

EMPLOYEE EXPOSURE WITH COVID 19 SCREEN POSITIVE PATIENTS (SPP) or PATIENT IDENTIFIED AS A PERSON UNDER INVESTIGATION (PUI)

*****This guidance has been reviewed and approved by the Marin EMS Agency and the Marin County Public Health Officer*****

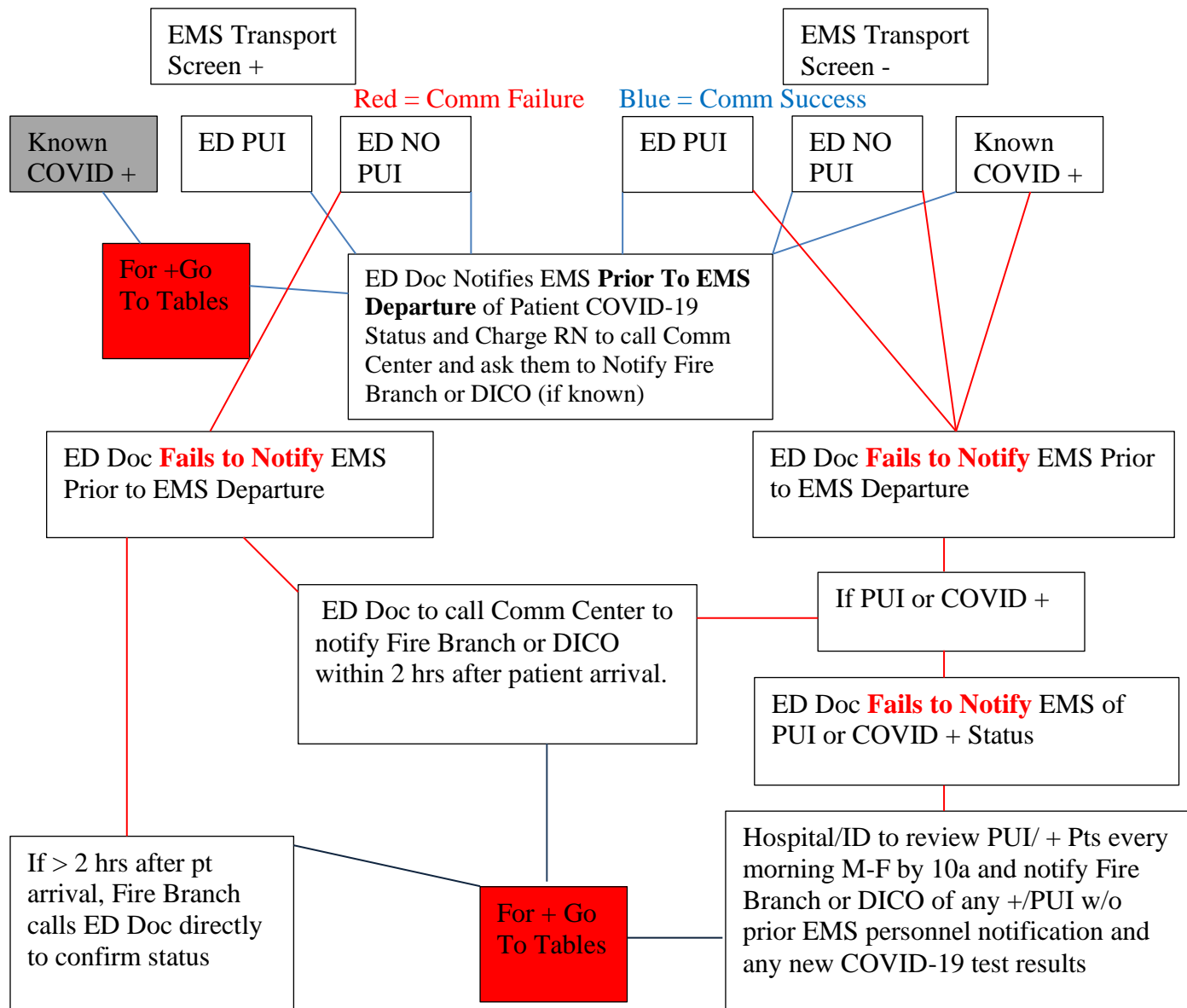
- ☐ Employee follows chain of command to contact Battalion Chief (BC)/Designated Infection Control Officer (DICO) to report contact with SPP/PUI.
- ☐ Have employee follow SPP/PUI to receiving facility. On-duty BC/DICO shall respond to the ED and identify themselves as the DICO assigned to the employee.
- ☐ Speak with Charge RN (get his/her full name). Advise of need for information re SPP/PUI and whether they will be tested for COVID-19. In keeping with state law the employee must be evaluated by a MD (not NP or PA). Confirm telephone for follow up contact.
- ☐ ED personnel expected to tell transporting crews immediately in ED if transported patient will be considered a PUI. If patient becomes a PUI after paramedics departure it is the ED Docs responsibility to contact EMS via Comm Center (415-499-7235) and ask that they inform the FIRE BRANCH Commander.
- ☐ When possible, on duty BC/DICO to remain at ED until determination made as to whether patient will be tested for COVID-19.
- ☐ If COVID-19 testing not done there is no reason to quarantine these responders.
- ☐ If COVID-19 testing to be done, see current guidance from CDC on risk categories below (Tables)
- ☐ If PPE not worn or breached during initial close contact evaluation of SPP/PUI as per definition of "Medium risk," the Marin County public health recommendation is that these providers be placed on self-isolation at home for 14 days. **There is no need to directly contact public health to confirm this recommendation.**
- ☐ Only personnel in close contact with a patient who is a SPP/PUI without proper PPE are considered to have an at risk exposure, other people exposed to these providers afterwards are considered a NO RISK exposure.
- ☐ Tests performed by hospitals will likely be available to hospital Infectious Disease specialist at those hospitals before public health.
- ☐ When source patient testing results are available, the testing entity (hospital or public health) must inform the exposed employee of the results. Current turnaround time for tests 24-48 hours.
- ☐ If BC/DICO or responding personnel have not heard **testing results** within 48 hours, they should call, in the following order: occupational medicine, hospital EMS Liaison, hospital infection control officer, hospital administrator on call, MHOAC (via Comm Center).
- ☐ Schedule follow up w/Occupational Medicine or employee pre-designated physician as per normal protocol

Hospital Responsibilities

If, at any point, a transported patient is identified as a PUI the ED is required to immediately notify the crew and/or their chain of command. This should happen prior to departure from the ED. If it does not, ED MD or ED Charge Nurse or EMS Liaison shall call Comm Center (415-499-7235) to determine how to contact responding/transporting unit(s). If transporting/responding crews or BC/DICO have any concerns about EMS patients who may become PUI in ED, they should call the ED directly within 2 hours after offload and ask to speak to treating personnel.

Phone #s:

- | | |
|--------------------------------|---|
| a. MarinHealth Medical Center: | 415-925-7203(ED) or 415-827-3006 (Test Results) |
| b. Kaiser San Rafael | 415-444-2415 (ED) |
| c. Novato Community Hospital | 415-209-1350 (ED) |
| d. Comm Center | 415-499-7235 |
| e. Public Health | 415-473-4163 |
| f. MHOAC | 415-473-3100 |
| g. Fire Branch Commander | 415-717-1514 |



Tables: CDC Risk Categories for First Responders

These categories apply to First Responders (FR) with close contact to any patient who has tested positive for COVID-19 or is considered a Person Under Investigation (PUI). Any responder who is in contact with a SPP, COVID-19 patient, or PUI should inform their immediate supervisor.

Close contact with a COVID-19 patient (or PUI) who **WAS** wearing a facemask

Situation	Risk Level	Monitoring Level	Work Exclusions
FR PPE: Wearing all recommended PPE	Low	Self with delegated supervision	None
FR PPE: Not wearing eye protection OR not wearing gown or gloves	Low	Self with delegated supervision	None
FR PPE: None or Not wearing a facemask or respirator	Medium	Self with delegated supervision	Exclude from work for 14 days after last exposure

Close contact with a COVID-19 patient (or PUI) who **WAS NOT** wearing a facemask

Situation	Risk Level	Monitoring Level	Work Exclusions
FR PPE: Wearing all recommended PPE	Low	Self with delegated supervision	None
FR PPE: Not wearing gown or gloves	Low	Self with delegated supervision	None
FR PPE: Not wearing eye protection	Medium	Self with delegated supervision	Exclude from work for 14 days after last exposure
FR PPE: None or NOT wearing a facemask or respirator	High	Active	Exclude from work for 14 days after last exposure

- A. Screened Positive Patient- A patient who answers yes to the COVID-19 screening questions outlined in the Field Reference Guide asked by EMS providers:

Some screened positive patients will become Persons Under Investigation (PUI), while other may not. Contact with a screened positive patient does not require employee monitoring, unless the patient is COVID-19 positive or becomes a PUI.

- B. Person Under Investigation (PUI)- Patients who are determined by a clinician to warrant testing for the COVID-19. This is determined by healthcare providers in coordination with Infectious Disease specialists

Utilizing the appropriate PPE (N95 or higher, Gloves, Gown, and Eye protection) will provide the protection needed to maintain low-risk contact.

“Proper adherence to currently recommended infection control practices, including all recommended PPE, should protect First Responders having close contact with patients infected with COVID-19.”

- For Low-risk: Self-monitoring with delegated supervision, no work restrictions

Self-Monitoring with delegated supervision in a healthcare setting means First Responders perform self-monitoring with oversight by their healthcare facility's occupational health or infection control program in coordination with the health department of jurisdiction, if both the health department and the facility are in agreement. On days First Responders are scheduled to work, healthcare facilities could consider measuring temperature and assessing symptoms prior to starting work. Alternatively, a facility may consider having First Responders report temperature and absence of symptoms to occupational health prior to starting work. Modes of communication may include telephone calls or any electronic or internet-based means of communication. Resources below from Public Health

- Medium-Risk exposure: employees will be in self-isolation, off work for 14 days post exposure with self-monitoring and delegated supervision.

Self-Monitoring with delegated supervision in a healthcare setting means First Responders perform self-monitoring with oversight by their healthcare facility's occupational health or infection control program in coordination with the health department of jurisdiction, if both the health department and the facility are in agreement. On days First Responders are scheduled to work, healthcare facilities could consider measuring temperature and assessing symptoms prior to starting work. Alternatively, a facility may consider having First Responders report temperature and absence of symptoms to occupational health prior to starting work. Modes of communication may include telephone calls or any electronic or internet-based means of communication. Resources below from Public Health

- For High-Risk exposure: employees will be in self-isolation, off work for 14 days post exposure.

Active monitoring means that the state or local public health authority assumes responsibility for establishing regular communication with potentially exposed people to assess for the presence of fever or respiratory symptoms (e.g., cough, shortness of breath, sore throat). For First Responders with high-risk exposures, First Responders recommends this communication occurs at least once each day. The mode of communication can be determined by the state or local public health authority and may include telephone calls or any electronic or internet-based means of communication. Resources below from Public Health

Home Care Isolation Instructions

For those First Responders exposed to possible or documented COVID-19 infection and being home isolated

Regardless of whether symptoms are present, home isolation means separating as much as possible from other people sharing the living space.

- *The home isolated individual (HI) should stay in their own bedroom and, if possible, use a bathroom that is not shared with others.*
- *If there's only one bathroom, set up a bathroom rotation in which the HI uses the bathroom last and then disinfects it thoroughly.*
- *If the HI needs to come out of their room for any reason, they should wash their hands for at least 20 seconds with warm soap and water* and wear a mask. If soap/water not available, use an alcohol-based hand sanitizer with at least 60% alcohol*
- *Clean and disinfect commonly touched surfaces frequently. This includes countertops, doorknobs, light switches, and bathroom surfaces.*

For all persons in the home, including the HI:

- *Items should not be shared between others in the home and the HI. This includes dishes, drinking glasses, silverware, towels, phones, and remote controls.*
- *If possible, use a dishwasher to clean and dry dishes and silverware used by the HI. If this is not possible, wash them by hand using detergent and warm water. Dry them thoroughly, using a separate dishtowel.*

As long as all members of the household are following these home isolation and hygiene guidelines closely, the OTHER persons in the home can continue to participate in normal activities outside of the home during the quarantine period and they should simply follow the same social distancing recommendations.

- *Take care of yourself!*
- *Exercise: commercial gyms are to be avoided, but home exercise (including outdoor running, hiking, biking) is encouraged as long as social distancing (>6ft) is maintained*
- *For fever, Tylenol (not Ibuprofen or Aspirin) is recommended.*
- *Hydration: drink plenty of fluids and maintain a healthy and balanced diet*
- *Keep a normal sleep schedule and aim for at least 7 hours a night.*

The home isolated individual should stay home unless medical care is needed and should vigilantly self-monitor

- *If you develop emergency warning signs for COVID-19 get medical attention immediately. In adults, emergency warning signs:*
 - *Difficulty breathing or shortness of breath*
 - *Persistent pain or pressure in the chest*
 - *New confusion or inability to arouse*
 - *Bluish lips or face*
 - *This list is not all inclusive. Please consult your medical provider for any other symptom that is severe or concerning*