistent with COVID-19 (e.g., cough, shortness of breath, sore throat)[\*](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html#note1). They should ensure they are afebrile and asymptomatic before leaving home and reporting for work. If they do not have fever or respiratory symptoms they may report to work. If they develop fever (measured temperature > 100.0 oF or subjective fever) OR respiratory symptoms they should immediately self-isolate (separate themselves from others) and notify their local or state public health authority or healthcare facility promptly so that they can coordinate consultation and referral to a healthcare provider for further evaluation. On days HCP are scheduled to work, healthcare facilities could consider measuring temperature and assessing symptoms prior to starting work. Alternatively, facilities could consider having HCP report temperature and symptoms to delegated officials prior to starting work. Modes of communication may include telephone calls or any electronic or internet-based means of communication.
3. **HCP who Adhere to All Recommended Infection Prevention and Control Practices**Proper adherence to currently recommended infection control practices, including all recommended PPE, should protect HCP having prolonged close contact with patients infected with COVID-19. However, to account for any inconsistencies in use or adherence that could result in unrecognized exposures, HCP should still perform self-monitoring with delegated supervision as described under the low-risk exposure category.
4. ***No Identifiable risk* Exposure Category
HCP in the *no identifiable risk* category** does not require monitoring or restriction from work.
5. **Community or travel-associated exposures**HCP with potential exposures to COVID-19 in community settings, should have their exposure risk assessed according to [CDC guidance](https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html). HCP should inform their supervisor that they have had a community or travel-associated exposure. 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
6. 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 face masks. If HCP develops 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.

**In the event that an employee is sick, the supervisor should:**

* **Actively encourage sick employees to stay home**
* **Separate sick employees**
* **Refer to the link below for detailed business precautions:** [**https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html?CDC\_AA\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fspecific-groups%2Fguidance-business-response.html**](https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fspecific-groups%2Fguidance-business-response.html)
* **Additional Measures in Response to Currently Occurring Sporadic Importations of the COVID-19:**
	+ Employees who are well but who have a sick family member at home with COVID-19 should notify their supervisor and refer to CDC guidance for [how to conduct a risk assessment](https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html) of their potential exposure.