

COVID-19

Los Angeles County Department of Public Health Interim Infection Prevention Guidance for Veterinary Practice Staff

KEY POINTS:

- The veterinary practice is responsible for developing and executing your facility's plan to decrease the risk of COVID exposure from potentially infectious staff and clients.
- All staff should self-monitor for symptoms each day prior to starting work and should not report to work if they exhibit any symptoms.
- [Universal source control](#) should be observed by all persons when they are in the veterinary facility. All veterinary practice staff should wear a medical-grade mask and all owners/clients wear face masks.
- Physical distancing between staff and between staff and clients should be implemented in all areas of the practice as much as possible.
- [Fully vaccinated](#) staff with high risk exposures to an infectious COVID-19 case may continue to work as long as they remain asymptomatic. They must continue to follow all current infection prevention and control recommendations to protect themselves and others from SARS-CoV-2 including self-monitoring for symptoms, source control and testing recommendations.
- As veterinary practices assess allowing more clients to enter their clinic, they should consider their practice's individual characteristics (size, ventilation, etc.), consult the guidance below, and evaluate how best to continue to protect both staff and clients from potential COVID-19 exposure.
- Businesses including veterinary practices are required to report to the Department of Public Health when there are three or more confirmed cases of COVID-19 among employees within a span of 14 days with evidence of epidemiological linkage such as sharing a physical space. Report cases to Public Health at (888) 397-3993 or (213) 240-7821.

BACKGROUND:

Veterinary practice staff may be exposed to COVID-19 in the community or at home and increase the risk of transmission to other staff and clients. Veterinary practices must develop plans and protocols to reduce exposure risk in the facility. Encouraging staff to be vaccinated, ensuring staff and clients wear masks, improving ventilation and planning work tasks to incorporate greater distancing between staff makes the practice less likely to experience COVID-19 outbreaks, less likely to need to quarantine staff, and more likely to be able to stay open when a COVID-19 case occurs. These updated guidelines have evolved as a result of experience, the availability of published data on COVID-19, established infection control principles, and the availability of effective COVID-19 vaccines.

RECOMMENDATIONS:

1. Individual staff members ***are strongly encouraged*** to get vaccinated against COVID 19. COVID-19 vaccination is highly effective at preventing serious illness and death and is the central strategy for stopping this pandemic. Additionally, a [growing body of evidence](#) indicates that fully vaccinated people are less likely to have asymptomatic infection and less likely to transmit SARS-CoV-2 to others.
2. All staff should self-monitor for symptoms each day prior to starting work and should not report to work if they exhibit any symptoms. They should arrange for medical evaluation and/or testing as soon as possible.



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3. Prior to the start of their shift, veterinary practices should screen all staff for symptoms of COVID-19. Note: temperature checks of staff prior to work is helpful in ensuring a healthy workforce but is of unclear benefit in the setting of a highly vaccinated workforce. Veterinary practices should perform a risk assessment to determine the most effective methodologies to protect their staff within their facilities. Practices should develop and implement screening systems that cause the least amount of delays and disruption as possible (for example, self-report, thermal scanners, etc.).
4. If veterinary practice staff develop fever or symptoms of possible COVID-19 while at work, they should notify their supervisor and leave the workplace immediately, regardless of vaccination status.
5. Veterinary practice staff should wear masks for [universal source control](#) while they are in the facility. Well-fitting medical-grade facemasks are recommended. Staff working alone in closed areas do not need source control unless they are moving through common spaces where they may interact with other staff or clients.
6. The risk of transmission of SARS-CoV-2 is highest in indoors settings, especially those that are crowded or have poor ventilation. Veterinary practices should ensure adequate [ventilation](#) and that 6 feet physical distancing is implemented throughout the facility between staff and between staff and clients. Move frequently used workstations (e.g. at reception desk, doctor's desks) further away from each other.
7. Break rooms/lunchrooms where staff remove their facemasks to eat and drink are high risk settings for work-site transmission. Facilities should focus on keeping these areas safe including: creating outdoor break spaces, if feasible; removing chairs to limit number of staff gathered in the room at one time and placing seats 6ft apart; creating staggered work shifts and break times; optimizing indoor air quality by opening windows or utilizing filtration systems.
8. Practices should limit the number of clients in a veterinary clinic to decrease crowding. This can be achieved by picking up animals from clients at their car or outside the practice and conducting consultations and payment over the phone. Another option may include utilizing telemedicine appointments when appropriate. If clients are allowed into the clinic, they should be [screened](#) prior to entry and be required to wear a face mask at all times while in the facility.
9. Close interactions between staff or between staff and clients should be as brief as is feasible. When physical distancing between team members is **not** feasible (e.g. restraining or procedure), veterinary practice staff must use appropriate personal protective equipment (PPE) which includes a well-fitting medical-grade surgical/procedure mask. Face shields or eye protection is recommended when staff must be in close contact with person(s) who are not fully vaccinated or their vaccination status is unknown.
10. Not fully vaccinated veterinary practice staff who have a high risk workplace exposure to COVID-19 should be excluded from work and should follow [home quarantine orders](#) (see definition of high-risk exposure below). They may return to work after 10 days if they never developed symptoms. [Fully vaccinated](#) staff with high-risk exposures who remain asymptomatic may continue to work. They must continue to follow all [current infection prevention and control recommendation](#)s including self-monitoring for symptoms, source control and testing recommendations. If symptoms develop in any staff person regardless of vaccination status, they should notify the veterinary practice and follow [home isolation instructions](#) pending medical assessment and testing.



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Definition of high-risk exposure:

Having close contact (i.e. they were within 6 feet for 15 or more minutes over a 24-hour period, and/or they had direct unprotected contact with infectious secretions/excretions) with a confirmed infectious* case:

- While not wearing a respirator or facemask
- While not wearing eye protection if the case was not wearing a facemask.

**COVID-19 cases are considered infectious beginning 2 days prior to symptom onset (or initial positive viral test if case is asymptomatic) until the time they meet criteria for discontinuing isolation.*

11. Not fully vaccinated veterinary practice staff with community-related exposures (including households), must notify their employer. The veterinary practice should determine if the exposure warrants quarantine based on the CDC's [Guidance for Community-Related Exposures](#).
12. [Extra cleaning](#) and disinfection may be needed for areas occupied by someone with suspected or confirmed COVID-19.

RETURN TO WORK PROTOCOL FOR VETERINARY PRACTICE STAFF WITH CONFIRMED COVID-19:

Share [this webpage](#) about isolation requirements with the staff member.

Veterinary staff with mild to moderate illness who are not severely immunocompromised can return to work:

- At least 10 days after symptom onset AND
- At least 24 hours since last fever without fever-reducing medication AND
- Improvement in symptoms.

Asymptomatic veterinary staff with laboratory-confirmed COVID-19 who are not severely immunocompromised should be excluded from work until 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms. If they develop symptoms, follow above guidance.

Symptomatic veterinary staff with severe or critical illness or who are severely immunocompromised can return to work:

- At least 20 days after symptom onset AND
- At least 24 hours since last fever without fever-reducing medication AND
- Improvement in symptoms.

Note: Asymptomatic veterinary staff who are severely immunocompromised (e.g. currently receiving chemotherapy for cancer, uncontrolled HIV infection with current CD4 <200, prednisone treatment >20mg/kg for more than 14 days), should wait to return to work until at least 20 days since first positive viral diagnostic test. They should discuss with their doctor when it is safe to return.

LAC DPH and CDC do not recommend re-testing for return to work clearance because individuals can shed non-infectious viral RNA for an extended period of time after COVID-19 infection.

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REPORTING

Per the [Health Officer Order](#), businesses including veterinary practices are required to [report](#) to the Department of Public Health (by immediately calling 888-397-3993 or 213-240-7821) when there are three or more epidemiologically linked confirmed cases of COVID-19 among employees within a span of 14 days. Public Health will then provide the following: a case manager to guide the facility response and provide technical support, infection control guidance and site-specific control measures.

Additional Guidance:

[AVMA: COVID-19, What Veterinarians Need to Know](#)

[FDA: Listing of NIOSH approved masks and respirators for COVID-19](#)

If you have questions, email LAC DPH Veterinary Public Health at vet@ph.lacounty.gov or call 213-288-7060.

