PROCEDURES FOR RESEARCH STAFF OR STUDENTS WHO MAY HAVE BEEN EXPOSED TO OR DEVELOP SYMPTOMS CONSISTENT WITH COVID-19

A. IF YOU THINK YOU MAY HAVE BEEN EXPOSED TO COVID-19 AND/OR IF YOU DEVELOP A FEVER (>100.4°F) AND FLU-LIKE SYMPTOMS, SUCH AS COUGH OR DIFFICULTY BREATHING, IMMEDIATELY CALL YOUR HEALTH CARE PROVIDER AND STAY HOME
   a. Additional information from the Chicago Department of Public Health (CDPH) for persons potentially exposed to COVID-19 can be found in APPENDIX A of this guidance document.

B. IF YOU DEVELOP RESPIRATORY SYMPTOMS WHILE AT WORK, RETURN TO HOME IMMEDIATELY, CALL YOUR HEALTH CARE PROVIDER AND STAY HOME.

C. IF YOU HAVE BEEN TESTED AND DIAGNOSED WITH COVID-19, YOU SHOULD IMMEDIATELY NOTIFY YOUR SUPERVISOR OR PRINCIPAL INVESTIGATOR;
   a. Additional information from the Chicago Department of Public Health (CDPH) for persons with confirmed or suspected COVID-19 can be found in APPENDIX B of this guidance document.
   b. Your supervisor or principal investigator should immediately notify his/her department chair, and the UChicago COVID-19 Hotline at 1-773-795-5374 or at coronavirusinfo@uchicago.edu.
      i. Your healthcare provider will contact the Chicago or appropriate County and Illinois Departments of Public Health (CDPH/IDPH);
         1. The CDPH (https://www.chicago.gov/city/en/sites/covid-19/home.html), appropriate County, and/or IDPH (https://www.dph.illinois.gov/covid19) may follow-up with you to conduct an epidemiological investigation;
         2. Follow CDPH/County/IDPH instructions; be prepared for the following additional potential CDPH/County/IDPH actions:
            a. Persons with whom you have had contact will be instructed to self-isolate, likely for 14 days, and self-monitor for flu-like symptoms;
            b. Closure of your work area for decontamination; this order for closure may extend beyond your immediate work area to potentially include adjacent labs, the entire floor on which you work, elevators and stairwells, or the entire building in which you work;
      ii. The Office of Research Safety (ORS) will notify the Provost, your Divisional Dean, the Vice-Provost for Research, UChicago Medicine Infection Control, the Chair of your department and the Office of Emergency Management (coronavirusinfo@uchicago.edu).
         1. Subsequent communications to the UChicago community will be led by the Office of the Provost;
         2. ORS will consult with University Risk Management, Facilities Services and/or the Physical Plant, depending on whether you work in the BSD or PSD/PME and will provide recommendations on decontamination, and specifically within effected laboratory areas (see APPENDIX D);
         3. ORS will work with Risk Management, facilities staff to procure and monitor the services of professionals that can provide both large-space and laboratory area decontamination procedures. In some situations (e.g., vivaria, clean rooms, Cyclotron) internal organizations or professionals may be the most appropriate group to complete decontamination procedures;
         4. ORS will work with principal investigators and laboratory safety contacts from areas affected by the decontamination activities to preserve research materials and will consult on steps to be taken to ramp-down or halt research activities, as well as on steps for reinitiating research activities.
      iii. See APPENDIX C for a graphic depicting the procedures described above.
PROCEDURES FOR RESEARCH STAFF OR STUDENTS WHO MAY HAVE BEEN EXPOSED TO OR DEVELOP SYMPTOMS CONSISTENT WITH COVID-19

APPENDIX A

COVID-19: What to do if you were potentially exposed to someone with confirmed coronavirus disease 2019

This version was released on 03/13/2020. It may be updated with new guidance. Please visit www.chicago.gov/coronavirus to find the latest version.

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 that can spread from person to person. The most common symptoms of the disease are fever, cough, and difficulty breathing. Most people with COVID-19 will have mild disease but some people will get sicker and may need to be hospitalized.

Who is at higher risk of severe illness?
Those at higher risk include:
• People over 60 years of age. The risk increases significantly thereafter and escalates with age, with persons over age 80 in the highest risk category.
• People, regardless of age, with underlying health conditions including cardiovascular disease, diabetes, cancer, heart disease, or chronic lung diseases like COPD, as well as those with severely weakened immune systems.

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 about 10 minutes, 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 considered to be at low risk for infection. You can continue to go to work and school, but should monitor your health for 14 days and stay away from others if you get sick.

What should I do if I am a close contact to someone with COVID-19 but am not sick?
You should monitor your health for fever, cough and difficulty breathing 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 am a close contact to someone with COVID-19 and get sick?
If you get sick with fever, cough or difficulty breathing (even if your symptoms are very mild), you should stay 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 over, 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, you can call your healthcare provider and tell them that you were exposed to someone with COVID-19. Your healthcare provider can help you decide if you need to be evaluated in person. 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 face mask before emergency medical services arrive or immediately after they arrive.
PROCEDURES FOR RESEARCH STAFF OR STUDENTS WHO MAY HAVE BEEN EXPOSED TO OR DEVELOP SYMPTOMS CONSISTENT WITH COVID-19

APPENDIX B

COVID-19: What to do if you have confirmed/suspected COVID-19

This version was released on 03/15/2020. It may be updated with new guidance. Please visit www.chicago.gov/coronavirus to find the latest version.

If you are sick and have been diagnosed with COVID-19 or suspected to have COVID-19 because you have been exposed to someone with COVID-19, follow the steps below to help prevent the disease from spreading to people in your home and community.

Symptoms of COVID-19
The most common symptoms of COVID-19 are fever, cough and difficulty breathing. If you have been exposed to someone with laboratory confirmed COVID-19 and are experiencing fever with either cough or difficulty breathing, you might have COVID-19. You can contact your doctor to see if you need to be tested. If you have tested positive for COVID-19 or are suspected to have COVID-19 but are not tested, you should follow the below instructions.

Who is at higher risk of severe illness?
Those at higher risk include:
• People over 60 years of age. The risk increases significantly thereafter and escalates with age, with persons over age 80 in the highest risk category.
• People, regardless of age, with underlying health conditions including cardiovascular disease, diabetes, cancer, heart disease, or chronic lung diseases like COPD, as well as those with severely weakened immune systems.

Stay home except to get medical care
You should restrict activities outside your home, except for getting medical care. Do not go to work, school, or public areas. Avoid using public transportation, ride-sharing, or taxis.

Separate yourself from other people and animals in your home
People: As much as possible, you should stay in a specific room and away from other people in your home. Also, you should use a separate bathroom, if available.
Animals: Do not handle pets or other animals while sick.

Call ahead before visiting your doctor
If you have a medical appointment, call the healthcare provider and tell them that you have or may have COVID-19. This will help the healthcare provider’s office take steps to keep other people from getting infected or exposed.

Wear a face mask
You should wear a face mask when you are around other people (e.g., sharing a room or vehicle) or pets and before you enter a healthcare provider’s office. If you are not able to wear a face mask (for example, because it causes trouble breathing), then people who live with you should not be in the same room with you, or they should wear a face mask if they enter your room.

Cover your coughs and sneezes
Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can; immediately wash your hands with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains at least 60 to 95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water is preferred if hands are visibly dirty.

Avoid sharing personal household items
You should not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people or pets in your home. After using these items, they should be washed thoroughly with soap and water.
PROCEDURES FOR RESEARCH STAFF OR STUDENTS WHO MAY HAVE BEEN EXPOSED TO OR DEVELOP SYMPTOMS CONSISTENT WITH COVID-19

APPENDIX B (continued)

COVID-19: What to do if you have confirmed/suspected COVID-19 (continued)

Clean your hands often
Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water is preferred if hands are visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.

Clean all “high-touch” surfaces every day
High touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, according to the label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.

Monitor your symptoms
Seek prompt medical attention if your illness is worsening (e.g., difficulty breathing). Before seeking care, call your healthcare provider and tell them that you have, or are being evaluated for, COVID-19. Put on a facemask before you enter the facility. These steps will help the healthcare provider’s office to keep other people in the office or waiting room from getting infected or exposed.

Ask your healthcare provider to call the local or state health department to discuss your situation.
If you have a medical emergency and need to call 911, notify the dispatch personnel that you have, or may have COVID-19. If possible, put on a face mask before emergency medical services arrive.

Discontinuing home isolation
If you have tested positive for COVID-19 or have symptoms consistent with COVID-19 and do not require medical attention, you should remain under home isolation precautions for 7 days from start of symptoms (if multiple symptoms, then from start of cough) OR until 72 hours after fever is gone and symptoms get better, whichever is longer.

If you have fever with cough or difficulty breathing but have NOT been exposed to someone with COVID-19 and have NOT tested positive for COVID-19, you should stay home away from others until 72 hours after the fever is gone and symptoms get better.

For additional information for your household members, intimate partners, and caregivers, see CDC’s Guidance for preventing COVID-19 from spreading
PROCEDURES FOR RESEARCH STAFF OR STUDENTS WHO MAY HAVE BEEN EXPOSED TO OR DEVELOP SYMPTOMS CONSISTENT WITH COVID-19

APPENDIX C

COVID-19 Procedures for Research Laboratories

Have you been tested and diagnosed with COVID-19?

- NO
  - Testing is not needed. If you have been in close contact with someone who has COVID-19, stay or go home and monitor symptoms for 14 days.
  - ORS will notify the Provost, Divisional Dean, Vice-Provost for Research, UChicago Medicine Infection Control, Department Chair and coronavirus@uchicago.edu

- YES
  - Immediately notify your supervisor or principal investigator. Your supervisor or PI should notify the department chair and Office of Research Safety.

Do you think you have been exposed to COVID-19 or are having symptoms like fever, cough, or difficulty breathing?

- NO
  - Testing is not needed. If you have been in close contact with someone who has COVID-19, stay or go home and monitor symptoms for 14 days.

- YES
  - Consult your healthcare provider.

Are you over 60 and/or do you have an underlying medical condition like diabetes, cancer, or heart disease?

- NO
  - Call your healthcare provider to determine if testing is required.

- YES
  - ORS will work with the Provost, Divisional Dean, Vice-Provost for Research, UChicago Medicine Infection Control, Department Chair and coronavirus@uchicago.edu
  - ORS will consult with Risk Management and facilities staff to procure and monitor the services of vendors who can provide laboratory decontamination procedures. In some cases, internal departments or individuals may be the most appropriate group to complete decontamination procedures.

ORS will work with PIs on decontamination activities to preserve research materials and consult on steps to ramp-down or halt research activities in addition to reinstating research activities.

*Public Health Department Guidelines
Illinois Department of Public Health (IDPH) [www.dph.illinois.gov/covid19](http://www.dph.illinois.gov/covid19)

Created: 3/15/2020
I. Cleaning and Disinfection After Person(s) Suspected/Confirmed to Have COVID-19 Have Been in the Facility
   A. Community Facilities (classrooms and administrative offices) that do not house persons overnight:
      i. It is recommended to close off areas used by the ill persons and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. If possible, open outside doors and windows to increase air circulation in the area and wait up to 24 hours before beginning cleaning and disinfection;
      ii. Cleaning staff should clean and disinfect all areas (e.g., offices, bathrooms, and common areas) used by the ill persons, focusing especially on frequently touched surfaces.
   B. Dormitories:
      i. Follow Interim Guidance for US Institutions of Higher Education on working with state and local health officials to isolate ill persons and provide temporary housing as needed.
      ii. It is recommended to close off areas used by the ill persons and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. If possible, open outside doors and windows to increase air circulation in the area and wait up to 24 hours before beginning cleaning and disinfection.
      iii. In areas where ill persons are being housed in isolation, follow Interim Guidance for Environmental Cleaning and Disinfection for U.S. Households with Suspected or Confirmed Coronavirus Disease 2019. This includes focusing on cleaning and disinfecting common areas where staff/others providing services may come into contact with ill persons but reducing cleaning and disinfection of bedrooms/bathrooms used by ill persons to as needed.
      iv. In areas where ill persons have visited or used, continue routine cleaning and disinfection as in this guidance.
   C. Laboratories and animal care facilities:
      i. It is recommended to close off laboratory or other research areas used by the ill persons and to wait at least one hour before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. Given that the air exchange rate is much higher in research facilities, generally 8-15 air changes/hour, aerosols and droplets will be rapidly cleared from the contaminated space, thus making it unnecessary to proceed as described above for offices and dormitories (i.e. waiting 24 hours to allow for aerosols to be cleared, opening windows, etc.)
Considerations and Guidelines for Environmental Cleaning and Decontamination of Laboratory and Office Areas in the Context of COVID-19
(Reference: Centers for Disease Control and Prevention)

II. How to Clean and Disinfect
   A. Surfaces:
      i. If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
      ii. For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common EPA-registered household disinfectants should be effective.
         • Diluted household bleach solutions (0.5-1.0%) can be used if appropriate for the surface. Never mix household bleach with ammonia or any other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted.
      iii. Prepare a 0.5% bleach solution by mixing:
         • 5 tablespoons (1/3 cup) bleach per gallon of water, or
         • 4 teaspoons bleach per quart of water
      iv. Products with EPA-approved emerging viral pathogens claims are expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer’s instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.).
      v. For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces.
      vi. After cleaning:
         • If the items can be laundered, launder items in accordance with the manufacturer’s instructions using the warmest appropriate water setting for the items and then dry items completely.
         • Otherwise, use products with the EPA-approved emerging viral pathogens claims (examples at this link) that are suitable for porous surfaces.
   B. Linens, Clothing, and Other Items That Go in the Laundry
      i. Do not shake dirty laundry; this minimizes the possibility of dispersing virus through the air.
      ii. Wash items as appropriate in accordance with the manufacturer’s instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill person can be washed with other people’s items.
      iii. Clean and disinfect hampers or other carts for transporting laundry according to guidance above for hard or soft surfaces.

III. Personal Protective Equipment (PPE) and Hand Hygiene
   A. It is recommended that cleaning staff wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash.
      i. Gloves and gowns should be compatible with the disinfectant products being used.
      ii. Additional PPE might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.
Considerations and Guidelines for Environmental Cleaning and Decontamination of Laboratory and Office Areas in the Context of COVID-19  
(Reference: Centers for Disease Control and Prevention)

iii. Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area. Be sure to clean hands after removing gloves.
iv. Gloves should be removed after cleaning a room or area occupied by ill persons. **Clean hands** immediately after gloves are removed.
v. Cleaning staff should immediately report breaches in PPE (e.g., tear in gloves) or any potential exposures to their supervisor. Cleaning staff and others should clean hands often, including immediately after removing gloves and after contact with an ill person, by washing hands with soap and water for 20 seconds. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains 60%-95% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.
vi. Follow normal preventive actions while at work and home, including cleaning hands and avoiding touching eyes, nose, or mouth with unwashed hands.
  • Additional key times to clean hands include:
    o After blowing one’s nose, coughing, or sneezing
    o After using the restroom
    o Before eating or preparing food
    o After contact with animals or pets
    o Before and after providing routine care for another person who needs assistance (e.g., a child or especially elderly persons)

IV. Additional Considerations for Employers (e.g. principal investigators, supervisors)
A. Employers should educate staff and workers performing cleaning, laundry, and trash pick-up activities to recognize the symptoms of COVID-19 and provide instructions on what to do if they develop symptoms within 14 days after their last possible exposure to the virus. At a minimum, any staff should immediately notify their supervisor and the local health department if they develop symptoms of COVID-19. The health department will provide guidance on what actions need to be taken. When working with your local health department check their available hours.
B. Employers should develop policies for worker protection and provide training to all cleaning staff on site prior to providing cleaning tasks. Training should include when to use PPE, what PPE is necessary, how to properly don (put on), use, and doff (take off) PPE, and how to properly dispose of PPE.
C. Employers must ensure workers are trained on the hazards of the cleaning chemicals used in the workplace in accordance with OSHA’s Hazard Communication standard (29 CFR 1910.1200).

V. Steps for cleaning and disinfecting are summarized on the following page:
Considerations and Guidelines for Environmental Cleaning and Decontamination of Laboratory and Office Areas in the Context of COVID-19
(Reference: Centers for Disease Control and Prevention)

COVID-19 - Steps for cleaning and disinfecting

*Please clean and disinfect after each use and after each shift*

1. Wear disposable gloves

2. **Cleaning** - If surfaces are dirty (dirt, blood, food, etc.) clean with soap and water prior to disinfecting

3. **Disinfecting** - Use only Quat bottles supplied

   **For non-electric surfaces** spray directly and do not wipe
   - Breakrooms (tables, chairs, fridge handle, faucet)
   - Doorknobs
   - Desks

   **Electrical Surfaces**, spray on paper towel first and then apply with paper towel
   - Microwave buttons
   - Elevator buttons
   - Light switches
   - BSC buttons