



**Assistant Administrator (AA)/Supervisory Air Marshal in Charge
(SAC)/Federal Security Director (FSD)
Protocol for Employee (or Contractor) with Laboratory-Confirmed or
Suspected* COVID-19**

1. When AA/SAC/FSD first learns of an employee with possible COVID-19, management must:

- A. Speak with the employee (or contractor) and ask the following:
- When did the employee begin to feel ill?
 - What were the employee's symptoms?
 - What was the last day on which the employee was at work (airport, office)?
 - Where in the airport/office area did the employee travel?
 - Has the employee spoken with his/her healthcare provider?
 - Have they been tested for COVID-19?
 - If so, what were the test results?
 - Management should ask the employee if he or she consents to the release of their name for the purpose of helping to identify other individuals who may have been in close contact with the employee before he or she fell sick. Employee's positive or negative response must be documented.
- B. If the employee is not available, management should try to identify a close relative who is familiar with situation and try to get answers to all questions above; except for the question on sharing the employee's name. Only the employee may consent to release of his or her name. Advise the employee or family member that management may be contacting the local public health department to notify the department that an employee has fallen ill and that the employee's name and other identifying information will be provided to the public health department should it be requested.

2. Collect the following information for each employee/contractor with laboratory-confirmed and suspected* COVID-19:

- A. Point of contact information
- B. Information about employee (do not send any Sensitive Personally Identifiable Information (SPII)) (e.g. name plus medical condition is SPII)
- Position
 - Airport code or FAMS field office or HQ office
 - Last day at work
 - When tested positive
- C. Test performed?
If so, name of the facility where the employee was tested for the COVID 19 virus
- D. Was the employee hospitalized? If so, when?
- E. Did the employee have symptoms while at work? If yes, what were the dates? (approximate dates?)

3. Enter information in to WebEOC for TSA employees (do not enter employee's name) (and also share with FAMS Medical Programs Section, for FAMS employees)



4. Identify exposed coworkers

A. Exposed coworkers include any employees who were in **close contact**, which is:

- Being within 6 feet for 10 minutes or more (cumulative) with the employee with laboratory-confirmed or suspected* COVID-19; or
- Being directly coughed on in the face by the employee with laboratory-confirmed or suspected* COVID-19.

AND the close contact occurred:

- While this employee with laboratory-confirmed or suspected* COVID-19 had any symptoms; or
- During the previous 48 hours before symptom onset.

B. If the employee with laboratory-confirmed or suspected* COVID-19 had any symptoms while at work or was at work during the previous 48 hours before symptom onset, coworker(s) must be advised to contact their healthcare provider, monitor their symptoms (and report them to their healthcare provider) and must be sent home (and remain at home) for a total of 14 days on excused leave (weather and safety) beginning with the last date of close contact while the employee with positive COVID-19 test had any symptoms or during the previous 48 hours before symptom onset.

- Close contacts can be determined by looking at the employee's schedule and work location, and speaking with the employee about where they have been in the workplace (e.g., break room). Management may ask the employee if s/he consents to having their name shared with others to help identify others who may have been exposed. Employee's positive or negative response must be documented.

C. Advise all concerned coworkers, or coworkers with any symptoms (especially fever, feeling feverish, cough or shortness of breath) to consult with their own healthcare provider.

D. If exposed coworkers are mission-critical employees and required at the workplace due to operational constraints, leadership may consult with the Chief Medical Officer (or with FAMS Medical Programs Section, for FAMS employees) for a case-by-case assessment.

Please contact the Office of the Chief Medical Officer, through the CIMG, for any medical questions.

5. Notify the local public health department

A. The FSD, SAC, or AA, or designee, must proactively reach out to local health authorities to inform them that an airport employee (without providing the employee name) has laboratory-confirmed or suspected COVID-19 and obtain further guidance, including on employees who need to be removed from the workplace, cleaning instructions and closing the workplace. The FSD/SAC/AA may then inquire with the local health authority whether additional information is needed. If the local health authority says additional information is needed, the FSD/SAC/AA must then provide any requested information, including the name and home address of the employee and other information necessary to assist the local health authority.

Note: Please note that providing the employee's name and medical information constitutes SPII and can only be provided after management informs the local health department of the positive test and additional information is requested.

6. Notify Airport Authority/Building Management and ensure area is cleaned consistent with CDC and local health department guidance



Transportation
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7. Notify the workforce that an employee tested positive for COVID-19 or has suspected COVID-19 (please coordinate SCPA)

8. Follow HCAM 2020.30-4, Coronavirus Disease, and the Supervisor COVID-19 Decision Matrix which provides additional information regarding requests to extend excused leave (weather and safety) and documentation employees are required to provide prior to returning to work

*For the purpose of this document, suspected COVID-19 means that employee (or contractor) has signs and symptoms clinically compatible with COVID-19, as **identified by a healthcare provider**, but employee was not tested, or was tested and the test result is pending.