


MEMORANDUM

TO: CEOs, HR Directors, OHS Directors, CMOs, CNOs, Ambulatory Care Chiefs  
FROM: Machelle Allen, MD   
Donnie Bell, MD  
CC: Mitch Katz, MD  
DATE: March 30, 2020  
RE: Occupational Health Services (OHS) and Employee COVID-19 Testing

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Please note below guidance on standard work for the NYC Health + Hospitals OHS, including the testing of employees for COVID-19 infection by nasopharyngeal swab.

- Notification of Illness To Facility OHS
  - Symptomatic employees to call local facility OHS
  - Documentation completed in Epic OHS module
  - Avoid symptomatic employees from potentially infecting others by not physically going to OHS
- Certification of Vulnerable Populations
  - Vulnerable employee populations
    - ❖ Pregnancy
    - ❖ Current Immunocompromised state
      - Hematopoietic stem cell transplant
      - Current systemic chemotherapy
      - Solid organ transplant
      - Chronic and ongoing use of immunosuppressive agents including biologics or prednisone 20mg daily for > 2 weeks
      - HIV infection with CD4 < 200
    - ❖ Adults > 70 years old
    - ❖ Serious underlying medical conditions
      - Significant cardiovascular disease (ASCVD risk > 10% or class III or IV CHF)

- Diabetes with A1c > 10
  - Lung disease (requiring home oxygen, cystic fibrosis, COPD stage 3-4, asthma requiring daily high dose inhaled steroids)
  - Kidney disease (stage 4-5 or on dialysis)
  - Severe liver disease (Child-Pugh score  $\geq$  10)
- Guidance
  - If fever, cough, sore throat or shortness of breath
    - Home isolation for 7 days with last 72 hours being afebrile off anti-pyretics
    - No COVID-19 testing recommended unless employee preference
    - If testing preferred, schedule test to be performed in the COVID-19 Assessment and Testing Center (aka ‘the tents’)
  - If no symptoms but high risk exposure\* to a confirmed or probable COVID-19 patient
    - Able to work
    - Wear surgical mask for 14 days after exposure
    - Monitor temperatures twice daily
    - Monitor for development of symptoms (cough, sore throat, shortness of breath, myalgias, fatigue and runny nose or congestion)
    - If testing preferred, schedule test to be performed in the COVID-19 Assessment and Testing Center (aka ‘the tents’)
- Employee COVID-19 Testing
  - Starting April 1<sup>st</sup>, Ambulatory Care will be partnering with Occupational Health Services (OHS) to perform COVID-19 testing (nasopharyngeal swab) for employees
    - Prioritize symptomatic employees during week 1, then:
    - Asymptomatic employees working in units caring for COVID-19 patients during weeks 2-3, then:
    - Asymptomatic employees with family members at home COVID-19 positive or symptomatic during weeks 3-4, then:
    - Asymptomatic employees who want to get tested
  - Employees will call centralized OHS COVID-19 hotline to schedule an appointment for the testing
    - Hotline will obtain:
      - Employee name
      - Employee DOB
      - Employee TKID
      - Verify employee contact information (phone/email)
    - Employee will be encouraged to create an Epic MyChart account, if not done already
    - Appointment will be entered into the Special Pathogens template
  - Testing will be performed in the COVID-19 Assessment and Testing Centers (aka ‘the tents’) by appointment
    - Hours of operation
      - M, W, F 7am-3pm
      - Tu, Thur 9am-5pm
    - Brief documentation in Epic
    - Samples sent to BioReference Laboratories with completed
  - Results delivered by MyChart and/or OHS outbound calls within 1 business day

- Return to Work
  - Must call local facility OHS
  - Documentation completed in Epic OHS module
  - Must wear a surgical facemask for 14 days following initial onset of illness

\* High Risk Exposure

- 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, extubations, bronchoscopy, nebulizer therapy, sputum induction);
- 3) An unmasked provider present for an aerosol generating procedure.