



## **Guidance for Risk Assessment to a Potential Exposure to a Person Under Investigation or Infected COVID-19 Patient**

**High-Risk Exposure** – The member had a prolonged close contact exposure with a Person Under Investigation (PUI) or confirmed COVID-19 patient; if the member was not wearing a respirator or the member performed a high-risk procedure such as intubation, CPAP, or nebulizer treatments without the full required personal protective equipment (PPE) including a fluid resistant gown, gloves, goggles, and a N-95 or higher respirator. The CDC now defines a close contact as exposure within 6 feet of an infected individual for a total of 15 minutes or more over a 24-hour period.

**Low-Risk Exposure** – The member had a brief or prolonged interaction with a PUI or COVID-19 patient; where the member wore the recommended PPE, donned and doffed the PPE correctly, properly decontaminated all reusable equipment and contact surfaces in vehicles, and washed hands and exposed skin with soap and warm water. Additional personnel not within 6-foot radius of patient but engaged on scene should be considered a low-risk exposure.

### **ALL POTENTIAL EXPOSURES SHOULD BE DOCUMENTED ACCORDING TO YOUR DEPARTMENT'S EXPOSURE CONTROL PLAN.**

Members who experienced a **high-risk exposure** should notify their department in accordance with exposure control plan and be placed in quarantine for 14 days and get a COVID-19 test if they show signs or symptoms. If asymptomatic for 14 days, they should return to work. If they become symptomatic, they should be isolated and tested for COVID-19, remain in isolation for 10 days from onset symptoms, follow physician's treatment plan, once isolation is lifted by the physician the employee can return to work.

Members who experienced a **low-risk exposure** should return to work and self-monitor for signs and symptoms including taking their temperature and recording it twice a day. If the member becomes symptomatic or tests for COVID-19, they should be isolated for a period of 14 days from the onset of symptoms, follow physician's treatment plan, once isolation is lifted by the physician the employee can return to work.

Signs and symptoms to be monitored are the following:

- Fever > 99.9 degrees F (Temperature should be checked twice a day at the start of the shift and middle of the shift duration)
- Cough
- Sore throat
- Difficulty breathing/shortness of breath
- Muscle aches/headache
- Loss of taste and smell
- Vomiting
- Diarrhea