

NOVEL CORONAVIRUS (COVID- 19)

NMC CONTINUE TO WORK - RETURN TO WORK

Guidelines for Staff | Revised April 20, 2020

COVID-19 TESTING STATUS

SYMPTOMS IN THE PAST 14 DAYS

	If COVID-positive	If COVID-negative	If COVID-untested
Any symptoms below: <ul style="list-style-type: none"> Fever $\geq 37.8^{\circ}\text{C}$ / 100°F Cough Sore Throat Shortness of breath or difficulty breathing Unexplained muscle aches Loss of sense of smell or taste Nasal congestion (different from pre-existing allergies) 	No entry without Employee Health (EH) Clearance Letter. Return to work (RTW) criteria: <ul style="list-style-type: none"> 14 days have passed since onset of symptoms, AND At least 3 days (72 hours) have passed since last fever without the use of fever-reducing medications (e.g., acetaminophen, ibuprofen, aspirin), AND Symptoms have completely resolved. <p>If after 14 days, any respiratory symptoms persist (like persistent cough), you will require additional clearance from EH before returning to work</p>	No entry without Employee Health (EH) Clearance Letter. Return to work (RTW) criteria: <ul style="list-style-type: none"> Return when illness resolved AND No fever in the last 24 hours <p>If you DO NOT work in a high risk unit^{1,2}, return to work is acceptable with improving or lingering symptoms if wearing a mask</p>	No entry without Employee Health (EH) Clearance Letter. Return to work (RTW) criteria: <ul style="list-style-type: none"> If less than 7 days since symptom onset: \rightarrow Recommend testing before RTW If more than 7 days since symptom onset, mild illness protracted (lasted > 7 days): \rightarrow Recommend testing before RTW If more than 7 days since symptom onset, mild symptoms lasted < 7 days, <u>and</u> NO fever for past 3 days \rightarrow RTW clearance with masks on non-High Risk Units^{1,2}

1. **High Risk Units: Employees and providers with symptoms or high risk exposures cannot work in high risk units:**

- Neonatal Intensive Care Unit (NICU)

2. **Non-High Risk Units: Employees and providers with symptoms or high risk exposures should consult with attending/supervisor to prevent contact with high risk populations across all inpatient needs.**

- Immunocompromised patients (Solid organ transplant (SOT), SOT listed, SOT evaluation in process, primary immunodeficiency, and receiving immunosuppressants including chronic high-dosage steroid, chemotherapy, biologics)