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[STAFF] COVID Updates
COVID-19 Exposure Memo.pdf

Good morning everyone,

Below are a few updates from the COVID-19 Pandemic Task Force:

- 1. A small reminder that while COVID-19 is posing unique challenges for everyone in the hospital, HIPAA laws have in no way changed with regards to sharing patient information. We continue to see places of employment contacting the hospital inquiring about test results and diagnoses for their employees who may or may not have been tested for COVID-19 at PMH. As with any other medical test, procedure, treatment, or service, we can not share that information with anyone other than the patient or to whom someone the patient has identified.
- 2. As part of our infection control plan and to keep our associates and patients safe, all PMH staff are required to wear a mask that provides at least a level 3 layer of protection. If you are unsure of your mask's level, please speak with Linda Webb or Vicki White for clarification.

All associates who may come into contact with possible COVID-19 patients need to know where their N95 mask is at all times. It is also the staff member's responsibility to inspect their mask and to perform a seal check each time they put it on. Additionally, with a greater understanding of how the virus can be transmitted through the eyes, we now recommend that staff wear eye protection anytime they are going to don an N95. If you have any questions, please speak with a member of the infection control team.

3. Attached to this email is a memo and flow chart regarding the different levels of COVID-19 exposures that our associates may experience. The flow chart also diagrams the steps for how PMH will respond to that exposure.

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COVID-19 TESTING

The current COVID-19 test is estimated to have a 70% accuracy rate. 30% of the testing reports can show a false positive or negative. Testing has shown the accuracy rate increases when the individual has developed symptoms. Testing is an important tool, but self-monitoring is equally necessary.

Not all "exposures" require testing. Often self-monitoring, especially initially after the "exposure", is all that is required. PMH follows CDC guidelines for determining exposure risk and need for further testing. Each situation will be individually evaluated based on CDC recommendations, PMH Medical Staff and Associate Health.

HIGH RISK: Generally involve exposure of Health Care Provider's (HCP) eyes, nose, or mouth to material potentially containing SARS-CoV-2 or COVID-19, particularly if these HCP were present in the room for an aerosol-generating procedure.

- Prolonged close exposure to a known COVID-19 patient or a Person Under Investigation (PUI)
- Prolonged close exposure is contact greater than 15 minutes and within 6 feet of the patient
- For patients with confirmed COVID-19 who develop symptoms, consider exposure window to be 48 hours before the onset of symptoms
- For patients with confirmed COVID-19 who is asymptomatic, should be considered potentially infectious beginning 2 days after their exposure
- HCP not wearing a respirator or facemask
- HCP not wearing eye protection
- The patient with COVID-19 was not wearing a cloth face covering or facemask
- HCP not wearing all recommended PPE (i.e., gown, gloves, eye protection, respirator, i.e. N95 and/or PAPR) while performing an aerosol-generating procedure.

Work Restriction:

- Exclude from work for 14 days after last exposure
- HCP to self-monitor for fever or symptoms consistent with COVID-19
- Any HCP who develop fever or symptoms consistent with COVID-19 should immediately contact Associate Health and/or Primary Care Provider (PCP)



LOW RISK: HCP other than those exposure risks described above. Work Restrictions: No work restrictions

Follow all recommended infection control practices:

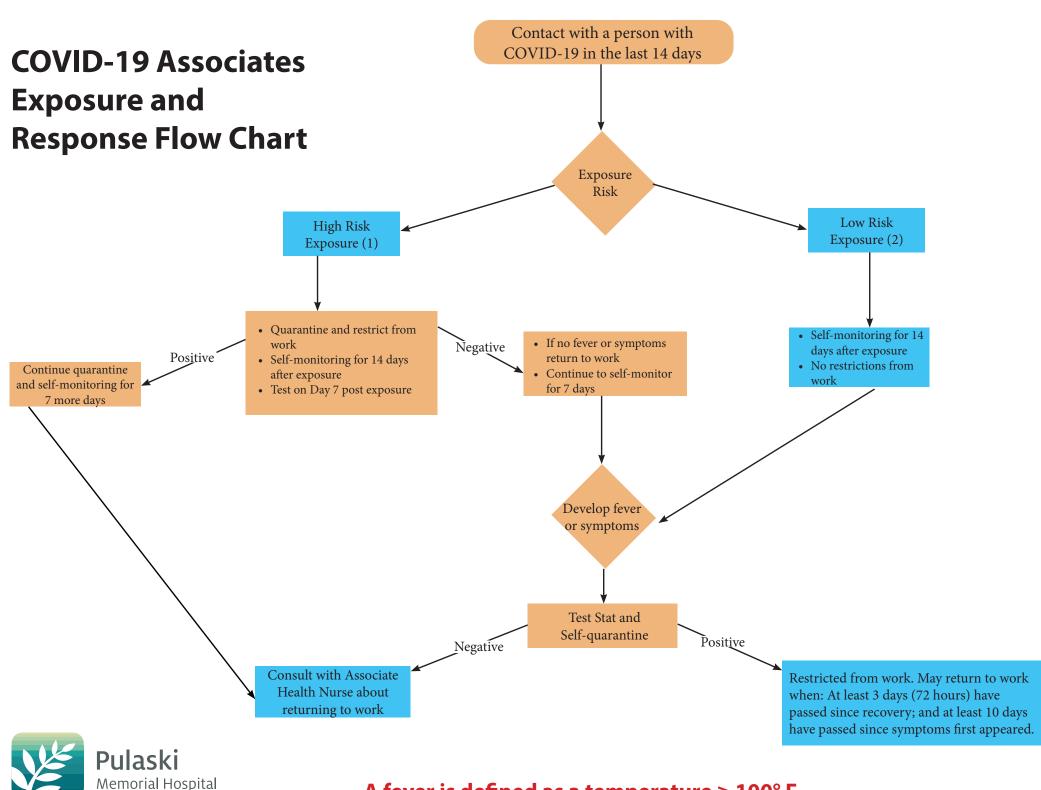
- Source control by ensuring all patients and visitors appropriately wear face masks
- HCP practice source control by appropriately wearing face masks
- Self-monitoring for fever or any symptoms of COVID-19
- Any HCP who develop fever or symptoms consistent with COVID-19 should immediately contact Associate Health and/or PCP

The best defense against COVID-19 is:

- Ensure patients and visitors are properly wearing a mask (must cover mouth and nose). If masks are not being properly worn, explain the need to cover both the mouth and nose to prevent the spread of infection.
- HCPs wear appropriate PPE
- HCPs practice good hand hygiene
- Social distancing

Reference: CDC

June 9th, 2020



A fever is defined as a temperature $\ge 100^{\circ}$ F