Hospitals and other healthcare facilities are required to conduct routine emergency-preparedness training for infectious disease outbreaks, as well as generally maintain infectious disease policies and protocols. The arrival of Coronavirus (COVID-19) in the United States mandates a call to action for all facilities to review those policies, confirm policy enforcement, and ensure that infectious disease safeguards in place for healthcare providers (HCPs) are appropriately tailored to address and mitigate the risk of COVID-19 transmission.

The American Hospital Association has urged all HCPs to monitor the Centers for Disease Control and Prevention (CDC) and World Health Organization (WHO) websites for guidance on tailoring policy responses to the COVID-19 outbreak to the extent it spreads throughout the United States.[1] As of March 4, 2020, the CDC issued an update to its Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with COVID-19.[2] The CDC encourages HCPs “to report recognized exposures, regularly monitor themselves for fever and symptoms of respiratory infection and not report to work when ill.”[3] Given how easily COVID-19 may spread, the CDC encourages each healthcare facility to develop a “low threshold” plan that will address how it will screen its HCPs for symptoms, and establish quarantine and treatment protocols for HCPs with presumptive or confirmed COVID-19 diagnoses. This is particularly important for HCPs who are at high or medium risk of exposure to COVID-19. The CDC defines these exposure classes as follows:
**High-Risk Exposures:** HCPs who performed or were present in the room for procedures that generate aerosols or during which respiratory secretions are likely to be poorly controlled (e.g., cardiopulmonary resuscitation, intubation, extubation, bronchoscopy, nebulizer therapy, sputum induction) on patients with COVID-19 when the HCP’s eyes, nose, or mouth were not protected.

**Medium-Risk Exposures:** HCPs who had prolonged close contact with patients with COVID-19 where the HCP’s mucous membranes were exposed to material potentially infectious with the virus causing COVID-19. These scenarios involve interactions with symptomatic patients who were not wearing a face mask for source control. Because these exposures do not involve procedures that generate aerosols, they pose less risk than those described under high-risk exposures.[4]

Regardless of an HCP’s categorized exposure risk, healthcare facilities should adopt infectious disease policies requiring HCPs with signs or symptoms compatible with COVID-19 to report their symptoms and receive medical evaluation prior to returning to work,[5] and for HCPs in the high- and medium-risk exposure categories “to undergo active monitoring, including any restriction from work in any healthcare setting until 14 days after their last exposure.”[6]

The CDC also created the [Coronavirus Disease 2019 (COVID-19) Hospital Preparedness Assessment Tool](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html), which provides healthcare facilities with guidance on patient safety and infectious disease guidelines to implement in preparation for the arrival of COVID-19 patients.

Also on March 4, 2020, the Centers for Medicare & Medicaid Services (CMS) announced that “effective immediately and until further notice, State Survey Agencies and Accrediting Organizations will focus their facility inspections exclusively on issues relating to infection control and other serious health and safety threats, like allegations of abuse — beginning with nursing homes and hospitals.”[7]

Given the immediate concern and prioritization of infectious disease protocols by all major healthcare organizations and government agencies, it is imperative that all healthcare facilities review and refine their infectious disease, HCP safety, and patient safety protocols immediately, in order to show their commitment to minimizing the risk of the further spread of COVID-19 in the United States.

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