

Acute Respiratory Virus: NM Workforce Symptoms, Infection and Return-to-Work at NM Facilities

IMPORTANT NOTE

This document is meant to provide guidance to the NM workforce on what to do if you have symptoms of an acute respiratory illness or have a known infection, and/or to help you understand the return-to-work guidelines after an illness. Asymptomatic individuals who may have been exposed to COVID-19, whether in the workplace or in the community, may continue to work.

Tests ordered through this process are billed through your personal insurance. Test results will be part of your personal medical record and shared with Occupational Health.

If you have new onset of COVID-19 or Influenza-Like-Illness symptoms

DO NOT COME TO WORK.

- If at an NM facility, stop work and remove yourself from the workplace.
- Notify your supervisor per your departmental procedures.

FILL OUT THE <u>RESPIRATORY VIRUS QUESTIONNAIRE</u> AND GET TESTED.

- If you already have a positive test: Report it under the "New Positive Test" section.
- If you need to be tested: Complete the "New Symptoms" section and a COVID-19* PCR test will be ordered.

IF YOU TEST POSITIVE FOR COVID-19

- A positive at-home test will be accepted.
- If you already have a positive test, report it through the Respiratory Virus Questionnaire.
- Notify your supervisor that you have been instructed to stay home.
- You must isolate at home.
- After you complete the RVQ, you will get an email with return-to-work instructions that follow the guidelines on page 2.

IF YOU TEST NEGATIVE FOR COVID-19

- If you take an at-home or lab-based rapid test and the result is negative, you must get a PCR test for confirmation.
- If you have a fever, stay home until you have no fever for 24 hours without the use of medications.
- If you have respiratory symptoms, stay home until they have significantly improved without the use of medication.
- If you work on a high-risk unit, you also must test negative for flu prior to returning to work before Day 8.

*Immunocompromised individuals and those working on high-risk units will also be tested for flu during flu season. If you are immunocompromised and either test is positive, please contact your primary care team for treatment options.

Employees who are out for three or more days in a row should apply for FMLA through Sedgwick. If you are applying for a leave of absence due to COVID-19 illness, you will need to get a PCR test or a lab-based rapid antigen test ordered by a medical professional or pharmacy.



Return-to-work after positive test for staff who are not immunocompromised

IMPORTANT

If you did not complete the **RESPIRATORY VIRUS QUESTIONNAIRE** at the onset of your symptoms or to report your positive test, please do so now. Staff who are immunocompromised must follow return-to-work guidelines outlined on page 3.

MEET THE FOLLOWING SYMPTOM CRITERIA.

- Remain fever-free for 24 hours without fever-reducing medication.
- Respiratory-like symptoms are significantly improved without the use of medication.

2 MEET THE ILLNESS-SPECIFIC CRITERIA as outlined below.

COVID-19+ return-to-work: Staff who are not immunocompromised

- Completed the five-day COVID-19 isolation period.*
- Upon returning to work, you must wear a respirator or tight-fitting surgical mask at all times through Day 10. Sit at least 6 feet apart from others before removing your mask to eat or drink.
- You cannot work with patients who are immunocompromised until Day 11.

If you meet the criteria outlined above and need to provide care to patients who are immunocompromised before Day 11, a return-to-work testing option is available as outlined below:

- Take a return-to-work COVID-19 test via at-home antigen or lab-based test on Day 5 or later once symptom criteria has been met.
 - **ONE NEGATIVE** FOLLOW-UP TEST RESULT: You can provide care to patients who are immunocompromised as early as Day 6.

IF YOUR FOLLOW-UP COVID-19 TEST IS POSITIVE:

- Do not return to work before Day 11 unless you test negative. You may test daily until the test is negative.
- You can return to work on Day 11 without additional testing as long as you meet the symptom criteria above.

SEASONAL FLU AND OTHER INFLUENZA-LIKE ILLNESS (ILI) return-to-work

- If you work on a high-risk unit and had a positive flu test, you must meet the symptom criteria above, and you cannot work with immunocompromised patients on a high-risk unit until Day 8. No additional testing is required.
- All other staff must meet the symptom criteria above before returning to work. No additional follow-up testing is required.

*Day 0 is the day of symptom onset, or the date of the positive test, whichever comes first. *See page 5 for list of high-risk units.

> Visit the <u>Respiratory Virus/COVID-</u> <u>19 Hub on NM Interactive</u> for more information and for the latest version of this document.

Return-to-work after positive test for staff who are immunocompromised

IMPORTANT

If you did not complete the **RESPIRATORY VIRUS QUESTIONNAIRE** at the onset of your symptoms, or to report your positive test, please do so now. Staff who are not immunocompromised must follow the return-to-work guidelines outlined on page 3.

MEET THE FOLLOWING SYMPTOM CRITERIA.

- Remain fever-free for 24 hours without fever-reducing medication.
- Respiratory-like symptoms are significantly improved without the use of medication.

2 MEET THE ILLNESS-SPECIFIC CRITERIA as outlined below.

COVID-19+ return-to-work: Staff who are immunocompromised or those who had severe or critical illness from COVID-19

- Completed the 10-day COVID-19 isolation period.*
- You will need to take two lab-based rapid or PCR tests, 48 hours apart, on Day 8 or after.
 - If you are significantly better without fever, you can test on Day 8 and Day 10.
 - o If you still have symptoms on Day 8, start testing when you are significantly better.

WHEN YOU HAVE TWO NEGATIVE FOLLOW-UP TEST RESULTS: You can return to work. The second test should not be before Day 10. You can return as early as Day 11. Tests must be 48 hours apart.

F EITHER OF YOUR FOLLOW-UP COVID-19 TESTS IS POSITIVE:

- You cannot return to work. You can test daily until two consecutive tests are negative. The tests must be 48 hours apart.
- If you have completed the isolation period and cannot return to work due to ongoing symptoms or positive tests, please complete the <u>RESPIRATORY VIRUS QUESTIONNAIRE</u> for additional guidance.

SEASONAL FLU AND OTHER INFLUENZA-LIKE ILLNESS (ILI) return-to-work

- If you work on a high-risk unit and had a positive flu test, you must meet the symptom criteria above, and you cannot work with immunocompromised patients on a high-risk unit until Day 8. No additional testing is required.
- All other staff must meet the symptom criteria above before returning to work. No additional follow-up testing is required.

*Day 0 is the day of symptom onset or the date of the positive test, whichever comes first.

⁺ See page 5 for list of high-risk units.

If you work fully remote

If you work fully remote and never come onsite for work, you do not have to fill out the Respiratory Virus Questionnaire if you develop COVID-19 or Influenza-Like Illness symptoms. Testing is not needed to return to **remote work**. You may resume work when you are feeling able.

DEFINITIONS

High-risk units: Applies to the following units on the NMH campus: All ICU and transplant units including Prentice 14, 15, and 16; Feinberg 11E and 14E; and Galter 10 and 12. Additional NM hospital units can be designated high-risk by Infection Prevention.

Immunocompromised: Individuals who meet one of the CDC-defined criteria. This may include individuals undergoing chemotherapy, taking a daily steroid for more than 14 days or taking other medications that suppress the immune system. Check with your physician to see if you are considered moderately or severely immunocompromised.

Day 0: The day of symptom onset, or the date of the positive test, whichever comes first.

Influenza-Like Illness (ILI) symptoms: Fever, cough, sore throat, nasal congestion or runny nose, muscle or body aches.

COVID-19 symptoms: Fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, nasal congestion or runny nose, nausea or vomiting, and diarrhea.

Severe or critical illness due to COVID-19: Check with your care team if you were hospitalized to see if this applies to you. Based on <u>SARS-CoV-2 Illness Severity Criteria (adapted from the NIH COVID-19</u> <u>Treatment Guidelines)</u>.

COVID-19 TEST TYPES

Antigen: Tests for virus proteins. Most accurate when a person has symptoms and/or a high level of virus. You can collect the sample and perform the test at home. Results are available quickly; tests are read within 15 minutes. <u>Reference COVID-19 FAQs on how to obtain at-home tests</u>.

PCR: Tests genetic material from the virus. Can be positive in patients without symptoms or those with lower levels of virus. A healthcare worker collects the sample, and the test is performed in a laboratory. Results may take 24 hours or longer to return.

COUNTING DAYS

Day 0 is the day of symptom onset, or the date of positive test, whichever comes first. In the table below, purple indicates it is a day that occurs in the following week (Saturday – Friday).

Day 0	Day 5	Day 6	Day 8	Day 10	Day 11
Saturday	Thursday	Friday	Sunday	Tuesday	Wednesday
Sunday	Friday	Saturday	Monday	Wednesday	Thursday
Monday	Saturday	Sunday	Tuesday	Thursday	Friday
Tuesday	Sunday	Monday	Wednesday	Friday	Saturday
Wednesday	Monday	Tuesday	Thursday	Saturday	Sunday
Thursday	Tuesday	Wednesday	Friday	Sunday	Monday
Friday	Wednesday	Thursday	Saturday	Monday	Tuesday