

Joint Guidance for the Florida Fire Service RETURN TO WORK PROCEDURES FOR SARS-COV-2 INFECTED PERSONNEL

SUBSTANTIAL CHANGES IN THIS UPDATE INCLUDE:

- Except for rare situations, a test-based strategy is no longer recommended by <u>CDC</u> to determine when to allow
 personnel to return to work because, in the majority of cases, it results in excluding personnel from work who
 continue to shed detectable SARS-CoV-2 RNA but **ARE NO LONGER INFECTIOUS**. See <u>CDC Decision Memo here</u>
- For personnel with severe to critical illness or who are severely immunocompromised, the recommended duration for work exclusion has been extended to 20 days after symptom onset (or, for asymptomatic severely immunocompromised personnel, 20 days after their initial positive SARS-CoV-2 diagnostic test).

DECISIONS ABOUT RETURN TO WORK FOR PERSONNEL WITH SARS-COV-2 INFECTION SHOULD BE MADE IN CONSULTATION WITH YOUR MEDICAL DIRECTOR AND/OR DEPARTMENT PHYSICIAN. IN GENERAL, A SYMPTOM-BASED STRATEGY SHOULD BE USED AS DESCRIBED BELOW. THE TIME PERIOD USED DEPENDS ON THE EMPLOYEE'S SEVERITY OF ILLNESS AND IF THEY ARE SEVERELY IMMUNOCOMPROMISED.

SYMPTOM-BASED STRATEGY:

Personnel with mild to moderate illness who ARE NOT severely immunocompromised:

- At least 10 days have passed since symptoms first appeared and
- At least 24 hours have passed since last fever without the use of fever-reducing medications and
- Symptoms (e.g., cough, shortness of breath) have improved
- Note: Personnel who are not severely immunocompromised and were asymptomatic throughout their infection may return to work when at least 10 days have passed since the date of their first positive viral diagnostic test.

Personnel with severe to critical illness OR who ARE severely immunocompromised:

- At least 20 days have passed since symptoms first appeared and
- At least 24 hours have passed since last fever without the use of fever-reducing medications and
- Symptoms (e.g., cough, shortness of breath) have improved
- Note: Personnel who are severely immunocompromised but who were asymptomatic throughout their infection may return to work when at least 20 days have passed since the date of their first positive viral diagnostic test.

TEST-BASED STRATEGY:

A test-based strategy could be considered for some personnel, in consultation with local infectious disease experts, if concerns exist for the employee being infectious for more than 20 days.

Personnel who ARE symptomatic:

- Resolution of fever without the use of fever-reducing medications and
- Improvement in symptoms (e.g., cough, shortness of breath), and
- Results are negative from at least two consecutive respiratory specimens collected ≥24 hours apart (total of two negative specimens) tested using an FDA-authorized molecular viral assay to detect SARS-CoV-2 RNA.

Personnel who ARE NOT symptomatic:

• Results are negative from at least two consecutive respiratory specimens collected ≥24 hours apart (total of two negative specimens) tested using an FDA-authorized molecular viral assay to detect SARS-CoV-2 RNA.

After returning to work, personnel should: Wear a facemask instead of a cloth face covering for source control at all times while in the station/apparatus until all symptoms are completely resolved. After this time period, these personnel should revert to their Department policy regarding universal source control during the pandemic. Facemasks and cloth face coverings DO NOT replace the need to wear PPE when providing patient care.