
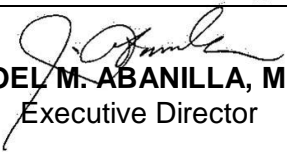

 <p>PHILIPPINE HEART CENTER INCIDENT COMMAND POST</p>	Document Type	Document Code: GL-OED-ICP-009
	GUIDELINES	
	Document Title	Effective Date: August 2022
	COVID-19 TESTING AND MANAGEMENT OF PHC SYMPTOMATIC HEALTHCARE WORKERS	Revision Number: 5
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REVISION HISTORY			
Rev No.	Review Date	Description of Change	Date of Next Review
1	May 2020	Title Change Restated Statement of policy Restated item number 2	May 2023
2	June 2020	Title Change Removed asymptomatic personnel, 3.5-3.6 Added 3.2-3.4, 3.8.1-2, 5, 6, 7	June 2023
3	July 17, 2020	High risk exposure / Close Contact to complete 10 days instead of 14-days quarantine. Added statement number 1 about symptomatic HCW. Renumbered. Changed 4.2 4D to 4E, 4.3 4A to 4D	July 2023
4	June 23, 2021	Changed quarantine days from 10 to 14 days for high-risk exposure Removed use of antibody testing	June 2024
5	August 29, 2022	Merged Item 1 and 2 Removal of Item 3 high risk exposure, quarantine and testing Added 8.1	August 2025

Reviewed by:	 GERARDO S. MANZO, MD Incident Commander	Approved by:	 JOEL M. ABANILLA, MD Executive Director
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I. OBJECTIVE


This shall serve as a guide in implementing early COVID-19 diagnosis and management of PHC symptomatic healthcare workers (HCWs).

II. SCOPE

This guideline shall apply to all symptomatic PHC healthcare workers.

III. GUIDELINES

1. All symptomatic staff shall be referred to the Infirmary / ER special triage for further assessment and management.
 - 1.1 Once with request of COVID RT-PCR test, isolation shall be implemented immediately after the swab until with negative result and resolution of symptoms.
2. COVID Real-time Polymerase Chain Reaction (RT-PCR) shall be the confirmatory test for diagnosing COVID-19 disease.
 - 2.1 If **RT-PCR** test is **Negative (-)**, this is considered as **Non-COVID-19 case**. The healthcare worker will be evaluated for final disposition such as possible discharge / clearance to go back to work.
 - 2.2 If **RT-PCR** test is **Positive (+)**, this is considered a **Confirmed COVID-19 Case**. The healthcare worker should be managed accordingly (see *GL-OED-ICP 001*).
 - 2.2.1 The immediate supervisor of the HCW who tested positive in RT-PCR should instruct all his/her other staff to practice daily self-monitoring of symptoms.
 - 2.2.2 The immediate supervisor of the HCW who tested positive in RT-PCR should facilitate terminal cleaning and disinfection of the unit/office of origin.
3. Contact tracing shall be done to determine level of possible exposures of healthcare workers to a confirmed COVID-19 case (*please refer to GLC-OED-ICP-006 for risk exposure assessment and management*).
4. Results shall be forwarded to ER, Safety Officer of Incident Command Post and Infirmary Clinic. Subsequent plans will be based on test results and on existing recommendations.
5. The ER ST shall inform the staff regarding the result and the staff shall inform the nurse supervisor or immediate supervisor.

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6. The immediate supervisor shall ensure that his/her staff who were advised to do isolation strictly follows the isolation protocol.
7. The official printed result shall be issued by the Laboratory Medicine upon request.
8. All healthcare worker who completed the required isolation days shall seek infirmary clearance prior to duty. Infirmary clearance should be presented to the immediate supervisor as a proof of clearance to work.
 - 8.1 HCW who completed the required isolation days and is still symptomatic should proceed to the Infirmary for proper evaluation and management.