

Standard Operating Procedure for Staff Exposure to the COVID-19 Virus

1.0 Purpose

1.1 The purpose of this document is to provide the SOP (Standard Operating Procedure) for any staff member's exposure to the COVID-19 Virus.

2.0 Scope

2.1 The scope of this document outlines the process and expectations for responding to, and adhering with, the CDC guidelines and USOSM requirements.

3.0 References

3.1 CDC – Center for Disease Control

4.0 Overview of Scenarios and Process

4.1 Staff member has come in contact with an individual who tested positive

If leadership is notified that a surgeon and/or staff member has come in contact with an individual (patient, visitor, family, friend) who tested positive for the COVID-19 Virus, the staff member who came in contact with the individual should continue to be monitored for temperature exceeding 100.4 degrees and for flu-like symptoms. The staff member should be given a recommendation to seek the advice of their own physician to determine if COVID-19 testing is indicated.

- If the employee develops fever or symptoms, please refer to 4.2 below.
- Continue to utilize proper and consistent use of the required PPE (personal protective equipment) to avoid infection; assuming all patients are positive.
- Thorough cleaning measures should continue to occur, i.e., wiping down all surfaces, countertops, door handles, etc.

4.2 Staff member tests positive

If a surgeon and/or or staff member tests positive for the COVID-19 Virus, your leader will notify you only if you had potential exposure, in compliance with HIPAA regulations. The surgeon and/or staff member who tested positive should stay home and be advised strongly to see his/her own physician for guidance about recovery and return to work.

- The CDC recommends that a symptomatic staff member be excluded from work until 10 days since symptoms first appeared AND at least 72 hours have passed since last fever without the use of fever reducing drugs.
- If they are asymptomatic, the staff member is excluded from work for 10 days since the date of the first positive test.
- All other staff members, who were in contact with the respective staff member testing positive should continue to be monitored as in scenario 4.1 above.



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• Thorough cleaning measures should continue to occur, i.e. wiping down all surfaces, countertops, door handles, etc.

4.3 Staff member is ill

If a surgeon and/or or staff member becomes ill, however, is unsure if their illness is the COVID-19 Virus, the surgeon and/or staff member are advised strongly to see their own physician for guidance about recovery and return to work.

5.0 Absenteeism

5.1 USOSM and Partner Practices are exempt from the Families First Coronavirus Response Act and, therefore, are not obligated automatically to pay for time off due to COVID reasons. Staff members are encouraged to, and can, use sick or vacation time if they are deemed ill. If their doctor does not indicate they need to be off work, the staff member is expected to return to work the same day and/or at the beginning of their standard working schedule the following morning. If a staff member does not come back because they are concerned, we will consider their absenteeism as job abandonment and voluntary separation.