

COVID-19 Airborne Transmissible Disease (ATD) Quick Reference Guide for Healthcare Workers- Revised 7/19/22

FOR INTERNAL USE BY EMPLOYEE HEALTH SERVICES ONLY

Vaccination Status	Testing Requirements	Work Status Pending Initial Test Result	RTW Criteria/Work Restrictions	Monitoring Period	Precautions During Monitoring Period
Symptomatic without Known Exposure					
All HCP regardless of vaccination status or previous infection	Test Immediately <i>* PCR or antigen test may be used. Antigen test preferred if COVID-19 recovered in past 90 days.</i>	Restrict from work while awaiting initial test results.	May return to work with negative test if afebrile and have improving symptoms for 24 hours. For ongoing illness refer to PCP.	Self-monitor for fever and other symptoms of COVID-19 for 10 days from the when symptoms began. If new symptoms develop, re-test and stay home.	Follow routine COVID-19 precautions including use of a well-fitting mask.
Asymptomatic Low-Risk Exposure					
All HCP regardless of vaccination status or previous infection	Test Not Required	If opt to test, do not restrict from work while awaiting test results.	No work restrictions if remain asymptomatic (with optional negative diagnostic test upon identification).	Self-monitor for fever and other symptoms of COVID-19 for 10 days. If symptoms develop, immediately test & stay home.	Follow routine COVID-19 precautions including use of a well-fitting mask.
Asymptomatic High-Risk Exposure					
All HCP regardless of vaccination status <i>(Asymptomatic HCP with previous infection in past 90 days do not require testing or work restrictions following a high-risk exposure).</i>	Test Immediately AND on day 5-7. If unable to isolate from the COVID+ contact, continue to test every 3 days for 10 days after the COVID+ contact has ended their isolation. <i>*PCR test preferred</i>	If asymptomatic AND able to isolate from positive contact, do not restrict from work while awaiting initial test results. If asymptomatic but unable to isolate from positive contact, restrict from work while awaiting initial test results.	No work restrictions if able to isolate from COVID + contact and remain asymptomatic with negative diagnostic test upon identification and at 5-7 days. If unable to isolate from COVID+ contact, may return to work following a negative test upon identification. May continue to work if remain asymptomatic with a negative test every 3 days for 10 days following completion of the COVID+ contact's isolation.	Self-monitor for fever and other symptoms of COVID-19 for 10 days after last close contact with COVID+ contact. If symptoms develop, immediately test & stay home.	Wear N95 at all times while at work until monitoring period complete. When possible, restrict from working around immunocompromised patients, pregnant individuals, or patients who are unable to mask.
Symptomatic High-Risk Exposure					
All HCP regardless of vaccination status or previous infection	Test Immediately and on day 5-7. If unable to isolate from the COVID+ contact, continue to test every 3 days for 10 days after the COVID+ contact has ended their isolation. <i>*PCR test preferred</i>	If symptomatic OR unable to isolate from positive contact, restrict from work while awaiting initial test results.	If able to isolate from COVID+ contact may return to work following a negative test upon identification if afebrile with improving symptoms for 24 hours. May remain at work if negative test again on day 5-7. If unable to isolate from COVID+ contact, may return to work following a negative test after end of COVID+ contact's isolation if afebrile with improving symptoms for 24 hours. May continue to work with a negative test every 3 days for 10 days.	Self-monitor for fever and other symptoms of COVID-19 for 10 days after last close contact with COVID+ contact. If symptoms develop, immediately test & stay home.	Wear N95 at all times while at work until monitoring period complete. When possible, restrict from working around immunocompromised patients, pregnant individuals, or patients who are unable to mask.

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Healthcare Workers Returning from Domestic Travel					
All HCP regardless of vaccination status or previous infection	Test not Required	N/A	No work restrictions if asymptomatic & no known exposures during travel.	Self-monitor for fever and other symptoms of COVID-19 for 10 days after return from travel. If symptoms develop, immediately test and stay home. Refer to “Symptomatic without Known Exposure” guidelines above.	Follow routine COVID-19 precautions including use of a well-fitting mask.
Healthcare Workers Returning from International Travel					
COVID-19 infection within previous 90 days (regardless of vaccination status)	Test not Required if asymptomatic	N/A	No work restrictions if asymptomatic & no known exposures during travel.	Self-monitor for fever and other symptoms of COVID-19 for 10 days after return from travel. If symptoms develop, immediately test and stay home. Refer to “Symptomatic without Known Exposure” guidelines above.	Follow routine COVID-19 precautions including use of a well-fitting mask.
Vaccinated & boosted, OR, vaccinated but not booster eligible.	Test 3-5 days after return from travel. <i>*PCR test preferred</i>	Do not restrict from work while awaiting test results.	No work restrictions if asymptomatic & no known exposures during travel.		
Unvaccinated, OR, vaccinated and booster-eligible but not yet boosted.	Test 3-5 days after return from travel. <i>*PCR test preferred</i>	Restrict from work for a full 5 days after travel.	May return to work with a negative diagnostic test on day 3-5 after return from travel is remain asymptomatic.		
Vaccination Status	Testing Requirements	RTW Criteria/Work Restrictions			Precautions During Monitoring Period
COVID-19 Positive Healthcare Workers					
All HCP regardless of vaccination status or previous infection	Regardless of vaccination status, history of previous COVID-19 infection or lack of symptoms, employees are considered COVID+ with: (1) A positive PCR test OR (2) A positive Antigen test when there is a high clinical suspicion of COVID-19 (e.g., symptoms + high-risk exposure)	If immune competent , isolation can end on day 6 with a negative antigen test on day 5 AND clinical RTW criteria met: (1) No fever for 24 hours without use of fever reducing medication & (2) Symptoms have improved. *Antigen testing must be observed by EHS.			If immune competent, recommend wearing N95 while at work for a total of 10 days. If moderately to severely immune compromised, recommend wearing N95 while at work for a total of 20 days. When possible, restrict from working around immunocompromised patients, pregnant individuals, or patients who are unable to mask during 10 or 20 day monitoring period.
		If day 5 Antigen test is positive, may test again on day 7 . May return to work on day 8 with a negative antigen test on day 7 AND clinical RTW criteria met.			
		If day 5 & 7 antigen tests are positive OR no antigen testing available OR symptoms remain, restrict from work for 10 days . If symptoms remain at 10 days, obtain clearance from PCP.			
		If moderately to severely immune compromised , isolation can end on day 11 with a negative antigen test on day 10 & day 11 AND clinical RTW criteria met: (1) No fever for 24 hours without use of fever reducing medication & (2) Symptoms have improved. *Antigen testing must be observed by EHS.			
		If antigen test remains positive OR no antigen testing available OR symptoms remain, restrict from work for 20 days . If symptoms remain at 20 days, obtain clearance from PCP.			
		Paxlovid Rebound Effect: If a COVID+ person takes the medication and gets better (say on day 5 or 6) then test negative for RTW on day 6 but becomes symptomatic again on day 8 -10, then they need to isolate again for 10 days.			

COVID-19 Emergency Temporary Standards (ETS) Quick Reference Guide for Non-Healthcare Workers-7/19/22
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Initial Testing	Quarantine/Isolation	Testing Criteria for Return to Work	Monitoring Period & Mitigation Strategies
Low Risk Exposure to Close Contact			
<p>Offer testing unless COVID recovered in past 90 days.</p>	<p>Do NOT exclude from work.</p>	<p>No work restrictions if remain asymptomatic and have negative test 3-5 days after exposure or choosing not to test.</p>	<p>Self-monitor for fever and other symptoms of COVID. If new symptoms develop, re-test and stay home.</p>
Symptoms of COVID-19			
<p>Immediately test regardless of vaccination status or previous infection</p> <p><i>* PCR or antigen test may be used. Antigen test preferred if COVID-19 recovered in past 90 days.</i></p>	<p>Exclude from work while awaiting initial test results.</p>	<p>Return to work if have a negative <i>PCR test</i> result & are afebrile with improving symptoms for 24 hours or refer to PCP for ongoing illness. Consider continuing self-isolation and retesting in 1-2 days if testing negative with an antigen test, particularly if tested during first 1-2 days of symptoms.</p>	<p>Self-monitor for fever and other symptoms of COVID. If new symptoms develop, re-test and stay home.</p> <p>Wear a well-fitting mask or respirator while around others until symptoms have resolved.</p>
High Risk Exposure to Close Contact			
<p>Consider testing as soon as possible regardless of vaccination status</p> <p><i>* Persons infected within the prior 90 days do not need to be tested or excluded from work unless symptoms develop.</i></p> <p><i>* Either PCR or antigen test may be used.</i></p>	<p>Do NOT exclude from work if asymptomatic & able to isolate from COVID+ contact.</p> <p>If unable to isolate from the COVID+ contact, recommend remote work for duration of COVID+ contact's isolation period if operationally feasible. If remote work is not operationally feasible, do NOT exclude from work if asymptomatic.</p>	<p>Re-test within 3-5 days after last exposure. If initial negative test was before day 3, retest at least a day later during the 3–5-day window following exposure.</p> <p>If unable to test or choosing not to test, and symptoms are not present, work exclusion can end after day 10.</p> <p>If remote work is operationally feasible, may return to in person work with a negative test when COVID+ contact ends isolation. Re-test 3-5 days after COVID+ contact has ended isolation.</p> <p>If remote work is NOT operationally feasible, may continue to work with <u>strict adherence</u> to mitigation strategies and a negative test result every 3-5 days while COVID+ contact is in isolation & 3-5 days after contact ends isolation.</p> <p>If unable to test or choosing not to test, and symptoms are not present, may return work 10 days after the COVID+ contact ends isolation.</p>	<p>Self-monitor for fever and other symptoms of COVID. If symptoms develop, re-test and stay home.</p> <p>Wear a well-fitting mask or respirator for 10 days from last known exposure.</p> <p>Self-monitor for fever and other symptoms of COVID. If new symptoms develop, re-test and stay home.</p> <p>Wear a well-fitting mask or respirator, observe social distancing, and refrain from eating meals in communal spaces for 10 days after the COVID+ contact ends isolation.</p>
High Risk Exposure to Close Contact in Specified High-Risk Settings (includes BH & PH locations with direct patient care)			
<p>Immediately Test if Unvaccinated; OR Incompletely Vaccinated; OR Vaccinated and Booster Eligible but have not yet received Booster, AND Not COVID-19 recovered in past 90 days AND work in a High Risk Setting.</p> <p><i>* Persons infected within the prior 90 days do not need to be tested or excluded from work unless symptoms develop.</i></p> <p><i>* Either PCR or antigen test may be used.</i></p>	<p>Exclude from work for at least 5 days after last known close contact, regardless of presence/absence of symptoms or ability to isolate from COVID+ contact.</p>	<p>If able to isolate from COVID+ contact, may return to work after day 5 if symptoms are not present and a diagnostic specimen collected on day 5 or later tests negative.</p> <p>If unable to test or choosing not to test, and symptoms are not present may return to work after day 10.</p> <p>If unable to isolate from the COVID+ contact, recommend continuing self-quarantine if remote work is operationally feasible. May return to in person work with a negative test after contact ends isolation. Re-test 3-5 days after contact has ended isolation.</p> <p>If remote work is NOT operationally feasible, may return to work after day 5 with <u>strict adherence to mitigation strategies</u> if symptoms are not present and a diagnostic specimen collected on day 5 or later tests negative. Re-test every 3-5 days while COVID+ contact is in isolation & 3-5 days after contact ends isolation.</p>	<p>Self-monitor for fever and other symptoms of COVID. If symptoms develop, re-test and stay home.</p> <p>Wear a well-fitting mask or respirator for 10 days from last known exposure.</p> <p>Self-monitor for fever and other symptoms of COVID. If new symptoms develop, re-test and stay home.</p> <p>Wear a well-fitting mask or respirator, observe social distancing, and refrain from eating meals in communal spaces for 10 days after the COVID+ contact ends isolation.</p>

COVID-19 Emergency Temporary Standards (ETS) Quick Reference Guide for Non-Healthcare Workers-7/19/22
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Initial Testing	Quarantine/Isolation	Testing Criteria for Return to Work	Monitoring Period & Mitigation Strategies
COVID-19 Outbreaks			
<p>If ≥ 3 cases in 14 days OR ≥ 20 cases in 30 days immediately test all staff in exposure group</p> <p><i>* Persons infected within the prior 90 days do not need to be tested or excluded from work unless symptoms develop.</i></p>	<p>Exclude from the workplace employees who had close contacts, until they test negative or the return-to-work requirements for COVID-19 are met.</p>	<p>Test again in 1 week</p> <p>No work restrictions if remain asymptomatic with negative test results.</p> <p>If unable to test or choosing not to test, and symptoms are not present may return to work after day 10.</p>	<p>If ≥ 3 cases in 14 days, test weekly until the workplace no longer qualifies as an outbreak.</p> <p>If ≥ 20 cases in 30 days, test twice weekly until there are no new cases detected for a 14-day period.</p> <p>If symptoms develop, test immediately and stay home. Exposed persons should mask for 10 days following an identified close contact to someone with COVID-19.</p>
Persons who Test Positive for COVID-19			
<p>Regardless of vaccination status, history of previous COVID-19 infection or lack of symptoms, employees are considered COVID+ with:</p> <ul style="list-style-type: none"> A positive PCR Test A positive Antigen test when there is a high clinical suspicion of COVID-19 (e.g., symptoms + high-risk exposure) 	<p>If Immune Competent: Restrict from work for at least 5 days after start of symptoms (or after positive test if no symptoms).</p>	<p>Isolation can end on day 5 if symptoms are not present or are resolving AND a specimen collected on day or later tests negative (antigen test preferred).</p> <p>If unable to test, choosing not to test, or continue to test positive on day 5, 7, & 9 isolation can end after day 10 if fever-free for 24 hours without medication.</p> <p>If fever is present, isolation should be continued until fever resolves. If symptoms other than fever are not resolving, continue to isolate until symptoms are resolving or until after day 10 or refer to PCP.</p>	<p>Self-monitor for fever and other symptoms of COVID. If new symptoms develop after ending isolation, re-test and stay home.</p> <p>Wear a well-fitting mask or respirator, observe social distancing, and refrain from eating meals in communal spaces for a full 10 days from symptom onset (or 10 days from positive test if asymptomatic).</p>
	<p>If Moderate to Severe Immune Compromise: Restrict from work for at least 11 days after start of symptoms (or after positive test if no symptoms).</p>	<p>Isolation can end on day 11 if symptoms are not present or are resolving and two diagnostic specimens collected on day 10 AND day 11 test negative (antigen test preferred). If unable to test, choosing not to test, or testing positive on Day 10 or 11 (or later) isolation can end after Day 20 if fever-free for 24 hours without medication.</p> <p>If fever is present, isolation should be continued until fever resolves. If symptoms, other than fever, are not resolving continue to isolate until symptoms are resolving or until after day 20 or refer to PCP.</p>	
	<p>If COVID-19 Rebound After Paxlovid Treatment: Restart isolation and restrict from work for at least 5 days (or 11 days if moderate to severe immune compromise) after start of symptom recurrence or new positive test.</p>	<p>Re-isolation can end on day 5 (or day 11 if moderate to severe immune compromise) if symptoms are not present or are resolving AND a specimen collected on Day 5 or later (or on day 10 & 11 if moderate to severe immune compromise) tests negative (antigen test preferred).</p>	

Key Terms

Boosted: Considered boosted as soon as booster dose received (do not need to wait two weeks after receiving their booster dose).

Calculating Date from Exposure: Last date of exposure is considered day 0. Day 1 is the first full day after the last contact with a person who has had COVID-19.

Calculating Isolation: Day 0 is the first day of symptoms or a positive viral test if asymptomatic. Day 1 is the first full day after symptoms developed or the positive test specimen was collected.

Close Contact: Someone sharing the same indoor airspace, e.g., home, clinic waiting room, airplane etc., for a cumulative total of 15 minutes or more over a 24-hour period (for example, three individual 5-minute exposures for a total of 15 minutes) during an infected person's (laboratory-confirmed or a clinical diagnosis) Infectious period.

Diagnostic Testing: An antigen test, nucleic acid amplification test (NAAT) or LAMP test are acceptable; however, antigen testing is recommended for infected persons to end isolation, and for symptomatic exposed persons who were infected with SARS-CoV-2 within the prior 90 days. Use of Over-the-Counter antigen tests is also acceptable to end isolation or quarantine. To comply with the testing requirements of the ETS, an over-the-counter (OTC) COVID-19 test may be both self-administered and self-read if verification of the results, such as a time and date stamped photograph of the result or an OTC test that uses digital reporting with time and date stamped results, is provided.

Exposed Group: All employees at a work location, working area, or a common area at work, where an employee COVID-19 case was present at any time during the high-risk exposure period.

Fully Vaccinated: Considered fully vaccinated two weeks after second dose in a two-shot series, such as the Pfizer-BioNTech or Moderna vaccines, or two weeks after a single-dose vaccine, such as the J&J/Janssen vaccine.

High-Risk Contact: Someone who may experience severe illness if they become infected with COVID-19 or for whom the transmission potential is high (high intensity/duration of indoor exposure). Examples of high-risk contacts include immunocompromised persons and household contacts of cases.

High-Risk Exposures: Certain exposures may be deemed higher risk for transmission, such as with an intimate partner, in a household with longer periods of exposure, or while performing unmasked activities with increased exertion and/or voice projection or during prolonged close face-face contact. In such cases, exposed persons should be extra vigilant in undertaking recommended mitigation measures.

High-Risk Settings: A high-risk setting is one in which transmission risk is high (e.g., setting with a large number of persons who may not receive the full protection from vaccination due to co-existing medical conditions), and populations at risk of more serious COVID-19 disease consequences including hospitalization, severe illness, and death. High-Risk Settings include:

- Homeless shelters, emergency shelters and cooling and heating centers
- Healthcare settings (Applies to HCP, patients and residents in all healthcare settings other than those covered by AFL 21.08.8 [General Acute Care Hospitals, Acute Psychiatric Hospitals, and Skilled Nursing Facilities])
- Local correctional facilities and detention centers
- Long Term Care Settings & Adult and Senior Care Facilities

Infectious Period: For symptomatic infected persons, 2 days before the infected person had any symptoms through Day 10 after symptoms first appeared (or through Days 5-10 if testing negative on Day 5 or later), and 24 hours have passed with no fever, without the use of fever-reducing medications, and symptoms have improved, OR, For asymptomatic infected persons, 2 days before the positive specimen collection date through Day 10 after positive specimen collection date (or through Days 5-10 if testing negative on Day 5 or later) after specimen collection date for their first positive COVID-19 test.

Isolation: Used to separate people with confirmed or suspected COVID-19 from those without COVID-19. People who are in isolation should:

- Stay home until it's safe for them to be around others.
- Stay in a separate room from other household members, if possible.
- Use a separate bathroom, if possible.
- Take steps to improve ventilation at home, if possible.
- Avoid contact with other members of the household and pets.
- Avoid sharing personal household items, like cups, towels, and utensils.
- Wear a well-fitting mask when they need to be around other people.

Moderate to Severe Immune Compromising Conditions and Treatments: Does NOT include pregnancy or chronic medical conditions such as diabetes, heart disease, liver disease/failure, well controlled HIV, history of cancer where treatment has been completed, or hormone therapy for cancer treatment/prevention. Conditions and treatments may include but are not limited to:

- Active treatment for solid tumor and hematologic malignancies.
- Receipt of solid-organ or stem cell transplant.
- Moderate or severe primary immunodeficiency (e.g., DiGeorge syndrome, Wiskott-Aldrich syndrome).
- Advanced or untreated HIV infection.
- Active treatment with high-dose corticosteroids (i.e., ≥ 20 mg prednisone or equivalent per day when administered for ≥ 2 weeks), alkylating agents, antimetabolites, transplant-related immunosuppressive drugs, cancer chemotherapeutic agents classified, tumor necrosis factor (TNF) blockers, and other biologic agents that are immunosuppressive or immunomodulatory.

Paxlovid Rebound: COVID-19 rebound is characterized by a recurrence of symptoms or a new positive viral test after having tested negative. People with recurrence of COVID-19 symptoms or a new positive viral test after having tested negative should restart isolation and isolate again for at least 5 days. Per CDC guidance, they can end their re-isolation period after 5 full days if fever has resolved for 24 hours (without the use of fever-reducing medication) and symptoms are improving. The individual should wear a mask for a total of 10 days after rebound symptoms started.

Diagnostic Testing

Fulgent Picture Genetics PCR Test Kits

- **Ambulatory Care Clinics-** employee can request kits from nursing supervisor or clinic manager
- **VCMC/SPH-** employee can request kits from nursing supervisor or department manager
- **Behavioral Health/ETS Locations-** employee can request kits from their department manager or **EHS**. Email Jennifer Del Cid & instruct employee to call (805) 954-3813 when arrive in parking lot "R" to pick up kit.

QuickVue Antigen Test Kits

- **Ambulatory Care Clinics-** employee can request kits from nursing supervisor or clinic manager
- **VCMC-** employee can obtain kits from **AFMC-UC-** Email Alberta Aguilar, Carolyn Feuerborn, Ruby Moreno, and Vanessa Martinez. Instruct employee to pick up kit at outside tent between in front of 5-Story building between 9 & 3:30.
- **Behavioral Health & ETS Locations-** employee can request kits from their department manager or from **EHS-** Email Jennifer Del Cid & instruct employee to call (805) 954-3813 when arrive in parking lot "R" to pick up kit.
- **Additional Locations:**
 - If they live near **Oxnard**, they can pick up kits at **Las Islas Urgent Care** (South Building)- Email Yolanda Moran, Lorie Helle, Cristy Camacho, and Bertha Guerrero to request kit/s.
 - If they live near **Thousand Oaks**, they can pick up kits at **Conejo Valley Family Medical Group-** Email Ivonne Hernandez, Debbie Avalos, Nicole Gonzales, and Liliana Moore to request kit/s.
 - If they live near **Simi Valley**, they can pick up kits from **Sierra Vista Family Medical Clinic-** Email Elisabet Osegueda and Hugo Ortiz to request kit/s.

Cepheid Rapid PCR Test

- Licensed Ambulatory Care Clinics (AFMC, AFMC-UC, Anacapa Surgical, Adult Hematology-Oncology, 5th Floor Specialties/Cardiology/Dermatology/Immunology, Pediatric Diagnostic Center, Pediatric Hematology-Oncology, Eastman Rehabilitation)- Rapid testing can be obtained at **AFMC-UC**. Email Alberta Aguilar, Carolyn Feuerborn, Ruby Moreno, and Vanessa Martinez to arrange for testing.
- **VCMC-** Rapid testing can be obtained in the **VCMC Emergency Room** or at **AFMC-Urgent Care**.
 - To schedule testing in the ER, email Dr. Leah Kory or Ferdinand Cuico.
 - To schedule testing at AFMC-UC, email Alberta Aguilar, Carolyn Feuerborn, Ruby Moreno, and Vanessa Martinez.
- **SPH-** Rapid testing can be obtained in the **Santa Paula Hospital ER**.
- **Additional Locations:**
 - If they live near **Ventura**, can test at **West Ventura Medical Clinic** (pending validation)- message clinic in Teams to schedule.
 - If they live near **Oxnard**, can test at **Las Islas Urgent Care (South Building)**-email Yolanda Moran, Lorie Helle, Cristy Camacho, and Bertha Guerrero to schedule. Can also test at **Magnolia Urgent Care-** message clinic in Teams to schedule.
 - If they live near **Thousand Oaks**, can test at **Conejo Valley Family Medical Group-** email Ivonne Hernandez, Debbie Avalos, Nicole Gonzales, and Liliana Moore.
 - If they live near **Simi Valley**, they can test at **Sierra Vista Family Medical Clinic-** email Elisabet Osegueda to request kit/s.
 - If they live near **Santa Paula** (pending validation), they can test at **Santa Paula Medical Clinic-** message clinic in Teams to schedule.