



## COVID-19 Key Definitions \*subject to change

Updated: Friday, March 27, 2020

Definitions are consistent with CDC and CDPHE guidelines and are applicable to all individuals, including patients, physicians and employees.

**Symptoms consistent with coronavirus:** cough, fever, shortness of breath

**Moderate/Severe symptoms:** shortness of breath that interferes with activities, interruption in activities of daily living, unable to drink fluids, high fever

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**Home Isolation:** **Symptomatic** person who should remain at home while ill

When to Return to Work: At least 10 days have passed since symptom onset; improvement in symptoms; and absence of fever for at least 72 hours (without the use of anti-pyretic).

**Home Quarantine:** **Asymptomatic** person who should remain at home following a high-risk exposure

When to Return to Work: 14 days from last high-risk exposure; may work virtually at home; may return to work immediately if the high-risk exposure was from a person under investigation subsequently found to have a negative COVID-19 test result.

**Self-monitor:** **Asymptomatic** person who had a low-risk exposure and should monitor themselves for symptoms of cough, fever and shortness of breath. May continue to work.

What to do while working: temperature checking twice daily; reporting of symptoms

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**Close contact:** Contact within 3-6 feet with persons known or suspected to have COVID-19 (Coronavirus) for a prolonged period (greater than 10 minutes) OR having direct contact with infectious secretions.

**High-Risk Exposure:** Close contact exposure to respiratory droplets (coughing/sneezing) with symptomatic patient with neither the patient nor the healthcare provider wearing a surgical mask; performing aerosolizing procedures without appropriate PPE (N-95 mask, eye protection); direct contact with infected secretions.

Examples: intubating someone in the field with limited PPE, prolonged contact to someone coughing without PPE, travel within the last 14 days to a level 3 country as defined by the CDC.

**Low-Risk Exposure:** Exposure to a symptomatic patient while patient or provider is wearing PPE OR brief exchange without PPE and no direct contact to secretions.



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Examples: stopping at restaurant in an area with community transmission, limited contact with person coughing without PPE, coughing person not in the same room but in the same general office space.

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**Essential employee:** Any Kaiser Permanente employee is deemed essential in the event of a shelter in place order.

**High Transmission Risk to Vulnerable Persons:** e.g., Health care workers (HCW), caregiver for immunosuppressed person, first-responders, jail workers, employees of elder care settings.

**High risk individual:** Person with medical conditions that increase the risk of serious illness and complications from a COVID19 infection. (Reference: CDC.gov and KP National Guidelines)

Examples: age greater than 65, severe obesity (BMI >40), pregnancy, transplant, chemotherapy, biologic therapy, chronic lung disease (e.g. COPD, ILD), serious heart conditions (e.g. CHF, unstable CAD), poorly controlled diabetes or asthma, other immunocompromised state\*.

**\*Immunocompromised state:**

- Steroids > 20 mgs (or  $\geq 0.5$  mg/kg/day in pediatrics) for > 2 weeks
- On biologics or other steroid sparing immunomodulators (other than Plaquenil)
- Chemotherapy for solid organ tumor or other malignancy less than 3 months ago
- Hematologic malignancy not in remission
- S/P autologous hematopoietic stem cell transplant (HSCT) x 1 year, allogeneic HSCT until off immunosuppression x 1 year
- Bone marrow or organ transplantation on immunosuppressants
- Lupus
- Dialysis, renal failure or liver disease
- Others: common variable immunodeficiency (CVID), uncontrolled HIV, primary immunodeficiency

**Medical conditions will be carefully assessed by HR using guidelines provided by the EOC. Medical documentation is required.**

**HR will determine if high risk individual will be reassigned to a different role, location or approved to work remotely (if previously equipped to do so).**



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**Testing Guidance:** Refer to the current testing protocol on toolkit. As of 03/18/20, testing is only done for:

1. Moderate/severe symptoms
2. Symptomatic High-Risk individual
3. Symptomatic HCW or first responder deemed vital to patient care needs or public welfare (if KPCO HCW, must be approved by EOC)

**Ordering Tests:** Tests approved by Clinical Consult Line or Telephonic Medicine Center (TMC) only. Anyone obtaining a test specimen must send the chart to the "p\_covid-19\_quarantine" pool for results monitoring.

### **Test Results:**

- Test results will be received by the COVID Clinical Monitoring Team and the ordering provider.
- The provider receiving the results (whether positive or negative) should forward the result to the "p\_covid-19\_quarantine" pool.
- The COVID Clinical Monitoring Team will notify the patient of results, whether positive or negative, and use existing algorithms to advise on next steps about continued home isolation, home quarantine, and/or return to work.

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### **Resources:**

[KPCO-EOC@kp.org](mailto:KPCO-EOC@kp.org). For questions, comments and suggestions. No PHI, clinical or urgent questions.

**KPCO Toolkit:** <http://www.insidekpc.org/cpmg/COVID-19-Toolkit>. For protocols and regularly updated information.

**COVID19 Centralized Care Monitoring Team (CMT):** For patients who need additional oversight: **p\_covid-19\_quarantine**. Team of providers and nurses notifying members of positive or negative results, reviewing and tracking all tests sent, providing virtual care to patients discharged from the hospital with pending tests, monitoring clinically at-risk patients (with or without testing).

**COVID-19 Clinical Consult Line (CCL): 303-203-1617 (pager).** For providers with real-time questions about care, disposition, screening, testing approval, home quarantine, etc.

**Telephonic Medicine Center (TMC): 303-338-3099 (physicians only); 303-318-1111 (all providers)**  
For providers with patients requiring a higher level of care.

**Non-KP HCW/First Responder Reference Line: 303-692-2000** For non-KP HCW and first responders who need testing, contact CDPHE directly for triage.



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**Exposure Monitoring Team (EMT): 303-344-7300.** Asymptomatic Health Plan and CPMG employee questions about COVID-19 exposure from travel, work or other exposure.

**CPMG HR One Call: 303-344-7777.** Do not call for medical advice.

- Requests for special considerations
- CPMG sick calls
- HR Policies, questions about pay

**Colorado HR Help Line for Health Plan Employees: 303-338-3212.** Do not call for medical advice, redeployment assignments, or sick calls.

Call for:

- Requests for high-risk employee determination and possible reassignment
- Requests for temporary remote work or special considerations
- HR Policies, Time and Attendance questions, pay & benefits, contract questions
- ADA Work accommodations
- Workers Compensation

**Who should I contact?** For guidance, review the [COVID-19 Hotlines for CPMG and Health Plan Employees](#).

Who should I contact if...?	
I am a physician/APP and my patient requires testing according to the COVID-19 Key Definitions	CCL pager
I am a physician/APP and my patient needs a higher level of care (Urgent Care/ED)	TMC
I am a KPCO employee with COVID-19 like symptoms, questions about care or COVID testing	Use normal care channels (chat with a doc, nurse advice line, virtual PC visit)
I am an asymptomatic HP employee or CPMG professional staff member and have had an exposure to COVID-19, and need to know if I should report to work	EMT
I am a KPCO Employee and due to health risk factors, I am requesting an alternative work assignment/special consideration	HP call HP HR CPMG call CPMG HR One Call
I am a KPCO employee and am sick	Do NOT REPORT TO WORK, call your supervisor, chief or regional staffing office per your usual protocol
I am a CPMG Physician and want to appeal HRs decision on granting special considerations	CPMG HR One Call
I am a HCW or first responder and am not a member of KP but heard KP was testing non-members	Contact CDPHE for triage, the state/CDPHE will connect you with KP if you qualify for testing