GEORGIA DEPARTMENT OF PUBLIC HEALTH

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Return to Work Guidance After COVID-19 Illness or Exposure for Persons Not Working in Healthcare Settings

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If assessing a healthcare worker, please review DPH Healthcare Worker Return to Work Guidance https://dph.georgia.gov/document/document/dph-return-work-guidance-03-26-2020/download

The following guidance should be used to make decisions about "return to work" for persons who **do not work in a healthcare setting**:

- with laboratory-confirmed COVID-19;
- who have suspected COVID-19 (e.g., developed symptoms of a respiratory infection [e.g., cough, shortness of breath, fever] but did not get tested for COVID-19 and have been exposed to a person with COVID-19 or live in an area with local or widespread transmission;
- who have been exposed to COVID-19 without appropriate personal protective equipment (PPE).

Decisions about "return to work" for persons with confirmed or suspected COVID-19 who do not work in a healthcare setting should be made in the context of local circumstances (community transmission, resource needs, etc.). Return to work recommendations are determined based on the status of the person's health currently.

- Symptomatic persons who do not work in a healthcare setting with confirmed COVID-19 or suspected COVID-19 can return to work after: *†
    - At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications AND improvement in respiratory symptoms (e.g., cough, shortness of breath); AND,
    - At least 10 days have passed *since symptoms first appeared*
- Asymptomatic persons who do not work in a healthcare setting with confirmed COVID-19 can return to work after: *†
    - At least 10 days have passed since the positive laboratory test and the person remains asymptomatic. This is 7 days after positive lab results plus 3 days of social distancing per CDC guidelines
    - Note, asymptomatic persons who test positive and later develop symptoms should follow the guidance for symptomatic persons above
- Asymptomatic persons who do not work in healthcare settings who have a known exposure to a person with COVID-19 without appropriate PPE can return to work after:
    - Their 14-day home quarantine period has ended, i.e. 14 days have passed since the last exposure without appropriate PPE (mask, eye cover or face shield, gloves. Gown and respirator (e.g., N95) should be used during aerosol generating procedures). For PPE guidance: https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html
    - If this person is tested for COVID-19 during the 14 day quarantine period, a negative test result would require the person to complete the 14 day period, and a

positive test would move the person into one of the above categories, based on whether they are still asymptomatic or have symptoms.

Return to Work Practices and Work Restrictions

Persons who are not healthcare workers who complete the above conditions and can return to work should:

- Wear a face covering if social distancing cannot be maintained in the workplace, per current CDC guidelines: https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html. Note: A facemask instead of a cloth face covering should be used by healthcare providers only. Cloth face coverings are appropriate for persons who do not work in a healthcare setting and are recommended by CDC to help prevent asymptomatic spread of COVID-19 in settings where social distancing cannot be practiced.
- 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.

CDC guidance for discontinuation of home isolation for persons with COVID-19 infection not in a healthcare setting can be used in conjunction with this guidance for returning to work and can be found at https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html

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* *DPH **DOES NOT** recommend using a test-based strategy for returning to work after COVID-19 infection for non-healthcare workers. Completing a test-based strategy is contingent upon the availability of ample testing supplies, laboratory capacity, and convenient access to testing and requires two samples taken at least 24 hours apart. If an employer requires the test-based strategy for return to work (which is discouraged by DPH), this should be done by a private physician through a commercial lab. The test-based strategy is not fulfilled by a single test, nor should it be used for screening of all persons returning to work.*

† *Although data are being gathered every day, the duration of viral shedding and the period of infectiousness for COVID-19 are not yet known. It is possible that SARS-CoV-2 RNA may be detectable in the upper or lower respiratory tract for weeks after illness onset, similar to infections with MERS-CoV and SARS-CoV. However, detection of viral RNA does not necessarily mean that infectious virus is present. There are reports of asymptomatic infections (detection of virus with no development of symptoms) and pre-symptomatic infections (detection of virus prior to development of symptoms) with SARS-CoV-2, but their role in transmission is not yet known. Therefore, if the test-based strategy is used, it may be difficult to interpret a positive result after completion of isolation as it may not indicate infectiousness to others.*