

Potential Exposure to COVID-19 in Outpatient Settings Excluding Emergency Departments (ED)

RISK ASSESSMENT AND PUBLIC HEALTH MANAGEMENT OF HEALTH CARE WORKERS

8/23/2021

Exposure risk assessment

Health care facilities are responsible for identifying all health care workers (HCW) who come into contact with a patient, visitor (e.g., parent of pediatric patient), or HCW who has a confirmed case of COVID-19.

Patient contact includes direct patient contact as well as brief interactions. Examples of brief interactions include brief conversations at the triage desk; briefly entering the patient room, regardless of direct contact with the patient or patient's secretions/excretions; and entering the patient room immediately after the patient is discharged.

Each of these health care professionals should undergo risk assessment based on current CDC guidance to categorize their exposure to the case as low- or high-risk. [CDC: Interim U.S. Guidance for Risk Assessment and Work Restrictions for Healthcare Personnel with Potential Exposure to COVID-19 \(www.cdc.gov/coronavirus/2019-ncov/HCW/guidance-risk-assesment-HCW.html\)](https://www.cdc.gov/coronavirus/2019-ncov/HCW/guidance-risk-assesment-HCW.html).

The health care facility is responsible for informing HCW of their exposure to COVID-19, conducting a prompt risk assessment, excluding HCW with high-risk exposures from patient care activities when possible, and notifying patients that have been exposed to a positive HCW, as appropriate.

Exposure risk assessment should occur as soon as possible after contact with a confirmed case is recognized. The assessment must be conducted through an active process that includes an HCW interview. Passive reporting (e.g., use of log sheet) of PPE adherence and breaches by HCW should be used only if resources are not available to actively assess exposure risk.

[Responding to and Monitoring COVID-19 Exposures in Health Care Settings \(www.health.state.mn.us/diseases/coronavirus/hcp/response.pdf\)](https://www.health.state.mn.us/diseases/coronavirus/hcp/response.pdf) has more information and includes a sample risk assessment table.

Management of exposed fully vaccinated health care workers

Fully vaccinated HCW who remain asymptomatic do not need to quarantine from work or the community for the 14 days following a COVID-19 exposure. HCW are considered fully vaccinated two weeks after their final COVID-19 vaccine dose (two doses in a two-dose series or one dose in a one-dose series).

HCW who have had a high-risk exposure should be proactively tested post-exposure (e.g., between days 3-5 post-exposure). If signs or symptoms develop at any time in the 14 days following exposure, HCW should seek testing and isolate at home.

Management of exposed unvaccinated health care workers

Each health care facility will be expected to ensure that unvaccinated HCW who have been exposed to COVID-19 at work have the capability to monitor their health status (e.g., access to a thermometer). COVID-19 testing is recommended after exposure, around day 3-5, and facilities should assist in coordinating specimen collection, unless the health care worker chooses to get care elsewhere.

Low-risk exposures

Provide HCW with the MDH low-risk exposure summary sheet.

Explain self-monitoring of their health for 14 days following COVID-19 exposure.

If HCW develops fever or respiratory symptoms, they should be excluded from work immediately, tested for COVID-19, and follow appropriate MDH recommendations for ill health care workers with confirmed or suspected COVID-19.

[COVID-19 Recommendations for Health Care Workers
\(\[www.health.state.mn.us/diseases/coronavirus/hcp/hcwrecs.pdf\]\(https://www.health.state.mn.us/diseases/coronavirus/hcp/hcwrecs.pdf\)\)](https://www.health.state.mn.us/diseases/coronavirus/hcp/hcwrecs.pdf)

High-risk exposures

Give HCW the MDH high-risk exposure summary sheet.

Exclude HCW from direct patient-care activities for 14 days following their high-risk exposure.

- If excluding the HCW would result in significant staffing shortages, the HCW can be asked to return to work before 14 days has passed, as long as:
 - The HCW does not have any symptoms consistent with COVID-19 AND
 - The HCW wears a medical-grade facemask at all times when within 6 feet of any other person.

POTENTIAL EXPOSURE TO COVID-19 IN OUTPATIENT SETTINGS EXCLUDING EMERGENCY DEPARTMENTS (ED)

Inform HCW of employment protections for a person who is staying away from work because of a health department recommendation. It is the employee's right to make a choice to return to work if they do not have symptoms. According to [Minnesota Statutes: 144.4196 Employee Protection \(www.revisor.mn.gov/statutes/cite/144.4196\)](http://www.revisor.mn.gov/statutes/cite/144.4196), employers cannot discharge, discipline, threaten, penalize, or otherwise discriminate in the work terms, conditions, or privileges of employment.

Recommend voluntary HCW quarantine from work for 14 days following high-risk COVID-19 exposure but may return to community activities based on the quarantine options outlined in the [Quarantine Guidance for COVID-19 \(www.health.state.mn.us/diseases/coronavirus/quarguide.pdf\)](http://www.health.state.mn.us/diseases/coronavirus/quarguide.pdf).

If HCW develops fever or respiratory symptoms, they should be excluded from work immediately, tested for COVID-19, and should follow appropriate MDH recommendations for ill health care workers with confirmed or suspected COVID-19.

[COVID-19 Recommendations for Health Care Workers \(www.health.state.mn.us/diseases/coronavirus/hcp/hcwrecs.pdf\)](http://www.health.state.mn.us/diseases/coronavirus/hcp/hcwrecs.pdf)

Patient notification

Outpatient facilities are required to investigate recognized patient exposures to positive HCW. Anyone with prolonged close contact (within 6 feet for at least 15 minutes) is considered exposed if that contact occurred beginning two days after the positive HCW had known exposure to a confirmed COVID-19 case or two days before their illness started onset, or if asymptomatic, two days before the specimen collection date. Notify patients of the exposure situation according to facility protocols.



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Contact health.communications@state.mn.us to request an alternate format.