

## FAQs on COVID-19 Transmission and Exposure Risk for Team Members

*These FAQs address COVID-19-related topics specific to DUHS healthcare workers and managers.*

### Healthcare Workers

**Q: I cared for a patient who was not on Special Airborne Contact Isolation at the time of my interaction but who later tested positive. What is my risk of getting COVID-19 infection?**

**A:** The risk of transmission of COVID-19 from patients to healthcare workers depends on a number of factors. These factors include: 1) duration of close contact, 2) types of activities performed in the patient room and nature of contact with the patient, and 3) personal protective equipment (PPE) worn by the healthcare worker and patient.

A number of case reports have found a low incidence of transmission to healthcare workers who cared for COVID-19 patients, even when Special Airborne Contact precautions were not followed.

- [CDC Morbidity and Mortality Weekly Report April 14, 2020: Transmission of COVID-19 to Health Care Personnel During Exposures to a Hospitalized Patient — Solano County, California, February 2020](#)
  - 3 of 121 (2.5%) healthcare workers acquired COVID-19 in the 14 days following exposure to the index patient.
  - The following were identified as risk factors for acquisition:
    - Increased duration of exposure (median time in room was 120 minutes among infected healthcare workers)
    - Prolonged time in room without wearing face mask or other PPE while non-invasive ventilation or nebulized medications were being administered
- [COVID-19 and the Risk to Health Care Workers: A Case Report](#)
  - 0 of 41 healthcare workers acquired COVID-19 following exposure to the index patient during aerosol-generating procedures.
    - Exposure was defined as at least 10 minutes in the room of the patient while an aerosol-generating procedure was performed.
    - The majority of healthcare workers (85%) were wearing a surgical mask at the time of the exposure.
    - The authors suggest that standard precautions, including hand hygiene and universal surgical masks, may prevent healthcare worker acquisition of COVID-19.

**Q: I cared for a patient who was asymptomatic but who later tested positive for COVID-19 on a pre-operative screening test. What is my risk of getting COVID-19 infection?**

**A:** The risk of transmission to healthcare workers providing routine care to an asymptomatic patient is unknown but believed to be quite low as long as the healthcare worker followed universal precautions (e.g., wore gloves if contact with mucous membranes or secretions was anticipated), performed hand hygiene after touching the patient or patient's environment, and wore a surgical mask, as indicated per our universal masking policy.

The risk of transmission to healthcare workers performing [high-risk aerosol-generating procedures \(page 3\)](#) on patients who are asymptomatic but who test positive for COVID-19 is also unknown but believed to be higher than the risk following routine care interactions. This underlies our [recommended policies to perform pre-procedure screening tests](#) on individuals undergoing such high-risk procedures.

**Q: I think I was exposed to a patient who later tested positive for COVID-19. Do I need to stay out of work?**

**A:** No. Team members who were potentially exposed but who have no symptoms of COVID-19 should continue to work. If you think you were exposed, follow these steps:

- 1) Contact your manager to notify them of your concern that you were potentially exposed. Team members with concerns may call the Duke Health COVID-19 hotline (919-385-0429, option 1) to report potential exposure to Employee Health.
- 2) Continue to wear a surgical mask at all times at work EXCEPT while eating and using the restroom, per our universal masking policy.
- 3) If you develop any symptoms of COVID-19 (fever, chills, cough, shortness of breath, muscle aches, headache, sore throat, loss of taste or smell), stay home from work or leave work and call the Duke Health COVID-19 hotline from 8 a.m. to 8 p.m. at 919-385-0429, option 1 to report your symptoms. After hours, contact EOHW using the Blood and Body Fluid Exposure Hotline at 919-684-8115.

**Q: I think I was exposed to a patient who later tested positive for COVID-19. Is there a risk of me spreading COVID-19 to other team members or patients at work?**

**A:** The risk of transmission from an asymptomatic person is unknown but believed to be quite low. Please continue to follow the best practices as outlined by our healthcare system, including universal precautions, frequent hand hygiene, universal masking, physical distancing in the workplace, and frequent disinfection of high-touch surfaces in your environment.

**Q: I think I was exposed to a patient who later tested positive for COVID-19. What should I do to prevent the spread of COVID-19 to loved ones at home?**

**A:** Team members may experience distress knowing that they were potentially exposed to a COVID-19 positive patient at work. However, remember that you greatly decrease your chance of getting sick by following the protocols we have instituted for your safety, including universal precautions, frequent hand hygiene, universal masking, physical distancing in the workplace, and frequent disinfection of high-touch surfaces in your environment. We recommend that all team members follow these [best practices for transitioning from work to home](#) in order to keep yourself and loved ones safe at home.

**Q: I think I was exposed to a patient who later tested positive for COVID-19. Do I need to be tested?**

**A:** We are currently not recommending testing if you are asymptomatic. The risk of transmission from an asymptomatic person is unknown but believed to be quite low. Please continue to follow the best practices as outlined by our healthcare system, including universal precautions, frequent hand hygiene, universal masking, physical distancing in the workplace, and frequent disinfection of high-touch surfaces in your environment.

**Q: What should I do if I am so anxious about my or my family's risk of COVID-19 infection that it is interfering with my well-being or my ability to perform my work?**

**A:** Team members who are experiencing significant anxiety regarding their personal risk of COVID-19 infection should contact the COVID-19 Emotional Support and Well-being Line: 919-681-1631.

## Managers

**Q: What steps should I take when I am notified by one of my team members that they were potentially exposed to a known COVID-19 patient who was not on Special Airborne Contact Isolation?**

**A:** Please follow the steps below:

- 1) Demonstrate concern and empathy for the team member and reassure them that their safety is our top priority.
- 2) Recommend that team members call the Duke Health COVID-19 hotline (919-385-0429, option 1) if they have concerns or are experiencing any symptoms of COVID-19.
- 3) Let them know that you will consult with the Infection Prevention and Employee Health teams, who will assist in determining if an exposure occurred.
- 4) Collect the team member's contact information for follow-up by Employee Health.
- 5) Notify your entity's Infection Preventionist on-call with the patient identification and team member's contact information.

**Q: I discovered that one of my team members tested positive for COVID-19. What do I do?**

- A:**
- 1) Be supportive. This information may be very distressing for the team member.
  - 2) Respect the team member's privacy and do not discuss their status with any other team members.
  - 3) Instruct the team member to call the Duke Health COVID-19 hotline (919-385-0429, option 1) to register with Employee Health. Let them know that Employee Health will be reaching out to them that day.
  - 4) Advise the team member that they are to remain out of work until they are cleared by Employee Health.
  - 5) Employee Health and Infection Prevention will work together to determine if any other team members or patients need to be notified.