Massachusetts COVID-19 COMMAND CENTER
Non-Healthcare Workers: Occupational Exposure & Return to Work Guidance, Revised May 7, 2020

**Quarantine** is for individuals who may have been exposed to someone who is COVID-19 positive but are not exhibiting any symptoms and have not tested positive. Individuals who are in quarantine should stay in place for 14 days.

**Isolation** is for individuals who have either tested positive for COVID-19 or who are exhibiting symptoms of COVID-19 (including fever, chills, shaking chills, muscle pain, headache, sore throat, or new loss of taste or smell) and have been told by a provider that they have, or probably have, COVID-19, even in the absence of a test.

<table>
<thead>
<tr>
<th>Worker Type</th>
<th>Quarantine for 14 days when...</th>
<th>Isolate when...</th>
<th>End Isolation and Return to work when...</th>
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</table>
| **Health Care Workers** | As of May 4, 2020, the CDC is not recommending that these workers self-quarantine after an exposure if they are not experiencing COVID-19 symptoms. All workers should wear appropriate PPE, and self-monitor for symptoms. | You have tested positive for COVID-19 OR you have symptoms of COVID-19 | **Symptomatic**
1. **Symptom-based strategy**
   - 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 10 days have passed since symptoms first appeared.
2. **Test-based strategy:**
   - Resolution of fever without the use of fever-reducing medications and
   - Improvement in respiratory symptoms (e.g., cough, shortness of breath), and
   - Negative results of two consecutive respiratory specimens collected ≥24 hours apart
| **First Responders** |                                |                 | **Asymptomatic**
1. **Time-based strategy:** At least 10 days have passed since the date of their first positive COVID-19 diagnostic test assuming they have not subsequently developed symptoms since their positive test.
2. **Test-based strategy:** Negative results of two consecutive respiratory specimens collected ≥24 hours apart

* A positive test does not necessarily correlate with the person’s ability to transmit the disease

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All Workers: Interim Guidance for Businesses and Employers to Plan and Respond to Coronavirus Disease 2019 (COVID-19)

- Employees who have symptoms (as listed above) should notify their supervisor and stay home.
- Sick employees should follow CDC-recommended steps. Employees should not return to work until the criteria to discontinue home isolation are met, in consultation with healthcare providers and state and local health departments.
- Employees who are well but who have a sick family member at home with COVID-19 should notify their supervisor and follow CDC recommended precautions.
- Employees who appear to have symptoms (as listed above) upon arrival at work or who become sick during the day should immediately be separated from other employees, customers, and visitors and sent home.
- If an employee is confirmed to have COVID-19 infection, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA). The employer should instruct fellow employees about how to proceed based on the CDC Public Health Recommendations for Community-Related Exposure.

Ending Isolation/Return to Work Guidance

For Persons with COVID-19 Under Isolation

1. **Symptom-based strategy**

Persons with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- 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 10 days have passed since symptoms first appeared.

2. **Test-based strategy**: A test-based strategy is contingent on the availability of ample testing supplies and laboratory capacity as well as convenient access to testing.

Persons who have COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- Resolution of fever without the use of fever-reducing medications and
- Improvement in respiratory symptoms (e.g., cough, shortness of breath), and
- Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected ≥24 hours apart (total of two negative specimens)*. See Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons for Coronavirus Disease 2019 (COVID-19). Of note, there have been reports of prolonged detection of RNA without direct correlation to viral culture.
For Persons Who have NOT had COVID-19 Symptoms but Tested Positive and are Under Isolation

1. Time-based strategy

Persons with laboratory-confirmed COVID-19 who have not had any symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- At least 10 days have passed since the date of their first positive COVID-19 diagnostic test assuming they have not subsequently developed symptoms since their positive test.
- If they develop symptoms, then the symptom-based or test-based strategy should be used.
- Note, because symptoms cannot be used to gauge where these individuals are in the course of their illness, it is possible that the duration of viral shedding could be longer or shorter than 10 days after their first positive test.

2. Test-based strategy

Persons with laboratory-confirmed COVID-19 who have not had any symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected ≥24 hours apart (total of two negative specimens)*.
- Note, because of the absence of symptoms, it is not possible to gauge where these individuals are in the course of their illness. There have been reports of prolonged detection of RNA without direct correlation to viral culture.

Employers should not require a COVID-19 test result or a healthcare provider’s note for employees who are sick to validate their illness, qualify for sick leave, or to return to work.
First Responders: Interim Guidance for Emergency Medical Services (EMS) Systems and 911 Public Safety Answering Points (PSAPs) for COVID-19 in the United States

EMS personnel should be aware of the follow-up and/or reporting measures they should take after caring for a PUI or patient with confirmed COVID-19. EMS personnel who have been exposed to a patient with suspected or confirmed COVID-19 should notify their chain of command to ensure appropriate follow-up.

- Any unprotected exposure (e.g., not wearing recommended PPE) should be reported to occupational health services, a supervisor, or a designated infection control officer for evaluation.
- EMS clinicians should be alert for symptoms of COVID-19 (as listed above). If symptoms develop, they should self-isolate and notify occupational health services and/or their public health authority to arrange for appropriate evaluation.

Essential Workers: Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19

To ensure continuity of operations of essential functions, CDC advises that critical infrastructure workers may be permitted to continue working following potential exposure to COVID-19, provided they remain asymptomatic and additional precautions are implemented to protect them and the community. A potential exposure means being a household contact or having close contact within 6 feet of an individual with confirmed or suspected COVID-19 for at least 15 minutes OR being sneezed or coughed on by the individual. The timeframe for having contact with an individual includes the period of time of 48 hours before the individual became symptomatic.

Critical Infrastructure workers who have had an exposure but remain asymptomatic should adhere to the following practices prior to and during their work shift:

- **Pre-Screen**: Employers should measure the employee’s temperature and assess symptoms prior to them starting work. Ideally, temperature checks should happen before the individual enters the facility. A non-contact thermometer should be used or thermometers must be disinfected between uses.
- **Regular Monitoring**: As long as the employee doesn’t have a temperature >100.0 F or symptoms, they should self-monitor under the supervision of their employer’s occupational health program.
- **Wear a Mask**: The employee should wear a facemask at all times while in the workplace for 14 days after last exposure. Employers can issue facemasks or can approve employees’ supplied cloth face coverings in the event of shortages.
- **Wash Hands**: The employee should wash their hand frequently throughout the day; alcohol-based hand sanitizers with at least 60% alcohol may be used when handwashing facilities are not available.
- **Social Distance**: The employee should maintain 6 feet and practice social distancing as work duties permit in the workplace.
- **Disinfect and Clean work spaces**: Clean and disinfect all areas such as offices, bathrooms, common areas, shared electronic equipment frequently.

If the employee becomes sick during the day, they should be sent home immediately. Surfaces in their workspace should be cleaned and disinfected. Information on persons who had contact with the ill employee during the time
the employee had symptoms and 2 days prior to symptoms should be compiled. Others at the facility with close contact within 6 feet of the employee for at least 10-15 minutes during this time would be considered exposed.