COVID-19: Guidance for Healthcare Provider (HCP) Quarantine Consensus Statement from the Intercorporate COVID-19 Collaboration Group

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COVID-19 has been reported in multiple areas of the U.S and come in contact with our clinical staff due to community spread and exposure during clinical care. As a result, many asymptomatic clinicians have been quarantined at increasing rates. With broad community spread of the virus and non-clinical exposure risks rising, initial quarantine policies are becoming less practical. For example, many hospitals in Washington and New York State have abandoned the practice of asymptomatic clinician guarantine.

Since healthcare worker and clinician staffing has become strained, the CDC has outlined its updated recommendations for hospital leaders and clinicians on how to manage quarantine of clinicians after exposure to COVID-19:

- Facilities should allow asymptomatic clinicians who have had an exposure to a COVID-19 1. patient to continue to work with the following conditions:
 - These clinicians should still report their temperature and the absence of symptoms each day before starting work.
 - Exposed clinicians should wear a facemask while at work for the 14 days after the exposure event if there is a sufficient supply of facemasks.
 - If clinicians develop even mild symptoms consistent with COVID-19, they must cease patient care activities, don a facemask (if not already wearing) and notify their supervisor or occupational health services before leaving work.
- 2. Facilities should shift emphasis to more routine practices, which include asking clinicians to report recognized exposures, regularly monitor themselves for fever and symptoms of respiratory infection and not report to work when ill.
- 3. Facilities should develop a plan for how they will screen for symptoms and evaluate ill clinicians. This could include having clinicians report the absence of fever and symptoms before starting work each day.

Healthcare workers also may become ill during the normal course due to COVID19 illnesses or non-COVID19 respiratory illness. Accordingly, the CDC recommends that HCP may return to work in healthcare settings when:

- o At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath); and,
- At least 7 days have passed since symptoms first appeared or 2 negative COVID-19 Tests 24 hours apart.

After returning to work, HCP should:

- Wear a facemask at all times while in the healthcare facility until all symptoms are completely resolved or until 14 days after illness onset, whichever is longer.
- Be restricted from contact with severely immunocompromised patients (e.g., transplant, hematology-oncology) until 14 days after illness onset.

Physicians and advanced practice providers are on the front lines every day as they address the COVID-19 crisis, putting their health and safety on the line. The health and safety of patients and those on the front lines are our priority as we continue to care for communities and help contain the spread of the novel coronavirus.

We will continue to assess the evolving situation and provide advise as necessary. For further details about quarantine, go to the CDC at https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html.













