

# **Entrance Screening**

The following provides recommended guidance relative to the screening of all workers before entry into the workplace during the period in which COVID-19 protocols are in place.

## **Screening Preparation**

#### Identify the screeners

In order of highest preference, screeners should be (1) medical professionals, (2) emergency response team members, (3) designated site leaders or 4) properly trained personnel.

#### Ensure the screeners are properly trained

#### Ensure you have the proper supplies

Temporal thermometers, infrared thermometers or thermal cameras Alcohol swabs or other means of disinfecting equipment Hypoallergenic gloves (nitrile) Disposable gowns Surgical masks for screeners and those who fail screenings Antibacterial soap and hand sanitizer Supplies to disinfect working surfaces

#### Be prepared to track failed screenings

Have a process in place to record the individual's name, date, and time of failed screening

## **Protocol for Screeners**

Use plexiglass barrier, maintain 6 feet of distance and use PPE Disinfect screening area before changing screeners Wash hands hourly and after touching objects Handle bags of disposed supplies only while wearing PPE Empty bags of disposed supplies after every shift



## **At-Home Screening Questions**

While still at home and before arriving on site, workers should complete a self-assessment by answering the following questions:

- Do you have any of the following symptoms, or have had them within the past 14 days? Fever (100.4° F or higher) Cough, not from seasonal allergies Shortness of breath/Breathing difficulties Sore throat, not from seasonal allergies Muscle and body aches, not from normal daily activities Diarrhea, not food-related Loss of taste or smell Pain or feeling of pressure on your chest Body chills Headache
  - If you answered "no" to any of the above, have you taken fever-reducing medication within the last 48 hours?
    If fever-reducing medication has been taken to reduce fever or symptoms associated with fever, do not report to work.
  - 3. In the past 14 days, have you been in close physical contact (face-to-face contact within 6 feet) with someone that is confirmed to be a case of COVID-19?
  - 4. In the past 14 days, have you been in close physical contact (face-to-face contact within 6 feet) with someone who is displaying flu-like symptoms or COVID-19 symptoms (see list in question 1)?

If a worker answers "yes" to any of the questions above, s/he should not report to work and contact an immediate supervisor.

## **On-Site Screening Questions**

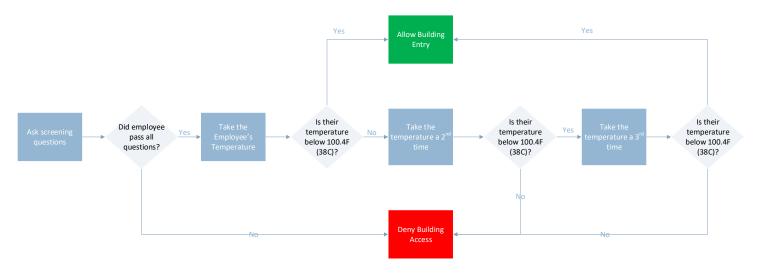
Although an individual may have already completed the at-home questionnaire, screeners should ask the following questions on site:

- 1. Are you experiencing shortness of breath, fever, or cough?
- 2. Within the last 14 days, have you come in close contact with someone who has been diagnosed with COVID-19?
- 3. Is there someone in your home who has been told they may have COVID-19 and is currently in isolation?
- 4. Have you traveled anywhere outside the 50 United States in the past 14 days?
- 5. Have you been directed by a health care provider to quarantine or self-isolate? If so, when does/did your quarantine/self-isolation end?

A "yes" answer to any of these questions should be considered a failed screening.



# **Entrance Screening Flowchart**



## **Failed Screening Protocol**

In the event of a failed screening (based on questions and/or temperature), the following steps should be taken:

- 1. Record the worker's name, and the date and time of the failed screening.
- 2. Provide the worker with a surgical mask and ask to remain in an isolated area until able to go home.
- 3. Arrange for transportation home (with a friend or family member, not via public transportation) if the worker is unable to drive him/herself.

