



Department of Public Health

MAYOR

Dee Margo

UPDATED (05/22/2020)

GUIDANCE ON RETURN TO WORK FOR HEALTHCARE WORKERS AND FIRST RESPONDERS IN EL PASO, TX

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Cassandra Hernandez

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Dr. Sam Morgan

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Isabel Salcido

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Claudia L. Rodriguez

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Henry Rivera

District 8

Cissy Lizarraga

CITY MANAGER

Tommy Gonzalez

The following guidance developed by the City of El Paso Department of Public Health (DPH) will assist local hospitals and first responders from public safety agencies to return to duty essential personnel in a timely manner taking into account the safety of the personnel and the people they serve.

For purposes of this guidance, the following are the operational definitions to be considered:

- **Healthcare Worker (HCW):** Critical personnel that provides direct patient care, HCW for this guidance includes: Registered Nurses (RN), Physician Assistants (PA), Advance Practice RN (APRN) and Physicians (MD/DO). Other healthcare workers not included in this list may follow workplace infection control protocols for return to work.
- **First Responder (FR):** Critical personnel that provides emergency services to people and are employed by local city and county public safety agencies to include law enforcement officers, firefighters, EMT's and 911 Telecommunicators.
- **Acute Care In-patient Setting** is any healthcare facility or institution to include registered hospitals that provides acute inpatient services to patients, including COVID-19 patients. serves in a in other settings. and/or is employed by any
- **NON-Acute Care Setting:** Any other healthcare setting that is not an acute care facility or hospital providing in-patient acute care to patients.

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DELIVERING EXCEPTIONAL SERVICES



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HCW/FR MAY RETURN TO WORK ACCORDING TO THE FOLLOWING CRITERIA:

1. SYMPTOMATIC LABORATORY CONFIRMED COVID-19 HCW/FR IN ACUTE CARE SETTING:

May return to work if all the following points apply:

1. Need to be afebrile for over 72 Hrs. without the use of antipyretics, **AND**
2. Need for cough to have been improved and almost resolved, **AND**
3. Self-Isolate **at least** 10 days from onset of symptoms **AND** 1-2 have met.

NOTE: Re-test* after 10 days from initial test.

- If second test* result is **NEGATIVE**, then HCW/FR **may** return to work with no restrictions.
- If second test* result is **POSITIVE**, then HCW/FR **may** return to work but not in a critical care area, oncology or caring for immunocompromised patients for at least 7 days after returning to work.

2. ASYMPTOMATIC LABORATORY CONFIRMED COVID-19 HCW/FR:

1. Negative COVID-19 laboratory test* results performed 5-7 days after initial test **AND**
2. Continue to be asymptomatic.

3. HCW/FR IN A HOUSEHOLD WITH LABORATORY CONFIRMED COVID-19:

1. Self-quarantine for at least 5-7 days from initial symptoms of household member, **AND**
2. HCW/FR must be asymptomatic **AND**
3. Have a Negative test for COVID-19 performed **at least** 5-7 days after initial symptoms of household member.

Note: If HCW/FR becomes symptomatic, they should have a viral molecular test* done as soon as they exhibit symptoms and follow guidance for symptomatic HCW/FR.

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GUIDANCE FOR HCW/FR AFTER HIGH-RISK EXPOSURE TO A LABORATORY CONFIRMED COVID-19 WHILE AT WORK:

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- Relieve from duty and self-quarantine for at least 5-7 days
- If HCW/FR is asymptomatic, then testing* can be performed at 5-7 days post-exposure.
 - If test result at 5-7 days is **NEGATIVE**, HCW/FR may return to work.
 - If test result at 5-7 days is **POSITIVE**, then self-isolate for a total of 10 days, monitor for symptoms and repeat testing* 5-7 days after initial test.
- HCW/FR **may** return to work **after 10 days** of self-isolation/quarantine
- If HCW/FR becomes symptomatic, then perform test* at beginning of symptoms, isolate for at least 10 days from onset of symptoms and follow guidelines for symptomatic HCW/FR.

GUIDANCE FOR HCW/FR IF CLEARANCE TEST* IS POSITIVE.

- HCW/FR may return to work after self-isolate/quarantine for a total of **10 days**
- Repeat test* in 5-7 days after initial test.
 - If second clearance test* result is **NEGATIVE**, then HCW/FR may return to work with no restrictions.
 - If second clearance test* result is **POSITIVE**, then HCW/FR may return to work but not in a critical care area, oncology or caring for immunocompromised patients for at least 7 days after returning to work.

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GUIDANCE FOR HCW/FR WITH MODERATE OR LOW RISK EXPOSURE TO A LABORATORY CONFIRMED COVID-19 WHILE AT WORK:

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- Follow [CDC guidelines for HCW exposure](#)¹ and Hospital Infection Control Policy

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Alexsandra Anello

* Acceptable molecular COVID-19 assay tests include:

- RT-PCR (High Complexity test) for detection of SARS-CoV-2.
- Rapid Molecular Point-Of-Care testing for SARS-CoV-2.

District 3

Cassandra Hernandez

District 4

Dr. Sam Morgan

District 5

Isabel Salcido

FOR OTHER HCW NOT IN ACUTE CARE SETTING.

District 6

Claudia L. Rodriguez

Other HCW **NOT** in acute care setting may return to work as follows:

District 7

Henry Rivera

With direct patient care but not working with at-risk[†] population:

District 8

Cissy Lizarraga

1. Isolate x 10 days if COVID-19 (+) **AND**
2. No fever for >72 without the use of anti-pyretic **AND**
3. Great improvement in symptoms, particularly cough **AND**
4. No need for Re-test

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With direct patient care working with at-risk population[†]:

1. Isolate x 14 days if COVID-19 (+) **AND**
2. No fever for >72 without the use of anti-pyretic **AND**
3. Great improvement in symptoms, particularly cough **AND**
4. NEGATIVE Re-test with a molecular test at 10-14 days.
5. If Re-test is positive, may return to work after 14 days isolation but not in direct patient care with at-risk population[†] for another 7 days.

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† at-risk population is defined as:

- Adults > 65 yrs of age
- Any patient that is immunocompromised (oncology undergoing chemotherapy, prolonged steroid therapy >4 weeks, immunodeficiencies, taking immune-modulator medications)
- Any patient admitted to Nursing Home, Assisted Living Facilities, Skilled Nursing Facilities, Long Term Care Facilities.

After returning to work, HCW should:

- Wear a facemask at all times while in the healthcare facility until all symptoms are completely resolved.
- Be restricted from contact with severely immunocompromised patients (e.g., transplant, hematology-oncology) until all symptoms are completely resolved.
- 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 and seek re-evaluation from occupational health if respiratory symptoms recur.

References:

1. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>
2. <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/hcp-return-work.html>
3. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/return-to-work.html>

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