

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** for signs and symptoms of COVID-19 by taking their temperature twice daily and assessing for:

- Fever (for healthcare providers any temperature greater than 100.4 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
- GI symptoms
- New loss of taste or smell

Symptomatic Healthcare Providers

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

- If any signs or symptoms occur prior to a shift, the HCP must not report to work.
- If any signs or symptoms occur while working, the HCP must immediately 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 REDCap survey that will be sent to your email. Testing cannot be ordered until that survey is complete. Please have your Duke unique ID ready.
- 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). Testing will be expedited, and HCPs will be cleared to return to work per the guidelines below.

Duke COVID Hotline: [919-385-0429](tel: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.
- 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 other infection prevention strategies:

- 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. <https://pas.duke.edu/about/counseling-services/online-counseling-services>

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

HCP with mild to moderate illness 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, vomiting, or diarrhea **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, vomiting, or diarrhea **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
- Cancer diagnosis on active chemotherapy
- Hematopoietic stem cell transplant recipient
- Solid organ transplant recipient
- Poorly controlled HIV (CD4 < 200)
- 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 at least 7 days from date of last contact with the case during their infectious period. The quarantine duration is determined by EOHW and can be 7 days when the below conditions are met:

- The employee can completely separate from their household member (separate bedroom, bathroom, and food preparation) and
- The employee has a negative PCR test within 48 hours of quarantine end date after day 7* (day 5 or 6 following last exposure) and
- The employee remains asymptomatic and
- The employee monitors their symptoms daily for the full 14 days after exposure.

If unable to separate, then duration can be length of infectious period + incubation period, often at least 17 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.

*If unable to test then quarantine duration will end after day 10 as long as HCP remains asymptomatic and monitors their symptoms daily for full 14 days after exposure.