

BILH Return to Work for Healthcare Personnel with COVID-19, Influenza, or Influenza-like Illness

The following updated Return to Work guidance applies to all healthcare personnel (HCP)* returning to work after confirmed or suspected Coronavirus Disease-2019 (COVID-19), influenza, or other influenza-like illness (ILI). All HCP returning after confirmed or suspected COVID-19, influenza, or ILI require contact with Employee Health prior to resuming work onsite.

Table 1. Return to Work Criteria for all HCP returning from confirmed or suspected COVID-19, Influenza, or Influenza-like illness (ILI).¹

Initial COVID-19 Test Result	Exclude from on-site work until
<p>COVID-positive by PCR or home antigen test</p> <p>Symptomatic^{1,2}</p>	<ul style="list-style-type: none"> At least 24 hours have passed since resolution of fever without the use of fever-reducing medications; improvement in all other symptoms, or return to pre-COVID-19 baseline; and feels well enough to work, AND At least 7 days have passed since date symptoms first appeared or initial test date, whichever is earlier (Day 0). Return on Day 8. <p>Immunocompetent HCP who were hospitalized for the treatment of COVID-19: at least 10 days have passed since date symptoms first appeared (Day 0). Return on Day 11, OR tests negative on two (2) consecutive COVID-19 tests (molecular test or antigen test) performed at least 24 hours apart.</p> <p>HCP who are moderately to severely immunocompromised³: either</p> <ul style="list-style-type: none"> Time-based: at least 20 days have passed since date symptoms first appeared (Day 0) and return on Day 21; OR Test-based: tests negative on two (2) consecutive COVID-19 tests (home antigen test preferred) performed at least 24 hours apart between days 11-20.
<p>COVID-positive by PCR or home antigen test,</p> <p>Asymptomatic</p>	<ul style="list-style-type: none"> At least 7 days have passed since date of first positive test (Day 0), assuming they have not subsequently developed symptoms since their positive test. Return on Day 8 <p>HCP who are moderately to severely immunocompromised³: Follow instructions for HCP who are moderately to severely immunocompromised in <i>COVID-positive, symptomatic</i> above.</p>
<p>Influenza, or influenza-like illness</p> <p>COVID-negative by PCR or home antigen test</p>	<ul style="list-style-type: none"> At least 24 hours have passed since resolution of fever and other systemic symptoms without the use of fever-reducing medications AND Improvement in all other symptoms (e.g., cough, shortness of breath), or return to baseline. If HCP has an alternate diagnosis (e.g., tested positive for strep throat, concern for norovirus), criteria for return to work should be based on that diagnosis. <p><i>Additional considerations:</i></p> <ul style="list-style-type: none"> Under certain circumstances, such as known exposure to a person with COVID-19 or persistent/worsening symptoms, repeat testing for COVID-19 (by PCR or antigen) may be indicated. If under local DPH quarantine for any reason, then may need to remain out for a longer period pending discussion with DPH.
<p>Mild Respiratory Symptoms, no known COVID exposure.</p> <p>Cold or allergy symptoms: nasal congestion/runny nose, cough, and/or sore throat without fever or other systemic symptoms</p>	<ul style="list-style-type: none"> Out of work pending negative COVID test (1 PCR or 1 home antigen test); AND <ul style="list-style-type: none"> If first negative test was a home antigen test, repeat home antigen test 48 hours after first. May remain at work masked while awaiting the result. If second test is negative, may remain at work and continue masking until symptoms resolve. If symptoms progress or new symptoms develop, then must call Employee Health and remain out of work pending re-testing If any test result is positive, must remain out of work and follow guidance for COVID-positive above.

1. Suspected COVID-19 but awaiting test result or never tested: follow instructions for COVID-positive, symptomatic.

2. Symptomatic is defined as having a fever (temp 100.4°F or higher), chills, cough, shortness of breath, sore throat, muscle aches, nausea, vomiting, diarrhea, headache, excessive fatigue, nasal congestion or runny nose, and/or loss of smell/taste.

3. See CDC's description of moderate and severe immunocompromising conditions and treatment, available at <https://www.cdc.gov/vaccines/covid-19/clinical-considerations/interim-considerations-us.html#immunocompromised>.

After returning to work, HCP should:

- Wear a well-fitting BILH-provided mask at all times while in the facility, including break rooms, unless eating or mask replaced by a respirator, until symptoms (if present) have resolved. HCP returning from confirmed or suspected COVID-19 must mask until 10 days have passed since date symptoms first appeared, or date of positive test if asymptomatic, whichever is longer.
- When eating, must sit **at least 6 feet** from other staff and consider staggering breaks as much as possible to avoid exposure to others.
- Self-monitor for symptoms.
- If symptoms worsen or new symptoms develop, HCP must cease work immediately and contact Employee Health to discuss need for repeat testing for COVID-19.

Submitting a Home Antigen Test result:

- Submit all home antigen test results [here](#)
- When submitting a home antigen test result, you must provide the following information:
 - Date the test was performed
 - Reason for the test and the number of the test in the series (example: symptomatic test 2)
 - Include a photo of the antigen test result
- No confirmatory COVID-19 PCR is needed for a positive home antigen test if the above criteria are met. A PCR may be required at any time per Employee Health clinician discretion.

Testing following recent COVID-19 illness:

- **Rebound symptoms:** People with recurrence of COVID-19 symptoms after having recovered from a recent COVID-19 illness should restart isolation and isolate again for at least 7 days (as above) and may consider testing with a home antigen test.
- **Asymptomatic retesting:** Testing is generally not recommended for *asymptomatic* people who have recovered from COVID-19 infection in the prior 30 days. Testing should be considered for those who have recovered in the prior 31-90 days and have a higher risk exposure to a person with confirmed COVID-19. If testing is performed, a home antigen test is recommended instead of a COVID-19 PCR. This is because some people may remain positive by PCR but not be infectious during this period.

*HCP: Includes all BILH employees, employed and affiliated physicians, students, volunteers, and anyone entering to work/observe in the hospital/business unit.