



# CHARLES COUNTY EMERGENCY SERVICES



## SPECIAL ORDER 2020-03

### Coronavirus Disease 2019 (COVID-19) Evaluating, Monitoring and Testing for First Responders and Critical Infrastructure Employees EMERGENCY SERVICES

Issue Date: 04/19/2020 Revised: 05/06/2020

Expiration Date: N/A

#### I. OVERVIEW

With the annual occurrence of influenza season, and with the recent developments regarding the Coronavirus, we are all reminded that the manner in which we approach infection control incidents is of the utmost importance. Many within the Charles County Department of Emergency Services (CCDES), Charles County Association of Emergency Medical Services (CCAEMS) and the Office of the Medical Director are remaining vigilant to emerging issues related to infection control. Of concern is the Coronavirus outbreak which originated in the Wuhan province of China, and the subsequent cases that have occurred here in the United States and elsewhere throughout the world. This policy and procedure outlines the many measures needed to manage workers in the pandemic setting to include how best to determine the nature of exposures, how to manage workers once exposed, guidance on when to provide COVID-19 testing and how to determine when workers can safely return to work.

#### II. DEFINITIONS

- **Active Monitoring** - regular communication with potentially exposed people to assess for the presence of fever or COVID-19 symptoms. *This assessment should be done using the Maryland Department of Health Employee Screening Form.* This communication should occur once each day to include telephone calls or any electronic or internet-based means of communication. This will be delegated through the department's Infection Control Program. (1)
- **Aerosolizing Procedures** - any procedure that might lead to the aerosolization of sputum or other bodily fluids to include oxygenation, ventilation, CPAP application, nebulized medications or CPR.
- **Close Contact** - Close contact is defined as being within six (6) feet of a suspected or confirmed COVID-19 individual for five (5) minutes or longer or being within the individual's care area or room for a prolonged period of time. Brief interactions such as walking by a person or moving past their room do not constitute close contact. Close contact can include distances greater than six (6) feet when aerosolizing procedures are being performed.



# CHARLES COUNTY EMERGENCY SERVICES



- **Community Exposure** - an exposure to a confirmed COVID-19 individual that does not occur in a patient care setting. It might occur at home, in a public space or work setting such as a fire station, rescue squad or government building.
- **Coronavirus 2019** - A novel coronavirus is a new coronavirus that has not been previously identified. The virus causing coronavirus disease 2019 (COVID-19), is not the same as the coronaviruses that commonly circulate among humans and cause mild illness, like the common cold. On February 11, 2020 the World Health Organization announced an official name for the disease that is causing the 2019 novel coronavirus outbreak, first identified in Wuhan China. The new name of this disease is coronavirus disease 2019, abbreviated as COVID-19. In COVID-19, 'CO' stands for 'corona,' 'VI' for 'virus,' and 'D' for disease. Formerly, this disease was referred to as "2019 novel coronavirus" or "2019-nCoV". There are many types of human coronaviruses including some that commonly cause mild upper-respiratory tract illnesses. COVID-19 is a new disease, caused by a novel (or new) coronavirus that has not previously been seen in humans.
- **COVID-19 Signs and Symptoms** - includes fever, cough, shortness of breath, sore throat, myalgia and malaise. (2)
- **Critical Infrastructure Employees** - Includes personnel that are not direct first responders including workers in Emergency Management, 911 call centers, and animal shelters. (3)
- **First Responder** - For the purpose of this Special Order, a first responder includes the following personnel: Emergency Medical Technicians, Paramedics, Firefighters, Rescue Squad Members, Police Officers, Correctional Officers and Animal Control Officers.
- **Isolation** - Separates sick people with a contagious disease from people who are not sick.
- **Non-exposure** - The following individuals are NOT considered "exposed" to COVID-19:
  - First responders who are farther than six (6) feet from the patient or,
  - First responders who are within six (6) feet of the patient for less than five (5) minutes and not performing respiratory procedures,
  - First responders who are wearing appropriate PPE when interacting with a PUI patient.
- **Person Under Investigation (PUI)** - A person who meets the CDC established criteria for COVID-19 symptoms and epidemiological risk factors. Symptoms include a fever, cough, sore throat and lower respiratory infection. Personal Protection Equipment (PPE) - For the purpose of this Special Order, PPE is considered those items in accordance with the recommendations of the Maryland Institute for Emergency Medical Services Systems - Infection Control and PPE Guidance (Attachment is included in Special Order 2020-01). Such items included are gloves, respiratory protection masks, eye protection and gowns.



# CHARLES COUNTY EMERGENCY SERVICES



- **Quarantine** - First responders who are deemed to have had a suspected moderate to high risk exposure and are required to be segregated from their work peers and others for the purpose of social distancing and stopping the potential spread of disease. The quarantine period is fourteen (14) days from time of known exposure.
- **Self-Monitoring with Delegated Supervision** - Individuals perform self-monitoring with oversight by the department's Infection Control Program. On the days an individual is scheduled to work, they must measure temperature and assess symptoms before starting work. **This assessment should be done using the *Maryland Department of Health Employee Screening Form*** This information will be relayed to the Infection Control Program through telephone calls or any electronic or internet-based means of communication. (1)

## III. PURPOSE

To provide guidance, policies, and procedures for evaluating first responders for potential exposure to SARS COV-2, the provision of post-exposure management, and the determination of when providers are fit to return to work. In addition, this special order provides similar guidance to first responders and/or critical infrastructure employees who display signs and symptoms consistent with COVID-19 but have no obvious source of exposure.

## IV. POLICY & PROCEDURE - EXPOSURE EVALUATION

Determine if the source of exposure is a confirmed COVID-19 individual that is not a patient, or whether they are a confirmed COVID-19 or suspected PUI patient.

- A. For confirmed COVID-19 individuals that were not encountered as patients (4):
  - i. Is the individual a household member, an intimate partner, or a close contact?
    - 1. If NO, then there is no exposure.
    - 2. If YES, then a potential exposure exists, proceed to the next question
  - ii. Was the last contact with the individual made from 48 hours before the onset of symptoms to the resolution of illness?
    - 1. If NO, then there is no exposure
    - 2. If YES, then a community exposure has occurred
- B. For confirmed COVID-19 or suspected PUI patient encounters, use Table 1 to determine the level of exposure. (1)



# CHARLES COUNTY EMERGENCY SERVICES



PPE Protection for Provider	Patient Wearing a Cloth Covering or Facemask	Exposure Category
No facemask or respirator	Yes	Medium
No gown or gloves while maintaining heavy body contact	Yes	Medium
No eye protection or gown or gloves	Yes	Low
All PPE in place to include a facemask instead of a respirator	Yes	Low
No facemask or respirator	No	High
No eye protection while performing aerosolizing procedures	No	High
No eye protection	No	Medium
No gown or gloves while performing aerosolizing procedures or maintaining heavy body contact.	No	Medium
No gown or gloves	No	Low
All PPE in place to include a facemask instead of a respirator	No	Low

Table 1



# CHARLES COUNTY EMERGENCY SERVICES



## V. POLICY - MANAGEMENT OF SICK OR EXPOSED EMPLOYEES (1)

### A. Asymptomatic Community Exposure

1. Instruct individual to quarantine at home for fourteen (14) days from last contact with positive COVID-19 patient.
2. Individual is subject to active monitoring.
3. If individual becomes symptomatic for COVID-19, they must contact their designated Infection Control Officer as soon as possible.

### B. Asymptomatic High or Medium Risk Exposures

1. Instruct individual to quarantine at home for fourteen (14) days from contact with source of exposure.
2. Individual is subject to active monitoring.
3. If individual becomes symptomatic for COVID-19, they must contact their designated Infection Control Officer as soon as possible.

### C. Asymptomatic Low Risk Exposures

1. Individual is subject to self-monitoring with delegated supervision.
2. Individual is not restricted from work.
3. If individual becomes symptomatic for COVID-19, they must contact their designated Infection Control Officer as soon as possible.

### D. Symptomatic Employees with no Known Exposure

1. Contact their designated Infection Control Officer as soon as possible.
2. ~~If signs or symptoms are consistent with COVID-19, the individual will be instructed to quarantine at home for fourteen (14) days from the onset of signs and symptoms.~~

### E. All Symptomatic Employees

1. All symptomatic employees should be assessed using the *Maryland Department of Health Employee Screening Form (MDHES)*. [attached]



# CHARLES COUNTY EMERGENCY SERVICES



- i. Employees with an MDHES score of 15 or more will be considered a high risk for COVID-19 infection and will be sent home to isolate for fourteen (14) days from the onset of signs and symptoms.
  - ii. Employees with an MDHES score between six (6) and fourteen (14) will be considered a medium risk for COVID-19 infection and will be sent home to isolate for fourteen (14) days from the onset of signs and symptoms.
  - iii. Employees with no known exposure, with an MDHES score between one (1) and five (5), may be allowed to continue working provided there are no other risk factors as outlined in the Low Risk section of the MHDES form. In an effort to protect the workforce, employees displaying any of the aforementioned risk factors may be sent home to isolate if the employer has a reasonable belief that the employee has been exposed to or has contracted COVID-19. The period of isolation will last fourteen (14) days from the onset of signs and symptoms.
  - iv. Employees with an MHDES score of zero (0) represent no risk and will be allowed to work.
2. ~~All symptomatic employees will be required to quarantine at home for fourteen (14) days from the onset of symptoms.~~
  3. Employees should contact their primary care provider for management.
  4. Self-management should include fever reducing medications, hydration with clear fluids and plenty of rest.
  5. Individuals who develop shortness of breath should contact their physician and/or seek emergency help.
  6. All symptomatic employees **who are directed to self-isolate at home** should seek COVID-19 testing.

## VI. POLICY - TESTING

- A. It is recommended that all employees regardless of exposure that have COVID-19 related signs and symptoms should seek COVID-19 testing.
- B. It is not currently recommended that any employee that is asymptomatic seek COVID-19 testing regardless of exposure.
- C. Venues for Testing:

1. University of MD, Charles Regional Medical Center



# CHARLES COUNTY EMERGENCY SERVICES



- i. Uses CDC Priority Testing Criteria
    - ii. Same day results
  2. Urgent Care Centers
    - i. Unknown testing criteria
    - ii. Need to call facility for screening
    - iii. Availability of results may be same day (MedStar Prompt Care) or may take several days (Right Time)
  3. Maryland Department of Health Drive-Thru Testing Sites
    - i. Uses CDC Priority Testing Criteria
    - ii. Appointments and prescriptions can be obtained within the Department of Emergency Services through the Office of the Jurisdictional Medical Director.
    - iii. Does not operate daily so appointments are not for same day
    - iv. Availability of results may be seven (7) to ten (10) days
    - v. Available at numerous locations including the VEIP station in Waldorf, MD.
  4. Primary Care Physicians - availability and turnaround on results are unknown
  5. Other area hospitals - availability and turnaround on results are unknown
- D. CDC Priority Testing Criteria (5):
  1. Priority 1 includes no first responders or critical infrastructure employees unless hospitalized.
  2. Priority 2 includes symptomatic first responders.
  3. Priority 3 includes exposed first responders that are asymptomatic and symptomatic critical infrastructure employees.
  4. Non-priority includes asymptomatic, non-exposed individuals.
- E. The CDC Priority Testing Criteria does not always correlate to the availability or lack thereof for testing. Other considerations such as test kit availability, local demand and facility policy will be key determinants.





# CHARLES COUNTY EMERGENCY SERVICES



## VII. POLICY - RETURN TO WORK (6)

- A. Return to work criteria will be determined using the *Maryland Department of Health Employee Screening Form*.
- B. Asymptomatic Individuals with exposure may return to work after fourteen (14) days from their last known date of exposure provided, they remained asymptomatic throughout the period of quarantine.
- C. Symptomatic Individuals with Known or Suspected COVID-19:
1. Resolution of fever without the use of fever reducing medications for at least seventy-two (72) hours **AND**,
  2. Improvement in respiratory symptoms for at least seventy-two (72) hours **AND**,
  3. At least fourteen (14) days have passed since the onset of signs and symptoms.
- D. Symptomatic Critical Infrastructure Workers with Known or Suspected COVID-19:
1. Resolution of fever without the use of fever reducing medications for at least seventy-two (72) hours **AND**,
  2. Improvement in respiratory symptoms for at least seventy-two (72) hours **AND**,
  3. At least seven (7) days have passed since the onset of signs and symptoms.
  4. Must wear a facemask while working for fourteen (14) days after the initial onset of signs and symptoms.
  5. Must have no chance of patient contact for fourteen (14) days after the initial onset of signs and symptoms.
- E. Asymptomatic individuals with confirmed COVID-19 can return to work after ten (10) days have passed since their first positive COVID-19 test provided they did not subsequently develop symptoms after their positive test.





# CHARLES COUNTY EMERGENCY SERVICES



## VIII. RESOURCES

- 1 - CDC, CDC. "Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease 2019 (COVID-19)." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 15 Apr. 2020, [www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html).
- 2 - CDC, CDC. "Symptoms of Coronavirus." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 20 Mar. 2020, [www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html](https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html).
- 3 - CDC, CDC. "Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 20 Apr. 2020, [www.cdc.gov/coronavirus/2019-ncov/community/critical-workers/implementing-safety-practices.html](https://www.cdc.gov/coronavirus/2019-ncov/community/critical-workers/implementing-safety-practices.html).
- 4 - CDC, CDC. "Public Health Recommendations for Community-Related Exposure." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 30 Mar. 2020, [www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html](https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html).
- 5 - CDC, CDC. "Interim Guidance: Healthcare Professionals 2019-NCoV." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 14 Mar. 2020, [www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html](https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html).
- 6 - CDC, CDC. "Return-to-Work Criteria for Healthcare Workers." *Centers for Disease Control and Prevention*, Centers for Disease Control and Prevention, 13 Apr. 2020, [www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html).



# CHARLES COUNTY EMERGENCY SERVICES



## Maryland Dept. of Health Employee Screening Form

Employee Name: \_\_\_\_\_ Date: \_\_\_\_\_

Employee Department: \_\_\_\_\_

Employee Division: \_\_\_\_\_

The Objective of provider screening is to minimize the chance of employee exposure to illnesses while at work during disease outbreaks.

The screening may occur over the phone for employees not yet reporting to work and or upon arrival at their work location. The illness exposure risk determination is based upon a numerical determination of common signs and symptoms of respiratory illness.

### Employee Illness Screening:

Please circle the value in the middle column for each sign and symptom the employee has. Provide any additional information or comments if any.

Illness Sign / Symptom	Value	Comments
Fever ( $\geq 100^{\circ}\text{F}$ / $37.8^{\circ}\text{C}$ / Subjective) and or Chills	6	
Difficulty Breathing / Shortness of Breath	6	
Cough (persistent)	5	
Congestion	2	
Body Aches	1	
Sudden recent loss of smell	1	



# CHARLES COUNTY EMERGENCY SERVICES



Stress that is interfering with daily activities	1	
Sore throat	1	
headache	1	
Shaking chills	1	
Exposure Risk Score (Total Sum of All Circled Values)		Enter "0" if there are no values circled

Exposure Risk Score	Recommendations
High Risk (15-20)	Employee <u>should not report to work / be sent home</u> ; <b><i>CALL their physician</i></b> ; monitor their temperature; <u>avoid contact with others</u> ; <u>stay home</u> ; not to go out until cleared by a physician.
Medium (6-14)	Employee <u>should not report to work / be sent home</u> ; <b><i>CALL their physician</i></b> ; monitor their temperature; <u>avoid contact with others</u> ; <u>stay home</u> ; not to go out until cleared by a physician.
Low (1-5)	<p>If any answer to these questions are circled, consider sending home</p> <ul style="list-style-type: none"> <li>Have you been vaccinated against the flu? NO</li> <li>Did you start getting sick in the last week? YES</li> <li>Have you been in close contact with anyone with the <u>flu-like-illness</u>? YES</li> <li>Are you designated as essential Personnel? NO</li> </ul> <p>Employee should self-monitor for illness stay away from others</p>



# CHARLES COUNTY EMERGENCY SERVICES



No Risk (0)	Employee may enter and report to work
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## Exposure Risk Assessment and Employee Recommendations

### ADA / FMLA Considerations

Under the ADA, an employer cannot make medical inquiries of employees unless the inquiry is *voluntary* or *job-related and consistent with business necessity*.

If an employer does make such inquiries, the employer must follow the ADA guidelines pertaining to medical records.

These guidelines

- require confidential maintenance of medical information, which should be kept separate and apart from the employee's personnel file,
- limit the distribution of such information to individuals with a legitimate need to know.

Nonetheless, if an employee poses a *direct threat* (i.e. + CoV19) to the health or safety of himself/herself or others, then an employer can require the employee to disclose health information.

An employer will likely be permitted to require an employee to undergo medical testing if the employer *reasonably believes*, based on an individualized assessment, that an employee may have been exposed to Coronavirus, and demonstrates symptoms of Coronavirus.

If an employer has a *reasonable* belief that the employee has been exposed to, or has contracted, Coronavirus, then the employer may send that person home to protect the rest of the workforce



# CHARLES COUNTY EMERGENCY SERVICES



## IX. APPROVAL

Approved: Michelle L Lilly  
Michelle Lilly, Director

Date: 5/7/2020

Approved: Kevin Seaman  
Kevin Seaman, MD

Date: 05/07/20

Approved: Andrew Spalding  
Andrew Spalding, Chief; CCAEMS

Date: 05/07/2020

Approved: Mark Kaufmann Jr.  
Mark Kaufmann Jr., Chief; CCVFA

Date: \_\_\_\_\_