



NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE
Oxiris Barbot, MD
Commissioner

NYC DOHMH 2020 Alert # 7

Guidance for Healthcare Worker Self-Monitoring and Work Restriction In the Presence of Sustained Community Transmission of Coronavirus Disease 2019 (COVID-19)

March 17, 2020

The NYC Health Department (DOHMH) is reporting sustained widespread community transmission of COVID-19. This guidance should be used by hospitals, healthcare facilities, and other organizations that employ healthcare workers, including all providers and support staff involved in patient care, when developing occupational health programs and policies. This interim guidance should be considered alongside applicable state and federal regulations and provided to all healthcare workers as appropriate. **Healthcare workers currently furloughed because of previous guidance may return to work if asymptomatic. Refer to instructions below for additional details.**

If you are sick, please stay home

If you have a new onset of fever (subjective or temperature of $\geq 100.0^{\circ}\text{F}^*$ or 38.0°C) OR symptoms of possible COVID-19 syndrome (cough OR shortness of breath OR sore throat), you **MUST STAY HOME** and immediately notify your supervisor.

For mild illness consistent with COVID-19, healthcare workers must stay home 7 days following onset of illness or 72 hours after being consistently afebrile without use of antipyretics and with resolving respiratory symptoms, whichever is longer. **NYC DOHMH does not require healthcare workers to undergo quarantine or to have a negative test for COVID-19 to return to work.** However, at the completion of isolation, healthcare workers should check with their employer before returning to work.

If your symptoms are severe (e.g., difficulty breathing) enough that you feel that you need to see a healthcare provider but it is not an emergency, contact the healthcare provider before you seek care and alert them that you are a health care worker who may have been exposed to a person with COVID-19. You should put on a mask and ideally walk or take a private vehicle to travel to your healthcare provider. When arriving at the healthcare facility, let the staff know that you are ill and had a possible exposure to COVID-19. If an emergency and you call 911, alert the operator that you may have been exposed to a person with COVID-19 and describe your symptoms.

All healthcare workers:

In the context of sustained community transmission of COVID-19, ALL healthcare workers should self-monitor for illness consistent with COVID-19 because all healthcare workers are at risk for unrecognized exposures. The purpose of self-monitoring is to identify illness early and self-isolate at home to reduce the potential of transmission to those you care for. As a healthcare worker you should self-monitor by taking your temperature twice daily and evaluating yourself for COVID-19 like illness which include any of the following:

- measured temperature $\geq 100.0^{\circ}\text{F}^*$ (38.0°C) or subjective fever
- cough

- shortness of breath
- sore throat

*Fever cutoffs are different in guidance for the healthcare workers. This is done to recognize illness early.

Timing of these checks should be at least 8 hours apart with one check immediately before each healthcare shift. **If any of these signs/symptoms develop, then DO NOT come to work.** If symptoms develop at work, you should immediately leave the patient care area, self-isolate, and notify your supervisor.

Healthcare worker with HIGH-Risk exposure to a confirmed or probable COVID-19 patient:

If you are a healthcare worker who has had a known high-risk exposure to a patient(s) with confirmed COVID-19, you should take extra care to monitor your health but can keep working. There is no requirement for 14 day quarantine of healthcare workers with high-risk exposures in the setting of sustained community transmission as we have in New York City. High-risk exposures include: 1) an unmasked provider having prolonged close contact (<6 feet for more than a few minutes) with an unmasked confirmed COVID-19 patient; 2) a provider not wearing eye protection while present for an aerosol generating procedure (e.g. cardiopulmonary resuscitation, intubation, extubation, bronchoscopy, nebulizer therapy, sputum induction); 3) an unmasked provider present for an aerosol generating procedure. DOHMH asks that you self-monitor at least twice daily for symptoms listed above (subjective fever or measured temp $\geq 100.0^{\circ}\text{F}$, or cough, or shortness of breath or sore throat) AND additional new onset lower acuity symptoms that may be associated with early signs of infection with COVID-19 including muscle aches, or malaise (feeling tired or run down), or runny nose, or stuffiness, or congestion.

Timing of these checks should be at least 8 hours apart with one check immediately before each healthcare shift. If any of these signs/symptoms develop then you MAY NOT come to work. If symptoms develop at work, you MUST immediately leave the patient care area, isolate yourself and notify your supervisor.

Additional precautions for asymptomatic healthcare workers exposed to a possible or confirmed COVID-19 patient: In the context of sustained community transmission of COVID-19, all healthcare workers are at some risk for exposure at work and within the community. CDC has advised that healthcare facilities consider allowing asymptomatic healthcare workers exposed to a confirmed COVID patient to work while wearing a surgical mask (<https://www.cdc.gov/coronavirus/2019-ncov/downloads/community-mitigation-strategy.pdf>). DOHMH again stresses that ALL providers should be self-monitoring and if sick, stay home. Given the limited availability of personal protective equipment, use of surgical masks by asymptomatic exposed providers at work should be limited to those who have had known high-risk exposures or are involved in care of vulnerable patients (e.g., age ≥ 50 , chronic lung disease (e.g., asthma, COPD), heart disease, diabetes immunocompromised).

Note: your employer may require you to report your temperature and symptoms daily (i.e, active monitoring) and may have additional guidance for specific employees caring for high-risk populations such as the elderly or immune compromised.

Support for healthcare workers experiencing anxiety

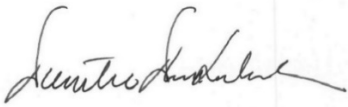
During the monitoring period, it is normal for you and family members to feel distressed, anxious or afraid. Try to keep a hopeful outlook and strengthen your resilience by drawing on your skills that helped you manage difficult situations in the past. Keep in touch with other relatives and friends by phone, email or social media. If you feel overwhelmed and need support to cope with the situation, contact **NYC Well at 888-NYC-WELL (888-692- 9355) or text “WELL” to 65173**. NYC Well is a confidential help line that is staffed 24/7 by trained counselors who can provide brief supportive therapy, crisis counseling, and connections to behavioral health

treatment in more than 200 languages. If you are thinking about harming yourself or someone else, call 911 immediately. Be sure to tell the operator and ambulance crew that you have had contact with someone with COVID-19.

Follow these guidelines for the duration of ongoing community transmission of COVID-19. Alternative monitoring approaches may be employed after community transmission has resolved.

More information is available at the websites of the NYC Health Department (www.nyc.gov/health/coronavirus) and the CDC (www.cdc.gov/coronavirus).

Sincerely,

A handwritten signature in black ink, appearing to read "Demetre Daskalakis", is written over a faint, light-colored rectangular stamp or watermark.

Demetre Daskalakis, MD, MPH
Deputy Commissioner