

2019 Novel Coronavirus (COVID-19) Frequently Asked Questions (FAQs)

Effective: March 13, 2020

BACKGROUND

1. What is Coronavirus?

Coronaviruses (CoV) are a large family of viruses that cause illness ranging from the common cold to more severe diseases.

2. What is 2019 Novel Coronavirus (COVID-19)?

The 2019-nCoV is a new (novel) type of coronavirus (named COVID-19) that was first detected in Wuhan City, Hubei Province, China and which has now been detected in almost 70 locations internationally, including in the United States. Person-to-person spread of the COVID-19 virus has also been seen among close contacts of returned travelers from Wuhan and other locations, and limited community transmission has been identified in the United States. “Community Spread” is defined as people who become infected and it is not known how or where they became infected

3. What is the situation in the United States?

Imported cases of COVID-19 in travelers have been detected in the U.S. Person-to-person spread of the COVID-19 virus was first reported among close contacts of returned travelers from Wuhan and other areas of infection.

The Centers for Disease Control (CDC) reports that community spread of the virus that causes COVID-19 has now reached most of the United States, including Ohio and Georgia, which are the states in which the Preferred Vascular Group (PVG) clinical sites are located.

4. How does transmission occur?

Spread from person-to-person happens among close contacts (typically about six feet or less). Person-to-person spread is thought to occur mainly via respiratory droplets produced when an infected person coughs or sneezes, similar to how influenza and other respiratory pathogens spread. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

Transmission from infected surfaces by touch and transfer to mouth, nose, and eyes is possible.

5. What strategies should I take to avoid contracting COVID-19?

Practice good hand hygiene. Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom, before eating, and after blowing your nose, coughing, or sneezing. If soap and water are not readily available, use a hand sanitizer. We recommend hand sanitizer that contains 60-70 percent alcohol. Always wash your hands with soap and water if your hands are visibly dirty. Also, clean frequently touched surfaces and objects regularly.

6. What are the symptoms?

CDC believes at this time that symptoms of COVID-19 may appear in as few as 2 days or up to 14 after exposure. There is a spectrum of symptoms that may include fever (≥ 100.4 degrees Fahrenheit), coughing, shortness of breath, and abdominal pain, and diarrhea.

For confirmed COVID-19 infections, reported illnesses have ranged from people with little to no symptoms to people being severely ill and in some cases death. Those over 60 and those with underlying medical conditions are at greater risk.

7. How is COVID-19 treated?

At present, treatment is supportive. Potential antiviral agents are undergoing testing and vaccine agents are under development. However, it is unknown when these will be available.

8. How is COVID-19 infection diagnosed?

Testing includes samples from the upper respiratory tract (i.e. nasopharyngeal swab) and lower respiratory tract (i.e., sputum). At this point in time, diagnostics are only available at the CDC, hospitals, and some state health departments. A significant increase in testing availability and access is being aggressively developed in the U.S..

WORKPLACE ISSUES

9. How can I protect other employees, patients, and customers?

As noted above, practice good hand hygiene and clean frequently touched surfaces and objects often. For patient-facing employees, practice strict adherence to PVG infection control policies and procedures such as hand hygiene with soap and water, wearing personal protective equipment (PPE), and cleaning/disinfection of surfaces. Avoid touching your eyes, nose, and mouth with unwashed hands.

10. Who should I notify if I suspect a person has COVID-19?

If you have been diagnosed with COVID-19 or suspect COVID-19 based on symptoms **and** recent travel or contact with someone who has traveled to an affected area with widespread and/or sustained community transmission of the COVID-19 virus, notify your direct Supervisor, Lynn Blackwell, Director of Compliance and the local state department of health. At present, areas identified as high risk are China, Iran, Italy, South Korea, and Japan. Please note that the global situation is rapidly evolving, and information is current as of guidance posted **March 12, 2020**. The CDC website provides a list of risk assessment by country: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>.

11. What if an employee cannot report to work because he or she is mandated by state or federal officials to quarantine?

If an employee cannot report to work because of mandate by federal or state officials to quarantine, the employee must adhere to federal or state guidance.

Such staff members **must** notify their supervisor and contact Lynn Blackwell, Director of Compliance. Your call will be escalated to the appropriate individual for further guidance. If you have questions or concerns regarding not reporting for work, please contact

In such circumstances, whenever possible, the employee should work remotely. If the employee cannot work remotely because of the nature of his or her duties, as reasonably determined by PVG, the employee will be eligible to receive his or her base pay during such period when the employee is quarantined. If the employee is eligible for short term disability (STD) insurance, the employee may be required to coordinate such pay with the employee's STD benefit. Note that if the employee

becomes ill during such quarantine period, the employee **must** contact his/her supervisor and the Director of Compliance.

12. What if an employee cannot report to work because PVG requests that the employee self-isolate?

If PVG directs the employee not to report to work, whenever possible the employee should work remotely. If the employee cannot work remotely because of the nature of his or her duties, as reasonably determined by PVG, the employee will be eligible to receive his or her base pay during such period when PVG requests that the employee self-isolate. If the employee is eligible for short term disability (STD) insurance, the employee may be required to coordinate such pay with the employee's STD benefit. Note that if the employee becomes ill during such quarantine period, the employee should contact his/her supervisor and the Director of Compliance.

13. What if the employee cannot report to work because he or she has COVID- 19 or COVID-19 like symptoms?

If an employee is ill and indicates that he or she cannot report to work, the employee should follow the typical process associated with requesting time away from work due to an illness. If the employee anticipates that he or she will be out of work for five days or more, the employee should contact his/her supervisor and the Director of Compliance. Pay while on a medical leave or while out of work due to illness is governed by PVG's existing policies and procedures related to such benefits.

14. What if an employee cannot report to work because the employee is caring for a family member who has COVID-19 or is otherwise ill?

If the employee has been exposed to the COVID-19 virus, the employee will likely be mandated to self-isolate per state or government direction. In such case, the employee should follow the procedure noted above for such quarantine. If employee is unable to report to work because he or she is caring for a family member but has no reason to believe he or she has been exposed to the COVID- 19 virus, the employee should follow the typical process associated with requesting time away from work. Pay while out of work is governed by PVG's existing policies and procedures related to such benefits.

15. Can employees travel domestically for work?

While domestic travel is not restricted, PVG discourages all non-essential domestic travel. Please consider using a call or video meeting to address the need.

While domestic travel is not restricted, PVG requests that employees use judgment in traveling only when such travel is absolutely necessary and consider alternative options like video conferences.

16. What if an employee travels internationally for personal reasons?

Any staff member who has traveled from **any international location** (including Mexico, Canada, and the Caribbean) within the past 14 days should not attend work and should "self-isolate" at home with daily temperature monitoring until 14 days following their departure from the international location have passed. If an employee travels between countries directly adjacent to the United States via personal vehicle and for personal travel (not work related), such employee does not need to self-isolate or remain out of work unless symptomatic of respiratory illness (as otherwise described in this guidance).

Such staff member should also contact his/her supervisor and the Director of Compliance. If you have infectious disease related questions or concerns, please direct them to the Director of Compliance.

Please note that PVG reserves the right to request documentation evidencing such international travel.

Since PVG is directing the employee not to report to work in such circumstances, whenever possible the employee should work remotely. If the employee is eligible for short term disability (STD) insurance, the employee may be required to coordinate such pay with the employee's STD benefit. If the employee becomes ill during such quarantine period, the employee should contact his/her supervisor and the Director of Compliance.

17. What if an employee travels domestically for personal reasons?

Personal domestic travel is not restricted and will not result in any required self-isolation period.

18. Can I ask an employee where he or she is traveling during PTO?

Yes, under the current circumstances it is reasonable to inquire about where an employee is traveling during time away from work in order to plan for potential staffing needs. You may also advise any employees traveling internationally that upon return to work such employees will be required to self-isolate for 14 days as noted above.

19. Can I ask an employee for a doctor's note and/or release to return to work when he or she returns from being out sick?

If an employee has been on a leave of absence, the Executive Vice President will address any necessary documents associated with an employee's return to work. In other circumstances, generally, you should not request a doctor's note or release to return to work. Note that the CDC recommends that employers not require a healthcare provider's note for employees who are sick with acute respiratory illness to validate their illness or to return to work, as healthcare provider offices may be extremely busy and not able to provide such documentation in a timely way.

PATIENT SERVICES COORDINATORS & SCHEDULERS

20. During the scheduling and confirmation process, please complete COVID- 19 Travel Alert Screening Form. Identify patients before arrival to the facility.

The following questions will be asked:

- a. Has the patient traveled from a high-risk area within the last 14 days?
- b. Has the patient been in contact with a person with a laboratory confirmed diagnosis of COVID-19 within the last 14 days?
- c. Does the patient have any of the following symptoms:
 - i. Fever \geq 100.4
 - ii. Cough
 - iii. Shortness of Breath

21. What if the patient answers yes to any of the above questions?

- a. Follow the COVID-19 Algorithm
- b. Contact their referring health care provider, and the local and state health departments for further instructions. State health departments that have identified a PUI (Person Under Investigation) should immediately contact CDC's Emergency Operations Center (EOC) at 770-488-7100
- c. Notify the Chief Medical Officer. He will make the decision if the patient should be seen or not.
- d. Sign and date the form, upload the form to patient's chart to ensure documentation has been made regarding notification.

22. Why do I have to complete this form?

The form ensures we have safeguards in place for the health of our employees and patients. COVID-19 Health Screening Form helps to mitigate our risk to the community.

DIRECT PATIENT CARE PROVIDER ISSUES

23. What if a patient presents with flu-like symptoms? Please complete COVID- 19 Travel Alert Screening Form & follow COVID-10 Algorithm.

The following questions must be asked:

- a. Has the patient been in contact with a person with a laboratory confirmed diagnosis of COVID-19 within the last 14 days?
- b. Has the patient traveled from a high-risk area within the last 14 days?
- c. Does the patient have any of the following symptoms:
 - i. Fever \geq 100.4
 - ii. Cough
 - iii. Shortness of Breath

If the patient answers yes to any of the above, identify patients **immediately upon arrival to the facility**. Ensure rapid triage and isolation of patients with symptoms suspected of COVID-19 or other respiratory infection.

All locations treating patients should have supplies for respiratory hygiene and cough etiquette, including formulary alcohol-based hand sanitizer (ABHS), tissues, no touch receptacles for disposal, and facemasks available in facility lobbies or other waiting rooms. Patients who have respiratory symptoms should wear a surgical mask as part of standard infection precautions.

If a patient presents with flu-like symptoms (fever (≥ 100.4 degrees Fahrenheit), cough or other respiratory symptoms):

1. Staff will first don PPE including gown, gloves, face shield, and mask. N95 respirator face masks are preferred but may be in short supply due to worldwide demand (*currently on backorder*). It should be noted that a randomized trial and a meta-analysis of several trials found no additional protection from respiratory infection with an N95 respirator face mask compared with a surgical mask.
2. Place a surgical mask over the nose and mouth of the patient.
3. If the answer to either 23a, 23b or 23c is "yes", do the following:
 - Explain to the patient that because of the symptoms and history the facility will be taking precautions to protect the other patients and staff from respiratory illness.
 - Ensure patients with symptoms of suspected COVID-19 or other respiratory illness are not allowed to wait among other patients in the facility. Escort the patient to an exam room or other location with a door.
 - Document patient response to questions in the pre-treatment assessment.
 - Maintain a list of all healthcare personnel or patients who have contacted the patient with symptoms of suspected COVID-19 or other respiratory illness.
 - Notify the patient's referring physician about the clinical situation
 - Arrange for further evaluation of the patient:
 - Notify the local Department of Health (DOH) and ask for guidance about transfer of the patient for evaluation or
 - If the DOH is not available or does not respond within one hour, transfer the patient to the local emergency room.

24. What PPE is required for staff caring for a patient suspected or confirmed to have COVID-19?

A gown, gloves, and face shield and mask are required when caring for a patient with confirmed COVID-19. N95 respirator face masks are preferred but may be in short supply due to worldwide demand (currently on backorder). It should be noted that a randomized trial and a meta-analysis of several trials found no additional protection from respiratory infection with an N95 respirator face masks compared with a surgical mask.

A gown, gloves, and face shield and N95 respirator face mask are required when caring for a patient with known COVID-19.

All PVG facilities will receive N95 respirator face masks as a precautionary measure of preparedness against the COVID-19 virus. N95 respirator masks are only to be used by clinical staff in instances where a patient presents to the facility with known COVID-19-virus. Instructions for the fit testing will be sent at a later date. Designate a place in the facility where the N95 respirator face masks will be securely stored.

25. What should staff say to patients if they have questions?

Staff should assure patients that PVG is continually monitoring the COVID-19 situation and staying abreast of the latest information from the CDC and World Health Organization (WHO) related to screening for, preventing the transmission of and appropriate steps for known or suspected cases of COVID- 19.

26. What should we do if we have a patient requesting an appointment to a facility from an identified high-risk area?

PVG is not presently making appointments for any patients traveling to the United States from any international location.

Anyone requesting an exception to allow the admission of patients from international locations should contact the Chief Medical Officer or the Director of Compliance.

- If equipment must be used for more than one patient, clean and disinfect such equipment before use on another patient according to manufacturer's instructions.
- The room should undergo appropriate cleaning and surface disinfection after the appropriate time period has elapsed and before it is returned to routine use. Personnel who perform the terminal clean should wear a gown and gloves. A facemask and eye protection should be added if splashes or sprays during cleaning and disinfection activities are anticipated.
- Maintain a list of all healthcare personnel providing care to these patients.

27. How should we handle any information of a COVID-19 outbreak or a cluster in a facility like a nursing home, assisted living, or a skilled nursing facility where some of our patients reside?

If there is confirmed transmission of the COVID-19 virus in the community, like a nursing home, assisted living, or a skilled nursing facility, in addition to implementing the precautions described in this memo for patients who present with acute respiratory infection, facilities should also consult with the Director of Compliance.

28. How should we advise our patients to protect themselves against the COVID-19 virus and other respiratory illnesses?

CDC advises that people follow these tips to help prevent respiratory illnesses:

- Receive influenza vaccine annually.
- Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick with respiratory symptoms.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces.