



# Return to Work Criteria for UToledo Employees, including Healthcare Providers (HCP) with Close Contact, Suspected or Confirmed, COVID-19

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## PREFACE

- The information in this document reflects current available information as of the drafting date and will be updated as necessary and posted on the UToledo Human Resources webpage, “Working Through COVID-19” (<https://www.utoledo.edu/depts/hr/Working-Through-COVID-19.html>).
- Information in this document regarding testing, quarantine, isolation, and self-monitoring is intended as a supplement to public health authorities and the advice of each individual’s healthcare provider or emergency medical service provider. In the event of conflict, individuals should follow quarantine and isolation instructions of their local health department, and care instructions from their healthcare provider or emergency medical care personnel.
- Information in this document regarding exclusion from work is subject to applicable law and policies related to absences, sick-leave, or other time away from work. Refer to UToledo’s leave of absence page for information regarding requesting leave: <https://www.utoledo.edu/depts/hr/leave/>
- For information regarding ADA reasonable accommodations please go to <https://www.utoledo.edu/depts/hr/eo-aa/ADA-Accommodation-Request-Process.html>.

## I. Confirmed COVID-19 Cases

### A. Symptom-based strategy for those with COVID-19:

Exclude from work/school until:

- At least 5 days have passed *since symptoms<sup>1</sup> first appeared*  
**AND**
- At least 24 hours have passed *since last fever<sup>2</sup> without the use of fever-reducing medications*  
**AND**
- Improvement in other COVID-19 symptoms<sup>1</sup> (e.g., cough, shortness of breath). Loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation.
- Follow “Return to Work Practices and Work Restrictions” in Section IV below
- Follow “Self-monitoring and Self-isolation Recommendation “in Section V below

Please consult your primary care physician if you need to be absent longer than 5 days.

### B. Asymptomatic strategy for those with COVID-19:

Exclude from work/school until:

<sup>1</sup> Symptoms can include but not limited to: fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea

<sup>2</sup> CDC considers a person to have a fever when he or she has a measured temperature of at least 100.0°F [37.8°C].

- At least 5 days have passed since the date of the first positive viral COVID-19 diagnostic test assuming symptoms have not subsequently developed since the positive test
  - If symptoms<sup>4</sup> develop, then the *symptom-based strategy* above should be followed
- Follow “*Return to Work Practices and Work Restrictions*” in Section IV below
- Follow “*Self-monitoring and Self-isolation Recommendations*” in Section V below

C. Regardless of vaccination status, persons with a positive result should remain in isolation until they have met the aforementioned criteria.

## II. Close Contacts with Confirmed Cases - Persons identified as a Close Contact of a COVID-19 case

### A. If you are fully vaccinated:

- Are boosted -OR-

- Have completed the primary series of Pfizer or Moderna vaccine within the last 6 months -OR-

- Received one dose of J&J vaccine within the last 2 months:

- Continue to work and/or attend classes if they remain without symptoms<sup>3</sup>.
- Wear a well-fitted mask over your nose and mouth while around others for 10 days after exposure.
- Get a COVID-19 test 5 days following the date of your exposure.
- Call the UTM COVID-19 testing line (419-383-4545) or another desired testing site and identify yourself as a COVID-19 exposure
  - **IF SYMPTOMATIC OR HAVE RECENTLY BEEN SYMPTOMATIC – DO NOT RETURN TO WORK OR SCHOOL WHILE AWAITING RESULTS.**
  - If test is positive, follow *symptom-based strategy* or *asymptomatic strategy* in Section I above
- For HCP<sup>4</sup> that are involved in the delivery of care to a patient, a well-fitted facemask must be worn for 10 days after the last exposure event.
  - If caring for a confirmed COVID-19 patient an N95 or PAPR/CAPR needs to be worn when performing an aerosolizing procedure or when indicated in lieu of a facemask.
- For non-HCP, wear a mask in public indoor settings for 10 days after the last exposure event.
- Monitor temperature and confirm absence of symptoms<sup>3</sup> each day for 10 days following the last exposure event.
- If even mild symptoms<sup>3</sup> develop, cease working or leave class and immediately notify your supervisor/professor prior to leaving work/class.

### B. If you are not fully vaccinated:

- Completed the primary series of Pfizer or Moderna vaccine over 6 months ago and are not boosted -OR-

- Received one dose of J&J over 2 months ago and are not boosted -OR-

- Are unvaccinated (no vaccine received or only one dose of Pfizer or Moderna):

- Exclude or quarantine from work/school for at least 5 days.
- Get a COVID-19 test in 5 days after last exposure or immediately if symptoms<sup>3</sup> develop.
- If even mild symptoms develop, call the UTM COVID-19 testing line (419-383-4545) or another desired testing site and identify yourself as a COVID-19 exposure.
  - **IF SYMPTOMATIC OR HAVE RECENTLY BEEN SYMPTOMATIC – DO NOT RETURN TO WORK OR SCHOOL WHILE AWAITING RESULTS.**
  - Report your absences according to the normal procedure.
- If the test is positive, follow *symptom-based strategy* or *asymptomatic strategy* in Section I above.
- If test is negative, return to work/school 5 days following last exposure.

<sup>3</sup> Symptoms can include but not limited to: fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea

<sup>4</sup> A Health Care Provider (HCP) is anyone employed at any doctor’s office, hospital, health care center, clinic, medical school, or post-secondary educational institution that currently offers clinicals at the stated areas, any facility that performs laboratory or medical testing, pharmacy, or any similar institution, employer, or entity.

- For HCP<sup>4</sup> that are involved in the delivery of care to a patient, a well-fitted facemask must be worn for 10 days after the last exposure event.
  - If caring for a confirmed COVID-19 patient an N95 or PAPR/CAPR needs to be worn when performing an aerosolizing procedure or when indicated in lieu of a facemask.
- For Non-HCP, after returning from the 5-day quarantine, wear a mask around others for 5 additional days after the last exposure event.
- Monitor temperature and confirm absence of symptoms<sup>5</sup> each day for 10 days following the last exposure event.
- If even mild symptoms<sup>5</sup> develop, cease working or leave class and immediately notify your supervisor/professor prior to leaving work/class.

**Note:** CDC’s “Strategies to Mitigate Healthcare Personnel Staffing Shortages” allows elimination of quarantine for certain healthcare workers, but only as a last resort, if the workers’ absence would mean there are no longer enough staff to provide safe patient care, specific other amelioration strategies have already been tried, patients have been notified, and workers are utilizing additional PPE at all times.

### III. Suspected Cases

#### Persons that know or think they may have been potentially exposed or in Close Contact to a COVID-19 case:

- Follow guidance above Section II for *Persons identified as a close contact of a COVID-19 case*<sup>6</sup>
- Close contact is defined as:
  - being within 6 feet of a sick person with COVID-19 for a cumulative total of 15 minutes or longer over a 24-hour period starting from 2 days before symptom onset or positive test date (whichever is earlier).
  - being coughed or sneezed on by a COVID-19 confirmed person or exposed to respiratory droplets.
  - providing care in home to someone who is sick with COVID-19.
  - having direct physical contact with someone who is sick with COVID-19.
  - sharing eating or drinking utensils with someone who is sick with COVID-19.
- If you were not in “Close Contact” (as defined above) with a sick person with COVID-19, you are at low risk for infection.
- For general questions call 1-833-4-ASK-ODH (1-833-427-5634) from 9 a.m. to 8 p.m. daily.
- Monitor your health for fever<sup>6</sup>, cough and shortness of breath during the 10 days after your potential exposure and call the UTMC COVID-19 testing line (419-383-4545) or another desired testing site if symptoms develop.

**NOTE:** If you are being testing for COVID-19 and are symptomatic or have recently been symptomatic do not return to school or work until at least 5 days have passed since your symptom onset or until you have the results of your test. If results are positive, follow the appropriate *symptomatic* or *asymptomatic strategy* in Section I above.

### IV. Return to Work Practices and Work Restrictions:

After returning to work, HCP<sup>7</sup> should:

- Patients (if tolerated) should wear well-fitting source control while interacting with these HCP.
- A respirator (e.g., N95) or a well-fitting facemask (e.g., KN95) should be worn continuously for 5 additional days after returning to work from the quarantine, even when in non-patient care areas such as breakrooms.

<sup>5</sup> Symptoms can include but not limited to: fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea

<sup>6</sup> CDC considers a person to have a fever when he or she has a measured temperature of at least 100.0°F [37.8°C].

<sup>7</sup> **A Health Care Provider (HCP) is anyone employed at any doctor’s office, hospital, health care center, clinic, medical school, or post-secondary educational institution that currently offers clinicals at the stated areas, any facility that performs laboratory or medical testing, pharmacy, or any similar institution, employer, or entity.**

- If caring for a confirmed COVID-19 patient an N95 or CAPR/PAPR needs to be worn when indicated in lieu of a facemask.
- Practice physical distancing from coworkers at all times.
- If the respiratory or well-fitting facemask needs to be removed, for example, in order to eat or drink, separate yourself from others.
- Be restricted from contact with severely immunocompromised patients (e.g., transplant, hematology-oncology) until all symptoms<sup>8</sup> are completely resolved or at baseline.
- Adhere to hand hygiene, respiratory hygiene, and cough etiquette (e.g., cover nose and mouth when coughing or sneezing, dispose of tissues in waste receptacles).
- Self-monitor for symptoms<sup>8</sup> and seek re-evaluation from primary care physician if respiratory symptoms recur or worsen.

After returning to work/school, non-healthcare providers should:

- Make sure your mask fits snugly against your face.
  - Gaps can let air leak out around the edges of the mask.
- Pick a mask with layers to keep your respiratory droplets in and keeps others' out.
  - Layers masks stop more respiratory droplets from getting in or out of your mask.

## **V. Self-monitoring and Self-isolation Recommendations:**

- Follow care instructions from your healthcare provider and quarantine or isolate in accordance with your local health department. Your healthcare provider or local health department may give you instructions on checking your symptoms and reporting information.
- Stay home, except to get medical care.
- Restrict activities outside your home.
- If condition worsens seek medical care **and**
  - **Call 9-1-1** or call ahead to your healthcare provider or Emergency Department (ED) to notify them you are suspected to have COVID-19.
  - If possible, put on a facemask before emergency medical services arrive or before arrival ED.
- Monitor temperature daily and remain alert for respiratory symptoms.
- Stay in a separate room from others household members, if possible.
- Household members should use a separate bedroom and bathroom, if available.
- Make sure that shared spaces in the home have good air flow, such as by an air conditioner or an opened window, weather permitting and if consistent with safety and health (e.g., would not create a fall risk or trigger asthma).
  - Consider portable high-efficiency particulate air (HEPA) fan/filtration systems to help enhance air cleaning
- If possible, wear a face mask when you are around other people or pets, and before you enter a healthcare provider's office.
- Clean and disinfect "high-touch" surfaces and items every day: This includes tables, doorknobs, light switches, handles, desks, toilets, faucets, sinks, and electronics.
- Perform hand hygiene frequently – wash your hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer that contains at least 60% alcohol, covering all surfaces of your hands and rubbing them together until dry. Soap and water are preferred if hands are visibly dirty.

References:

[www.cdc.gov/coronavirus/2019-ncov/hcp/mitigating-staff-shortages.html](http://www.cdc.gov/coronavirus/2019-ncov/hcp/mitigating-staff-shortages.html)

<https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html>

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/index.html>

<https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html#Administration>

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<sup>8</sup> Symptoms can include but not limited to, fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea

Occupational Exposure to COVID-19; Emergency Temporary Standard; OSHA 2021, 86, 116 Fed Reg. 1910.502 (June 2, 2021). – Retrieved on August 24, 2021 from: <https://ecfr.federalregister.gov/on/2021-06-21/title-29/subtitle-B/chapter-XVII/part-1910/subpart-U/section-1910.502>

Ohio Department of Health (2021). *Infectious Disease Control Manual (IDCM) Section 3: Reportable and non-reportable infectious diseases*. Coronavirus Desae 2019 (COVID-19).