

## **COVID-19**

### **What to do if you were potentially exposed to someone with confirmed coronavirus disease**

*If you think you have been exposed to someone with laboratory-confirmed COVID-19, follow the steps below to monitor your health and avoid spreading the disease to others if you get sick.*

#### **What is coronavirus disease 2019 (COVID-19)?**

COVID-19 is a respiratory disease caused by a new virus called SARS-CoV-2. The most common symptoms of the disease are fever, cough, and shortness of breath. Most people with COVID-19 will have mild disease but some people will get sicker and may need to be hospitalized.

#### **How do I know if I was exposed?**

You generally need to be in close contact with a sick person to get infected. Close contact includes:

- Living in the same household as a sick person with COVID-19,
- Caring for a sick person with COVID-19,
- Being within 6 feet of a sick person with COVID-19 for 15 minutes or more; OR
- Being in direct contact with secretions from a sick person with COVID-19 (e.g., being coughed on, kissing, sharing utensils, etc.). If you have not been in close contact with a sick person with COVID-19, you are at low risk for infection. You can continue to go to work and school, but should monitor your health for 14 days since the contact and stay away from others if you get sick.

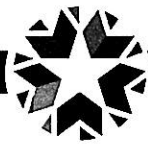
#### **What should I do if I was in close contact with someone with COVID-19 while they were ill but I am not sick?**

You should monitor your health for fever, cough and shortness of breath during the 14 days after the last day you were in close contact with the sick person with COVID-19. You should not go to work or school, and should avoid public places for 14 days.

#### **What should I do if I was in close contact with someone with COVID-19 and get sick?**

If you get sick with fever, cough or shortness of breath (even if your symptoms are very mild), you likely have COVID-19. You should isolate yourself at home and away from other people. If you have any of the following conditions that may increase your risk for a serious infection—age 60 years or older, are pregnant, or have medical conditions—contact your physician's office and tell them that you were exposed to someone with COVID-19. They may want to monitor your health more closely or test you for COVID-19.

If you do not have a high-risk condition but want medical advice, call your healthcare provider and tell them you were exposed to someone with COVID-19. Your healthcare provider can help you decide if you need to be evaluated in person or tested. There are currently no medications to treat COVID-19. If you have a medical emergency and need to call 911, notify the dispatch personnel that you may have been exposed to COVID-19. If possible, put on a facemask before emergency medical services arrive or immediately after they arrive.



See additional guidance for confirmed or suspected COVID-19 at [coronavirus.health.ok.gov](https://coronavirus.health.ok.gov)

**Discontinuing home isolation for sick contacts of COVID-19 patients, discontinue home isolation under the following conditions:**

- At least 24 hours have passed since recovery defined as resolution of fever without the use of fever-reducing medications and improvement in symptoms; AND,
- At least 10 days have passed since symptoms first appeared.



## **COVID-19: Contact Notification**

You have been identified as a contact to a confirmed case of COVID-19. As a contact to case of COVID-19, the Oklahoma State Department of Health (OSDH) and the local County Health Department recommend that you comply with the measures described below depending on your level of risk. These recommendations should be followed for **14 days after the last contact with the COVID-19 case** while they are considered infectious.

COVID-19 cases are considered infectious until they have met **ALL** the following criteria:

- At least **24 hours** have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications, **and**;
- Improvement in symptoms, **and**;
- At least **10 days** have passed *since symptoms first appeared*.

The level of risk of the ill person transmitting COVID-19 to you depends on the type and length of your interaction with them. The table on the next page outlines the risk level and follow-up recommendations for each contact type.

Since you are a contact to a COVID-19 case, you should:

- Review the table below and follow the “Recommended Precautions for the Public”.
- Notify the county health department where the case resides if you develop symptoms within the 14-day monitoring period after your last contact with the COVID-19 case while they were infectious.
- Follow the instructions in the *Home Care Guidance* and *Release from Isolation Guidance* documents included in this packet if you develop respiratory illness.

If you have any questions about the risk levels, please reach out to your local county health department.



Person	Exposure to	Recommended Precautions for the Public
<ul style="list-style-type: none"> <li>Household member</li> <li>Intimate partner</li> <li>Individual providing care in a household without using recommended infection control recommendations</li> <li>Individual who has had close contact (&lt; 6 feet) for a prolonged period of time (≥ 15 minutes)</li> </ul>	<ul style="list-style-type: none"> <li>Person with symptomatic COVID-19 during period from 48 hours before symptoms onset until person meets criteria for discontinuing home isolation (can be laboratory-confirmed or a clinically compatible illness in a state with widespread community transmission)</li> </ul>	<ul style="list-style-type: none"> <li>Stay home until 14 days after the last exposure and maintain social distance (at least 6 feet) from others at all times</li> <li>Self-monitor for symptoms:               <ul style="list-style-type: none"> <li>Check temperature twice a day</li> <li>Watch for fever (100.4°F or higher), cough, or shortness of breath</li> </ul> </li> <li>Avoid contact with people at higher risk for severe illness (unless they live in the same household and had same exposure)</li> </ul>
<p>All U.S. residents, other than those with a known risk exposure</p>	<ul style="list-style-type: none"> <li>Possible unrecognized COVID-19 exposures in U.S. communities</li> </ul>	<ul style="list-style-type: none"> <li>Be alert for symptoms               <ul style="list-style-type: none"> <li>Watch for fever (100.4°F or higher), cough, or shortness of breath</li> <li>Take temperature if symptoms develop.</li> </ul> </li> <li>Practice social distancing               <ul style="list-style-type: none"> <li>Maintain 6 feet distance from others</li> <li>Stay out of crowded places</li> </ul> </li> <li>Follow CDC Guidance if symptoms develop</li> </ul>



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## COVID-19 Home Care Guidance

The following instructions are for people who have or might have COVID-19 and their families or caregivers:

### INFORMATION FOR COVID-19 PATIENTS WHO ARE NOT HOSPITALIZED:

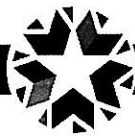
1. **Stay home.** Do not leave your home, except to get medical care, until your healthcare provider says it is OK. Do not go to work, school, or public areas, and do not use public transportation or taxis.
2. **Separate yourself from other people in your home.** As much as possible, stay in a different room from other people in your home. If possible, use a separate bathroom. If you must be in the same room as other people, wear a facemask to prevent spreading germs to others.
3. **Before you visit your doctors, let them know.** Call ahead before visiting your doctor so they can prepare for your visit and know that you may have COVID-19.
4. **Cover coughs and sneezes.** To prevent spreading germs to others, when coughing or sneezing cover your mouth and nose with a tissue or your sleeve. Throw used tissues in a lined trash can, and immediately wash hands with soap and water.
5. **Keep hands clean.** Wash hands often and thoroughly with soap and water for at least 20 seconds. Use alcohol-based hand sanitizer if soap and water are not available and if hands are not visibly dirty. Avoid touching eyes, nose, and mouth with unwashed hands.
6. **Avoid sharing household items.** Do not share dishes, drinking glasses, cups, eating utensils, towels, bedding, or other items with other people in the home. These items should be washed thoroughly after use with soap and warm water.
7. **Monitor illness.** If illness gets worse (trouble breathing, pain in chest), get medical care right away. Before, call your healthcare provider and tell them that you have, or might have, COVID-19 infection. This will help your provider to take steps to keep other people from getting infected.

These recommendations should be followed until your tests show that you do not have COVID-19, or, 10 days after your fever goes away if your tests show that you have been infected.

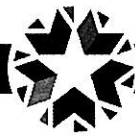
### INFORMATION FOR CAREGIVERS AND HOUSEHOLD MEMBERS OF COVID-19 PATIENTS:

People who live with or provide home care for COVID-19 patients should:

1. Limit visitors to only people caring for the patient.
  - a. As much as possible, anyone who is not caring for the patient should stay in another home or stay in other rooms. They should also use a separate bathroom if possible.
  - b. Keep elderly people and those who have weak immune systems or chronic health conditions away



- from the person. This includes people with diabetes, chronic heart or lung or kidney conditions.
2. **Make sure that shared spaces in the home have good air flow.** Open windows or use an air conditioner if possible.
  3. **Wash hands.** People in the home should wash their hands often and thoroughly with soap and water for at least 20 seconds, especially before eating or after using the bathroom. Use an alcohol-based hand sanitizer if soap and water are not available and if your hands are not visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.
  4. **Wear disposable personal protective equipment (PPE)** e.g, facemask, gown, and gloves when you touch or have contact with the patient’s blood, body fluids and/or secretions, such as sweat, saliva, sputum, nasal mucus, vomit, urine, or diarrhea. Throw these away after use and do not reuse. Wash hands thoroughly and immediately after removing your facemask, gown, and gloves.
  5. **Avoid sharing household items.** Do not share dishes, drinking glasses, cups, eating utensils, towels, bedding, or other items the patient. Follow the cleaning instructions below.
  6. **Clean all “high-touch” surfaces,** such as counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables, every day using household disinfectants. Also, clean any surfaces that may have blood, body fluids and/ or secretions or excretions on them.
  7. **Cleaning Instructions**
    - a. Follow the recommendations provided on cleaning product labels including precautions you should take when applying the product, such as wearing gloves or aprons and making sure you have good ventilation during use of the product.
    - b. Use a diluted bleach solution or a household disinfectant with a label that says “EPA-approved.” To make a bleach solution at home, add 1 tablespoon of bleach to 1 quart (4 cups) of water. For a larger supply, add ¼ cup of bleach to 1 gallon (16 cups) of water.
    - c. Wash laundry thoroughly.
    - d. Immediately remove and wash clothes or bedding that have blood, body fluids and/or secretions or excretions on them.
    - e. Wear disposable gloves while handling soiled items. Wash your hands immediately after removing your gloves.
    - f. Read and follow directions on labels of laundry or clothing items and detergent. In general, wash and dry with the warmest temperatures recommended on the clothing label.
    - g. Place all used disposable gloves, gowns, facemasks, and other contaminated items in a lined container before disposing them with other household waste. Wash your hands immediately after handling these items.
  8. **Monitor the patient’s illness.** If they are getting sicker (trouble breathing, pain in chest), call their medical provider and tell the medical staff that the person has, or is being evaluated for, novel coronavirus infection. This will help the healthcare provider’s office take steps to keep other people from getting infected.
  9. It is important to note that caregivers and household members who do not follow these instructions when in close contact with the patient may be considered to be “close contacts” and should monitor their health. Below is information for close contacts.



**a. INFORMATION FOR CLOSE CONTACTS OF COVID-19 PATIENTS:**

- b. People who have had close contact with someone who is confirmed to have, or being evaluated for, COVID-19 should:

**10. Monitor your health.** Start from the day you first had close contact with the patient and continue for 14 days after you last had close contact with the person. Watch for these signs and symptoms:

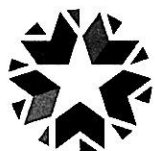
- a. Fever. Take your temperature twice a day.
- b. Coughing.
- c. Shortness of breath or trouble breathing.
- d. Other early symptoms to watch for are chills, body aches, sore throat, headache, diarrhea, nausea/vomiting, and runny nose.

**11.** If you develop fever or any of these symptoms, call your healthcare provider right away and let them know about being a close contact to a patient with COVID-19 so they can prepare for your visit. Ask your healthcare provider to call the local or state health department.

**12.** If after 14 days you do not have any symptoms, you can continue with your daily activities, such as going to work, school, or other public areas

For more information visit [cdc.gov/coronavirus/2019-ncov/index.html](https://www.cdc.gov/coronavirus/2019-ncov/index.html)





## RELEASE FROM ISOLATION GUIDANCE FOR COVID-19 CASES

For releasing symptomatic cases of COVID-19 from isolation, the Oklahoma State Department of Health (OSDH) and other local health departments in Oklahoma follow the Centers for Disease Control and Prevention's (CDC) guidance for release from isolation. Once you meet the criteria outlined in one of the strategies below, you are considered released from isolation.

Please note there are additional return to work practices and work restrictions for healthcare personnel. Refer to page 2 of this document for more details.

### Discontinuation of Isolation for Persons with COVID-19

(available at <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>)

**Symptomatic patients with COVID-19** should remain isolated until **either**:

#### ***Symptom-based strategy:***

- At least 24 hours have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in symptoms; **and**,
- At least 10 days have passed *since symptoms first appeared*.

#### ***Test-based strategy:***

- Resolution of fever without the use of fever-reducing medications, **and**;
- Improvement in respiratory symptoms (e.g., cough, shortness of breath), **and**;
- Negative results of an FDA EUA COVID-19 molecular assay for detection of SARS-CoV-2 from at least two consecutive respiratory specimens collected at least 24 hours apart (total of two negative specimens).

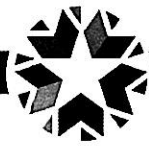
**NOTE:** *The symptom-based strategy is intended to replace the need for repeated testing.*

**Individuals with laboratory-confirmed COVID-19 who have not had any symptoms** may discontinue home isolation when at least 10 days have passed since the date of their first positive COVID-19 diagnostic test and have had no subsequent illness.

**Individuals with severe to critical illness or who are severely immunocompromised** are recommended to discontinue home isolation when at least 20 days have passed since their initial symptom onset date (or date of their first positive COVID-19 diagnostic test if asymptomatic), and after meeting other criteria for release from isolation).

(SEE PG 2 FOR ADDITIONAL GUIDANCE FOR HEALTHCARE PERSONNEL)





## Return to Work Criteria for Healthcare Personnel (HCP) with Suspected or Confirmed COVID-19 (available at <https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/hcp-return-work.html>)

Symptomatic HCP with suspected or confirmed COVID-19 should remain isolated until either:

### **Symptom-based strategy:**

- At least 24 hours have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in symptoms; **and**,
- At least 10 days have passed *since symptoms first appeared*.

### **Test-based strategy:**

- Resolution of fever without the use of fever-reducing medications, **and**;
- Improvement in respiratory symptoms (e.g., cough, shortness of breath), **and**;
- Negative results of an FDA EUA COVID-19 molecular assay for detection of SARS-CoV-2 from at least two consecutive respiratory specimens collected at least 24 hours apart (total of two negative specimens).

*Except in rare situations, a test-based strategy is no longer recommended to determine when to allow HCP to return to work.*

HCP with laboratory-confirmed COVID-19 who have not had **any** symptoms may discontinue home isolation when at least 10 days have passed since the date of their first positive COVID-19 diagnostic test and have had no subsequent illness.

HCP with severe to critical illness or who are severely immunocompromised are recommended to discontinue home isolation when at least 20 days have passed since their initial symptom onset date (or date of their first positive COVID-19 diagnostic test if asymptomatic), and after meeting other criteria for release from isolation).

## Return to Work Practices and Work Restrictions

After returning to work, HCP should:

- Wear a facemask at all times while in the healthcare facility until all symptoms are completely resolved or at baseline. A facemask instead of a cloth face covering should be used by these HCP for source control during this time period while in the facility. After this time period, these HCP should revert to their facility policy regarding universal source control during the pandemic.
  - A facemask for source control does not replace the need to wear an N95 or higher-level respirator (or other recommended PPE) when indicated, including when caring for patients with suspected or confirmed COVID-19.
- Adhere to hand hygiene, respiratory hygiene, and cough etiquette in CDC's interim infection control guidance (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 or worsen

