

NOVEL CORONAVIRUS (COVID-19)
UCSF CONTINUE TO WORK - RETURN TO WORK
GUIDELINES FOR STAFF ⁽¹⁾
Revised March 26, 2020

Symptom/Exposure Review	Response	If Symptoms Develop at Work, Can I Continue to Work?	Can I Return to Work?	Do I Need to Stay at Home? Additional actions
1. Have you had a fever in the past 24 hours? <ul style="list-style-type: none"> • Fever (Temp \geq 37.8°C / 100°F) 	YES: see next columns	NO	NO	YES, stay at home <ul style="list-style-type: none"> • Consult with your doctor as needed or if symptom worsens • Call COVID Hotline (415.514.7328) for testing and evaluation • Email OHS for return to work clearance
2. In the past 24 hours, have you had any one of these symptoms? <ul style="list-style-type: none"> • New Cough (new = started within the past 14 days) • Sore Throat • Shortness of Breath • Difficulty Breathing • Unexplained Muscle Aches 	YES: see next columns	NO	NO	YES <ul style="list-style-type: none"> • Consult with your doctor as needed or if symptom worsens • Call COVID Hotline (415.514.7328) for testing and evaluation • Email OHS for return to work clearance
3. In the past 24 hours, have you had any one of these symptoms? <ul style="list-style-type: none"> • Runny Nose • Nasal Congestions • Sneezing 	YES: see next columns	YES , with face mask and consult with manager about assigned duties/patient assignment NO for staff working on high risk units ² where mask wearing for these symptoms is not permitted	YES , with face mask and consult with manager about assigned duties/patient assignment NO for staff working on high risk units ² where mask wearing for these symptoms is not permitted	YES , if the symptoms are unusual for you (e.g. allergies are usual) or they are worsening. <ul style="list-style-type: none"> • Consult with your doctor as needed or if symptom worsens

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<p>4. Have you returned from travel outside the U.S. to a country on the CDC Level 3 list³ or from New York State in the past 14 days?</p>	<p>YES: see next columns</p>	<p>If at work and any one of the symptoms from #2 or #3 develop: apply mask, notify supervisor, go home, and call COVID Hotline (415.514.7328) for testing and evaluation</p>	<p>NO, if you work on a high risk unit²</p> <p>YES, if you <u>do not</u> have any symptoms listed in #2 or #3 you may return to work if you adhere to the following instructions:</p> <ul style="list-style-type: none"> • Self monitor for symptoms, including temperature, at the start and midway through each shift • Wear a facemask while at work for 14 days after return to U.S/California date. • Consult with manager about assigned duties/patient assignment • Practice meticulous hand hygiene • Refrain from direct patient care to immunosuppressed patients for 14 days • Immediately cease patient care activities if any symptoms listed in #2 or #3 arise and apply mask, notify supervisor, go home, and call COVID Hotline (415.514.7328) for further review 	<p>YES, if symptoms</p> <ul style="list-style-type: none"> • Self-monitoring for 14 days, or longer if you develop symptoms • Consult with your doctor as needed or if symptom worsens • Call COVID Hotline (415.514.7328) for testing and evaluation • Email OHS for return to work clearance
<p>5. In the past 14 days, have you been in unprotected contact with someone diagnosed with COVID-19?</p> <p><i>Unprotected means without full PPE at work or in close contact in the community</i></p>	<p>YES: see next columns</p>	<p>If at work and any one of the symptoms from #2 or #3 develop: apply mask, notify supervisor, go home, and call OHS for further review</p>	<p>NO, if you work on a high risk unit</p> <p>YES, if you <u>do not</u> have any symptoms listed in #2 or #3 you may return to work if you adhere to the following instructions:</p> <ul style="list-style-type: none"> • Self monitor for symptoms, including temperature, at the start and midway through each shift • Wear a facemask while at work for 14 days after return to U.S/California date. • Consult with manager about assigned duties/patient assignment • Practice meticulous hand hygiene • Refrain from direct patient care to immunosuppressed patients for 14 days • Immediately cease patient care activities if any symptoms listed in #2 or #3 arise and apply mask, notify supervisor, go home, and call OHS for further review 	<p>YES</p> <ul style="list-style-type: none"> • Self-monitoring for 14 days, or longer if you develop symptoms • Consult with your doctor as needed or if symptom worsens • Call COVID Hotline (415.514.7328) for testing and evaluation • Email OHS for return to work clearance

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6. Do you live with someone who has been diagnosed with COVID-19?	YES: see next columns	YES, if cleared by OHS	NO: <ul style="list-style-type: none"> • A household contact has a higher risk of transmission than a work exposure • Return to work, even if asymptomatic, is not permitted 	YES <ul style="list-style-type: none"> • Self-monitoring for 14 days, or longer if you develop symptoms • Consult with your doctor as needed or if symptom worsens • Call COVID Hotline (415.514.7328) for testing and evaluation • Email OHS for return to work clearance
7. Have you been diagnosed with COVID-19 in the past 14 days?	YES: see next columns	N/A	YES, only if the following criteria are met: <ul style="list-style-type: none"> • 14 days have passed since onset of symptoms • At least 3 days (72 hours) have passed since last fever without the use of fever-reducing medications (e.g., acetaminophen, ibuprofen, aspirin) • Symptoms have completely resolved • After 14 days, if any respiratory symptoms persist (like persistent cough), you will require additional clearance from OHS before returning to work 	YES <ul style="list-style-type: none"> • Self-monitoring for 14 days, or longer if you develop symptoms • If symptoms develop, wear a mask for 14 days after the onset of the symptoms or complete symptom resolution, whichever is longer • Self-isolate from others in the household as much as possible • Limit travel outside of the home • Consult with your doctor as needed or if symptom worsens and email OHS for return to work clearance

⁽¹⁾ Staff includes all employees, faculty, temporary workers, trainees, volunteers, and students. This includes staff who provide services to or work in UCSF Medical Center patient care or clinical areas.

⁽²⁾ UCSF High Risk Units

Parnassus: 11L/12L

Mission Bay: A4 PCICU annex, C4 PICU, C4 PCICU, C4 CTCU, C5 TCUP, C3 ICN, C5 MSP, C6 Heme/Onc, C6 BMT

⁽³⁾ CDC Level 3 Country List (COVID-19) <https://www.cdc.gov/coronavirus/2019-ncov/travelers/after-travel-precautions.html>

⁽⁴⁾ **Who needs to self-monitor for Novel Coronavirus (COVID-19).**

- Anyone exposed to a confirmed COVID-19 patient due to lack of proper personal protective equipment (PPE). For example:
- You examined a confirmed COVID-19 patient without having both you and the patient wear a regular mask
- A confirmed COVID-19 patient coughed / sneezed within 3 -6 feet of you and you were not wearing both a regular mask and eye protection.
- You touched a confirmed COVID-19 patient's respiratory secretions, and the secretions came into contact with your eye, nose, or mouth before you cleaned your hands
- You performed an aerosol-generating procedure (e.g. intubation, bronchoscopy, nebulizer treatment, positive pressure ventilation) without an N95 mask or PAPR.
- Anyone exposed within 6 feet for greater than 10 minutes to a COVID-19 confirmed co-worker who was not wearing a facemask, and did not wear both a regular mask and eye protection.
- Anyone returning from travel to areas with CDC Level 3 travel alerts for COVID-19 in the last 14 days.

Direct questions about the process to the COVID-19 Hotline at 415.514.7328 or Occupational Health Services at OHS@ucsf.edu