

**UNIVERSITY HEALTH (UH) OCCUPATIONAL HEALTH SERVICES**

UH Occ Health HH: (M-F 7:30am – 12pm & 1:00pm -2:30pm) Ph: 816-404-2770  
UH Occ Health LW: (M-F 7:30am – 12pm & 1:00pm -2:30pm) Ph: 816-404-8730

**I. COVID-19**

- A. Residents who are working at UH who develop symptoms of COVID-19 must call UH Occ Health Call Center to evaluate criteria including symptoms, exposure, etc.
- B. Protocol is followed for testing, repeat testing and time away from UH.
- C. A Resident could be out 5 days thru 8 days and, if there are other healthcare factors, it could be longer.
- D. UH Occ Health Call Center determines return to work date for the Resident.

**II. BLOOD AND BODY FLUID EXPOSURE (BBFE)**

- A. UH Occ Health will provide services and encourages Residents to obtain baseline testing in addition to the source patient immediately following the incident.
  - 1. Physician referral will occur at the initial visit with UH Occ Health, if needed (e.g., further evaluation of blood/body fluid exposure [BBFE] requiring continued medications).
- B. UH Occ Health is also able post-exposure to obtain copies of baseline results and a verbal report of the source patient's results for further follow up. The Resident's picture ID is required to obtain results.
- C. If UH Occ Health is not open, the Resident should report to the UH Emergency Department (ED) and follow up the next working day with UH Occ Health.
  - 1, Register in the ED for necessary treatment such as post-exposure prophylaxis (PEP) prescription and counseling, sutures, and/or other wound care.
  - 2. UH ED will prescribe 5 days of PEP.
  - 3. The remaining prescription can be filled onsite at Walgreen's Pharmacy.
- D. Medication, lab work, or any physician follow-up care following a BBFE is completed at UH.
- E. The Resident shall inform their supervisor during the injury/exposure and submit a [University of Missouri Report of Injury form](#) within 24 hours (reference below).

**III. EMERGENT TREATMENT FOR WORK-INCURRED INJURY OF ILLNESS**

- A. The Resident should be taken immediately to the UH ED for stabilization.

*Confirmed by Teresa Pearson - Director, Occupational Health & Wellness*

*Reference: <https://med.umkc.edu/documents/policies/gme/gme-employment/umkc-som-gme-work-incurred-injury-illness-policy.pdf>*

**SAINT LUKE'S HOSPITAL EMPLOYEE HEALTH SERVICES (EHS)**

Hours: M – F (excluding holidays) 7:30am – 3:30 pm Location: Medical Plaza 1, Suite 146

Phone: 816-932-3175 Illness Triage Line: 816-932-6177

Email: [DL-SLHS-EmployeeHealth@saint-lukes.org](mailto:DL-SLHS-EmployeeHealth@saint-lukes.org)

**I. COVID-19**

- A. Resident shall call SLH Triage Line if Resident has respiratory illness symptoms.
- B. Isolation is 3 (three) full days following first day of symptom onset or swab date (if no symptoms). Day 0 (zero) is the date of symptom onset or positive test after exposure (if there are no symptoms).  
The next full day is isolation period Day 1 (one).
- C. To return to work, must meet the Saint Luke requirements (e.g., fever free for 24 hours without medication, and improvement in other symptoms).
- D. A Level 3 mask or respirator must be worn for a full 7 (seven) days following a positive test.

**II. BLOODBORNE PATHOGEN EXPOSURE (BBPE) AND EMERGENT WORK-INCURRED INJURY OR ILLNESS**

- A. During EHS department hours, the Resident shall contact EHS to report an illness, injury or exposure the same day.
- B. After EHS department hours, weekends and holidays), the Resident shall notify the SLH House Supervisor in the event of a bloodborne pathogen exposure (BBPE) or work-incurred injury or illness. The Charge Nurse may help contact the SLH House Supervisor, as needed.
  - a. For a BBPE, the House Supervisor has laboratory orders and will provide follow-up instructions (i.e., electronic report).
  - b. The Resident shall follow-up with EHS on the next business day.

- C. For emergent work-incurred injury or illness, the Resident shall register in the SLH Emergency Department (ED).

For a BBPE, if post-exposure prophylaxis (PEP) is determined medically recommended by the prescribing provider (e.g., EHS Medical Director or ED licensed provider) then, the Resident will be provided up to 3 days of PEP doses. A prescription and/or remaining PEP doses are provided through UMKC's Workers' Compensation Occupational Medical provider.

- D. For injuries and exposures, within 24 hours or before the Resident shall complete an electronic, "Staff Injury/Exposure Report" within [Saint Luke's Incident Reporting System](#).
- E. The Resident shall inform their Saint Luke's supervisor of the injury/exposure and submit a [University of Missouri Report of Injury form](#) within 24 hours (reference below).
- F. EHS will:
  - a. gather any additional injury report information;
  - b. review laboratory results;
  - c. offer additional post-exposure counseling, as needed; and
  - d. recommend and provide additional follow-up instructions, as applicable.

*Confirmed by Stacy Smirl - Director, Occupational Health & Wellness*

Reference: <https://med.umkc.edu/documents/policies/gme/gme-employment/umkc-som-gme-work-incurred-injury-illness-policy.pdf>

## **CMH OCCUPATIONAL HEALTH SERVICES**

[OccupationalHealth@cmh.edu](mailto:OccupationalHealth@cmh.edu)

Occupational Health hours: 7:00am to 4:00pm M-F; on call 24 hours (816) 234-3179

After hours, immediately notify supervising physician AND

### **I. COVID-19**

- A. If the Resident has symptoms of COVID-19 and has an employee ID, call CMH COVID-19 Hotline (816) 802-1222.
- B. If the Resident tests positive for COVID-19, the Resident shall isolate for five full days from the start of symptoms, with earliest return the sixth day.
  - a. The Resident must meet these criteria before returning to work: fever free 24 hours without medication, and improvement in other symptoms.

### **II. BLOODBORNE PATHOGEN EXPOSURE**

- A. If a Resident sustains a bloodborne pathogen exposure, if post-exposure prophylaxis (PEP) is necessary, CMH Occupational Health will provide the first dose and evaluate the source patient and Resident for HIV, HCV and HBV, if warranted.
- B. Whether the source patient is positive for HIV, HCV or HBV may not be known if the source patient is "unknown," if the patient leaves before permission is obtained to draw blood (patient will not be asked to return), or if the patient or guardian refuses the bloodwork. This conversation is usually up to the CMH Charge Nurse. CM Occ Health will complete baseline HIV, HCV, and HBV testing for the Resident.
- C. Follow-up testing will be through the University work comp for the next steps.

### **III. EMERGENT WORK-INCURRED INJURY OR ILLNESS**

- A. If a Resident needs treatment for an injury or illness, contact CMH Occupational Health if it is open or page the CMH On-Call Health RN after-hours: (816) 458- 6825.

*Confirmed by Lorri Robertson, Workers' Compensation Program Manager*  
[OccupationalHealth@cmh.edu](mailto:OccupationalHealth@cmh.edu)

Reference: <https://med.umkc.edu/documents/policies/gme/gme-employment/umkc-som-gme-work-incurred-injury-illness-policy.pdf>

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**VETERAN'S AFFAIRS MEDICAL CENTER (VAMC) EMPLOYEE OCCUPATIONAL HEALTH**

VAMC Employee Health hours: 7:30am to 4:00pm M-F

After hours, immediately notify the supervising physician AND go to the VAMC ER.

Follow up with VAMC Employee Health the next day open.

**I. COVID-19**

EOH does not manage Covid / any other viral or respiratory illness for employees/Learners. KCVA EOH does not test anyone for the same. It is a personal illness.

Resident is to follow up with PCP for testing, treatment option, and restriction if any for any kind of viral symptoms and recommendation on return to work. Please Share limitations or restrictions with supervisor (CDC recommendation for HCP and COVID or other viral illness(such as the flu) is available on the CDC website).

Supervisors should encourage Residents with respiratory symptoms to always wear a face mask in the facility in areas with other persons after being cleared by their PCP/ student health to return to work. Residents returning to work following resolved symptoms from any respiratory infection should wear a face mask until a total of 10 days have elapsed since the start of these symptoms to avoid passing the infection along to coworkers and our veterans or 10 days have elapsed since exposure(if exposed to COVID).

Employees experiencing moderate to severe symptoms related to any illness, particularly those with fever greater than 100°F and/or gastrointestinal symptoms (vomiting/diarrhea), are advised not to return to work until they are free of these symptoms *and* fever without the use of medication for at least 24 hours.

All leave types or telework options are made by manager/ HR and the Resident. Employee Health is not involved in supervisor or HR decisions such as leave type or telework, non-standard work or other options while away from work site.

[Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2 | COVID-19 | CDC](#)

Find CDC's guidance on assessing, monitoring, and restricting risk for those who work in healthcare.

**II. BLOODBORNE PATHOGEN EXPOSURE**

- A. The Resident shall contact VAMC Employee Health, if open, or go to the VAMC ER for a bloodborne pathogen exposure or emergent treatment of an injury or illness.
- B. For a bloodborne pathogen exposure, if post-exposure prophylaxis (PEP) is necessary, VAMC will provide 28 days of PEP therapy if it is a high-risk exposure, or the patient is known to have HIV. Baseline labs are turned around quickly for the Resident and source patient.
- C. When a health professions trainee (HPT) has a bloodborne pathogen exposure, EOH may provide the initial evaluation and treatment (if indicated), given the emergent nature. The HPT should consult with the local designated education officer (DEO) or academic affiliate office for follow up care and to ensure compliance with the HPT's health care training program requirements.

*Confirmed by Dolly Cherian – APRN-BC – Employee Occupational Health*

*Reference:* <https://med.umkc.edu/documents/policies/gme/gme-employment/umkc-som-gme-work-incurred-injury-illness-policy.pdf>