# **Duke Employee Occupational Health Management Plan for Healthcare Providers**

## **Ability to Work Protocols**

The following applies to all faculty and staff who are employed by DUHS, including PDC, SOM, and SON.

### **Asymptomatic Healthcare Providers (HCPs)**

**ALL HCPs** should **self-monitor** by taking their temperature twice daily and assessing for COVID-19 illness. Signs and symptoms of COVID -19 include:

- Fever (for healthcare providers any temperature greater than 100.0 Fahrenheit)
- Shortness of breath or difficulty breathing
- New onset cough (within the last 2 weeks)
- New onset nasal congestion or runny nose (within the last 2 weeks)
- Sore throat
- Muscle aches
- Chills, including shaking chills
- Headache
- Gl symptoms
- New loss of taste or smell

### **Symptomatic Healthcare Providers**

All HCPs who develop any of the above symptoms should follow these steps:

- You may not work.
- If any signs or symptoms occur while working, the HCP should immediately mask, leave the patient care area, and inform their supervisor.
- Call the Duke COVID Hotline for assessment and COVID-19 testing while continuing to wear a
  mask. By contacting the hotline, you will register with Employee Health and must complete the
  Duke employee survey that will be sent to your email. Employee Health will contact you
  promptly.
- Self-isolate until cleared by Employee Occupational Health & Wellness (EOHW) to return to work.

**Testing for HCPs for COVID-19** will be ordered through the Duke COVID Hotline (utilizing the EOHW testing triage plan for HCPs) or by EOHW if symptoms develop during the monitoring period supervised by EOHW. Testing will be expedited, and HCPs will be cleared to return to work per the guidelines below.

**Duke COVID Hotline:** 919-385-0429 option 1 for employees 8am – 8pm. For urgent afterhours concerns, call Blood and Body Fluid (BBF) hotline: 919-684-8115

#### Symptomatic HCPs should:

- Rest and hydrate. Adequate sleep and staying hydrated are typically helpful in your recovery.
- Manage and treat your symptoms with fluids and medicines for fevers (acetaminophen), cough, and other cold symptoms.



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- Call your doctor if you start to feel worse (increased shortness of breath, chest congestion, coughing, or fevers).
- Seek emergency medical treatment if you have severe difficulty breathing.

# Follow guidelines for hand washing and germ management:

- Clean your hands often. Wash your hands with soap and water for at least 20 seconds. If soap and water are not available, clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used preferentially if hands are visibly dirty.
- Avoid touching your eyes, nose, and mouth with unwashed hands, and wash your hands after touching your face.
- Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues into a lined trash can. Immediately wash your hands with soap and water or hand sanitizer.

**Personal Assistance Service** (PAS) is available to offer emotional support during this stressful period. Telephonic or video counseling is available, and you can access this service using most smartphones, tablets and computers with a camera. You may contact PAS by calling 919-416-1727. The following link will help you get ready: <a href="https://pas.duke.edu/about/counseling-services/online-cou

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

# HCP with <u>mild to moderate illness</u> who are not severely immunocompromised:

- At least 10 days have passed since symptoms first appeared and
- At least 24 hours have passed since last fever without the use of fever-reducing medications and
- Symptoms (e.g., cough, shortness of breath) have improved

### HCP with severe to critical illness or who are severely immunocompromised1:

- At least 20 days have passed since symptoms first appeared
- At least 24 hours have passed since last fever without the use of fever-reducing medications and
- Symptoms (e.g., cough, shortness of breath) have improved

**Note:** HCP who are **severely immunocompromised** but who were **asymptomatic** throughout their infection may return to work when at least 20 days have passed since the date of their first positive viral diagnostic test.

## **Severe Immunocompromising Conditions** Include:

• Primary immunodeficiency

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- Cancer diagnosis on active chemotherapy
- Hematopoietic stem cell transplant recipient
- Solid organ transplant recipient



- Poorly controlled HIV (CD4 < 200)</li>
- Steroids >20mg per day for >2 week
- Autoimmune disease on biologic agents (like Remicade, Enbrel) and/or multi-drug immunosuppression

### HCP with laboratory-confirmed COVID-19 who have not had any symptoms:

Time-based strategy. Exclude from work until:

10 days have passed since the date of their first positive COVID-19 diagnostic test assuming they have not subsequently developed symptoms since their positive test. If they develop symptoms, then the criteria above for symptomatic HCPs should be used.

If HCP was never tested for COVID-19 but has an alternate diagnosis (e.g., tested positive for influenza), criteria for return to work should be based on that diagnosis. Influenza: Must be fever-free for 24 hours off fever-reducing medications and feeling well enough to work. GI illness only: Must be free of vomiting and diarrhea for at least 24 hours.

## Return to work requires clearance by Duke Employee Occupational Health & Wellness (EOHW).

A Health Recommendation Form will be emailed to the HCP and their supervisor.

### **Asymptomatic HCP Scenarios**

Asymptomatic HCPs who have had exposure to a confirmed COVID case (except for when the case is a close household contact) may work as long as asymptomatic. HCPs will be enrolled in the EOHW symptom monitoring program and must wear a surgical mask throughout the workday.

Asymptomatic HCP who is a close household contact of a confirmed COVID case will be quarantined for 14 days from date of last contact with the case during their infectious period. The quarantine duration is determined by EOHW and can be 14 days IF the employee can separate from their household member within the house. If unable to separate then duration can be length of infectious period + incubation period, often at least 24 days. Employees may not be able to separate if they are caring for an ill household member or due to the physical characteristics of the house such as only 1 available bathroom.



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