



Technical Bulletin



Date: April 1, 2020
Topic: Guidance for Public Health Management of Healthcare Personnel (HCP) with Potential Exposure to Patients with (COVID-19) in Healthcare Settings
Contact: Melissa Peek-Bullock, State Epidemiologist, Office of Public Health Investigations and Epidemiology
To: All Health Care Providers and Facilities

This guidance is being given while the Crisis Standard of Care (CSC) Plan is in effect. It is based on most recent CDC reports <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>, and data on the current SARS-CoV2 Pandemic. It includes allowances for asymptomatic HCP who could have had an exposure or could have been exposed to a COVID-19 patient to continue to work, while ensuring the HCP is “**Masked & Monitored**” - after options to improve staffing have been exhausted and in consultation with their Occupational Health Program and local/state health authority.

Healthcare facilities should have a low threshold for evaluating signs/symptoms and testing exposed HCP. The COVID-19, Nevada Governor’s COVID-19 Medical Advisory Team (MAT) recommends the following:

- Facilities should consider allowing asymptomatic HCP and HCP who could have been exposed or who have had an exposure to a COVID-19 patient to continue working.
- Exposed HCP should undergo laboratory testing for COVID-19 seven days after exposure.
- Exposed HCP should still report temperature and absence of symptoms each day prior to starting work.
- HCP should use proper Personal Protective Equipment (PPEs)/wear a facemask while at work for the 14 days after the exposure event – and as appropriate after such time.

If HCP develops even mild symptoms consistent with COVID-19, they must immediately cease patient care activities, put on a facemask (if not already wearing one), and notify their supervisor or occupational health services for an eventual medical evaluation and laboratory testing prior to self-isolation at home for at least 7 days or 72 hours after all symptoms are resolved; whichever is longer. Hospitalization may be required for severe cases.

- Facilities should undergo proactive practices including:
 - Asking all HCP to report recognized exposures; regularly monitor themselves for fever and symptoms of respiratory infection and not report to work when symptomatic or ill.
 - Developing a plan for how the facility will screen for symptoms and evaluate ill HCP. This could include having all HCP report absence of fever and symptoms prior to starting work each day.

Proper adherence to currently recommended infection control practices, including proper use of PPEs, should protect HCP who have had prolonged close contact with patients infected with COVID-19. However, to account for any inconsistencies in use or lack of adherence that could result in unrecognized exposures, all HCP should still perform self-monitoring.

Reporting

Health care providers should **immediately** notify both infection control personnel at their health care facility and their local/state health department in the event of a person under investigation (PUI) for COVID-19.

- **Nevada Division of Public and Behavioral Health (DPBH):** (775)-684-5911 (M-F 8:00 AM to 5:00 PM); (775) 400-0333 (after hours)
- **Southern Nevada Health District (SNHD):** (702)-759-1300 (24 hours)
- **Washoe County Health District (WCHD):** (775)-328-2447 (24 hours)
- **Carson City Health and Human Services (CCHHS):** (775)-887-2190 (M-F 8:00 AM to 5:00 PM); (775)-887-2190 (after hours)

For More Information: Please contact DPBH M-F 8:00 AM to 5:00 PM at (775)-684-5911. The after-hours line can be contacted at (775) 400-0333.



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