



COLLEGE OF
VETERINARY MEDICINE

**Clinical Year Student Policy
for
COVID-19 Management**



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CVM Student Code of Conduct During the COVID-19 Era

Knowledge is Power and Responsibility

As students in a medical profession, you are in a unique position to understand virus behavior, modes of transmission, sterility, epidemiology, and medical/scientific fact from fiction. Knowledge also bestows a responsibility to model safe behavior and adhere to scientific recommendations. The rules established for the CVM community are intended to keep the most number of people safe, protect those with increased risk, allow for more efficient tracing should an infection occur, and minimize the spread of COVID-19 among our community. Please be aware that *at any time* during the pandemic, an outbreak could close the VTH and the College resulting in a delay of your graduation. The more obvious risk and critical effect is infection with a potentially fatal disease among your friends and colleagues.

What we **DO** know is effective against the transmission and spread of COVID-19:

- ✚ Minimizing contact with individuals that is closer than 6 feet and longer than 10-15 minutes.
- ✚ Wearing a mask.
- ✚ Hand and surface hygiene.
- ✚ Minimizing movement within the community.
- ✚ Immediately taking action if you have any suspicious symptoms: stay home, get tested, report positive results immediately so contact tracing can occur.

Please note that violations of the CVM Veterinary Teaching Hospital guidelines may be considered a Student Code of Conduct violation and result in referral to the CVM Professional Standards Committee and/or the University Student Conduct Office.

Phase I Guidelines for Modified Opening of the VTH and Re-entry of 4th Year Students

Planned Date: June 15, 2020

GOAL 1: Minimize the spread of COVID-19

GOAL 2: Resume clinical training of 4th year students and house officers

GOAL 3: Service to patients, rDVM's, and clients

GOAL 4: Financial viability of the VTH and CVM

GOAL 1: Minimize the spread of COVID-19



EVERYONE IS RESPONSIBLE!

- + Mask
- + Social distancing
- + Limit contacts
 - 6 feet
 - 15 minutes
- + Hygiene/Cleaning
 - Wash hands/use hand sanitizer
 - Don't touch face
 - Surface cleaning




STAY HOME WHEN SICK AND REPORT TESTING RESULTS!

- Social distancing
 - Only students, staff, faculty, house officers, on-site Antech employees, and essential maintenance personnel will be allowed in the hospital. The Hospital Director, Hospital Administrator or VCS Department Head must approve exceptions to this. If you see anyone other than these people, please professionally question their presence as we strive to keep each other safe and healthy. Additionally, if unauthorized visitors are noted, immediately report their presence to the shift lead or hospital administration.
 - Curbside admission and discharge will continue during this phase.
 - Each service will run with half the students in-person/half virtual for Week 1; then flip for Week 2.*
 - Each service should develop distancing rules for their specific common-use areas, e.g. how many people in a ward, procedure room, exam room, etc. at one time; space seating in rounds rooms, etc. in order to limit the number of people in a confined space and whenever possible, keep a 6 foot distance apart. All reasonable efforts should be made to minimize the number of people congregating in any area of the hospital.

GOAL 1: Minimize the spread of COVID-19 *continued*

- Premises protocols
 - Personal belongings should be kept in lockers, car, or at home; this will limit items for others to touch, and allow for better cleaning.
 - ABM custodial staff will continue increased cleaning protocols.
 - All are responsible for keeping workspaces clean by daily (or more as indicated) sanitation of high-touch items (keyboard, mouse, phones, countertops, doorknobs, etc.).
 - ABM will continue to maintain hand sanitizer stations.
 - Signage will remain throughout VTH to remind everyone about the importance of routine hygiene: mask usage & washing, hand washing, hand sanitizing, no handshaking, cough/sneeze into arm.
 - No common food items allowed – i.e. all food should be individually wrapped.
- Individual protocols
 - A mask must be worn at all times within the VTH unless alone in a private office. Masks must also be worn outside when others are within 6 feet of you. This is to protect others around you, and prevent the inadvertent touching of nose and mouth.
 - Due to limited supply of PPE, disposable masks should only be worn during medical procedures. Cloth masks should be worn at all other times.
 - Change mask if you sneeze or cough into it.
 - Wash cloth masks daily.
 - If you forget your mask, you can obtain a disposable mask from Central Supply.
 - Wash hands for at least 20 seconds or use hand sanitizer frequently including leaving an area or after touching a common use object (computer keyboard, mouse, drawer handle, medical equipment, etc.).
 - Sneeze or cough into your arm.
 - NO handshaking.
 - Maintain distance from others whenever possible.
 - Use caution when eating; wash hands thoroughly before touching food; do not allow food to directly touch common-use surface; dispose of all trash in waste receptacle; do not leave any food items out uncovered/unwrapped.
 - Leave the premises as soon as your work is complete. Recommend working remotely whenever possible. Note, however, that medical records cannot leave the premises.
 - STRICT SICK POLICY!
 - DO NOT come to the VTH if you have symptoms consistent with COVID-19, or if you have had direct contact with a person who has tested positive for COVID-19.
 - Contact your supervisor immediately.
 - Contact your health provider immediately and, if indicated, get tested for COVID-19. Report the results to your supervisor and appropriate administrator (VCS for students, faculty and house officers; VTH for staff) as soon as received.

- Contact tracing will be performed by public health officials for any confirmed cases of COVID-19. *Results are confidential and personal identity is protected.*
- Individuals starting work or returning from externships or any leave greater than 2 days must complete the COVID-19 “Return to Work Questionnaire” (Faculty/House Officer and Staff) or the “Entry/Re-entry Questionnaire” (Students). The appropriate questionnaires can be found in the “COVID-19” Section of the VTH Intranet. <https://intranet.vetmed.okstate.edu/course/view.php?id=7>
 - Students returning from externships: complete no later than 3pm on the Friday prior to return on Monday.
 - Faculty, House Officers, locums, interview candidates and staff: between 24 and 48 hours prior to anticipated return.
- Reporting concerns about following safety protocols
 - Faculty → Department Head
 - Students → Associate Dean for Student/Academic Affairs
 - Staff → Supervisor Hospital Director

GOAL 2: Resume clinical training of 4th year students and house officers

- *To decrease the person density in the VTH and thereby allow for better distancing, and limit exposure if a positive case occurs, students enrolled in a rotation will be divided in half (Group A and Group B).
 - The VCS department will divide each group of students on a rotation into Group A and Group B, and pair each student in Group A with a student on Group B. If there is an odd number of students, Week 1 the “odd” student will not have a “Virtual Rotation Colleague” (VRC), and Week 2 the “odd” student will be a second VRC. Care will be taken not to assign two new contract students with each other. Rotation exceptions for dividing students include:
 - Clinical Pathology and Ultrasound - already divided
 - Surgical Fundamentals in Shelter Patients - continuing with the same reduced numbers, PPE, participant questionnaire
 - Small Animal Intensive Care Unit – restricted to no more than 2 students per shift
 - Field Services – students may drive to ambulatory sites in their personal vehicles; environment is outside the VTH and outdoors helping facilitate personal distancing
 - Rotations with 3 or less students as long as working conditions allow effective distancing with 2-3 students.
 - Rounds will use Zoom to allow participation of the virtual students. Each service will determine if the VTH students will attend rounds in-person or virtually depending on the rounds room size, number of students, faculty preference, etc.
 - End of rotation exams may be given virtually or in-person for the virtual students; if they are requested to take in-person, reserve a room large enough for students to distance themselves in seating (e.g. 002 VTH).

- Learning will be in a team-based format with the VTH student working up each case with their VRC. The VTH student will be responsible for providing all the case information to the VRC. They will develop the treatment plan together and discuss the case together with the clinician (e.g. via Google Duo or Facetime on their personal device). Suggested but can be modified based on clinician preference: Both students will be graded on knowledge, professionalism, SOAP quality, discharge instructions, etc. for the case. The VTH student will be graded on patient care and telephone client communication skills.
- Requiring after-hours shifts for students may be determined by each service within the following guidelines:
 - All VTH students will be excused from duty by midnight. This is to allow them to participate fully in each of their 5-7 in-person/hands-on days. If the case extends beyond midnight, the VRC may be called in to help in case management. Responsibilities for that VRC student the following day will be determined by the clinician (e.g. morning rounds, morning cases, etc.).
 - Students will not be scheduled for after-hours activities 2 nights in a row.
- The virtual student must be available at all times to step into the VTH student role should the VTH student be absent, and may be required to be on call for after midnight emergency cases.
- **Each service will determine the appropriate caseload considering the VTH-student:patient ratio and staffing levels of the primary and ancillary services. 75% of normal caseload is recommended.
- Each service is responsible for developing a plan for journal club and other regularly scheduled service meetings, based on room size, number of attendees, etc. Tuesday Mornings and the 3rd Wednesday of each month until 9am will continue to be reserved for VTH meetings.
- Grand Rounds will continue with virtual presentation and participation (Zoom).
- House Officer Seminar
 - Students may participate through Echo360 when time allows (VBSC 6710 on Moodle page).
 - Faculty and House Officers may view on Echo360 (preferred) or attend in person as long as safety protocols are maintained (social distancing and mask).
- No international externships are allowed at this time. No externships are allowed to any region (including within the U.S.) rated at a Level 3 Travel Health Notice by the CDC.
- Students who arrive at an externship site and are concerned for their safety may return to OSU without being penalized.
- Students who are not willing to return to the VTH and externships due to health safety concerns:
 - May request a leave of absence with the understanding they must return within one year; and all requirements will remain so that their graduation will be delayed by the number of weeks they choose to sit out of the clinical year.
 - May consider temporary alternate housing, e.g. with another student, staff, house officer or faculty member, if he/she is concerned about exposing an at-risk individual in the home to COVID-19.

GOAL 3: Service to patients, rDVM's, and clients

We will serve our patients, rDVM's and clients who rely on our care. We will do this in a safe, responsible, and respectful manner taking all factors of our current situation into consideration. This will require holistic teamwork and putting others before ourselves. The following protocols will be in effect during this time period.

- Admission
 - Admission and discharge of all patients will occur outside of the building ("curbside") by trained staff. All clients will be informed to contact the hospital via phone prior to or at the time of arrival. During this phone call, the following questions will be asked of the client prior to EACH curbside interaction:
 - *In the past 14 days, have you been in close contact with a person who is awaiting COVID-19 test results or confirmed to have the Coronavirus?*
 - *In the last 72 hours, have you had fever (100.4 or greater) and/or cough, shortness of breath, chills, headache, sore throat, muscle pain, or new loss of taste or smell?*
 - The VTH personnel who receives this information should document the answers to these questions on the "Coronavirus Client Questionnaire". A copy of this form will be kept in the patient file and the original should be placed in the money safe for centralized recordkeeping.
 - IN **ALL** CASES ADHERE TO THE FOLLOWING PROTOCOL:
 - Don mask and gloves. (Eye protection and a gown may be worn if you wish but are not required). Obtain disposable leash (for dogs), hospital carrier (for cats or other small animals) or designated halter and lead (for large animals). Unless all intake information was obtained via phone, obtain intake packet (available at front desk).
 - Meet client outside of the building (but preferably not in/directly at their vehicle) with as little contact with the client as possible (maintain at least a 6 foot distance when possible). For small animals, this should occur in the temporary kennel near the main entrance of the hospital.
 - Unless all intake information was obtained via phone, give Intake Packet to client and ask them to fill this out in its entirety. If they are able, please ask them to email it to vetmedreferrals@okstate.edu. This email address is also listed on the COVID-19 Client Handout included in the intake packet. If they state that they are unable to email the information to us, please ask them to stay and call us when finished with the paperwork. At that time, a team member should don a mask and gloves, and meet the client outside to take photos of the paperwork with a VTH-provided iPad. This should be done without physically contacting the paperwork. Do NOT use personal devices for this.
 - Obtain Driver's License via one of the following:
 - Have the owner place in a clear bag and make a copy (to be kept in the safe).
 - Take the DL with a gloved hand and swipe.

- Take a photo with the hospital iPad.
 - Obtain patient. If the patient has personal items (collar, harness, halter, etc.) on, please ask the client to remove them after placing the disposable leash, designated halter or placing in hospital carrier.
- After evaluation, the client is called to discuss findings and recommendations. Authorization to treat should be witnessed by two people, one of which must be a clinician. Payment of deposit via credit card over the phone is preferred. If this is not possible, we will accept cash, check or CareCredit (see below).
- IF THE ANSWER TO ANY OF THE TWO QUESTIONS ABOVE IS “**YES**”, **OR IF THE PATIENT IS A CAT OR FERRET WITH ACUTE RESPIRATORY SYMPTOMS**, IMPLEMENT THE FOLLOWING “COVID-19 AFFECTED CLIENT PROTOCOL”.
 - Don personal N95 respirator, eye protection, reusable gown in addition to disposable gloves.
 - Obtain disposable leash (for dogs), hospital carrier (for cats or other small animals) or designated halter and lead (for large animals). Unless all intake information was obtained via phone, obtain intake packet (available at front desk).
 - Complete intake protocol as #2 in the section above.
 - If medically possible, bathe the patient immediately with soap/shampoo and water, providing a minimum shampoo contact time of 20 seconds (preferably longer).
 - If bathed, examine and treat patient per normal protocol. No additional steps needed, but primary clinician may institute additional measures if they deem appropriate. Routine cleaning of surfaces and equipment is acceptable in this instance.
 - If not bathed, all personnel should wear gloves, mask (n95, if available or cloth mask) and reusable eye protection when contacting patient at all times for the first 72 hours of hospitalization. Wash hands thoroughly and disinfect any equipment used after every interaction with patient.
 - If presented with a cat or ferret with acute respiratory symptoms, please take to the “CAT Room” of SA ICU for evaluation and care. In this case, this room will become a temporary isolation area for COVID-19 suspects and typical isolation protocols should be followed. An oxygen cage can be moved into this room, if needed.
 - All surfaces contacted by unbathed patient should be cleaned with HDQ® (VTH standard cleaner) with a 10-minute contact time. This virucidal product is labeled for numerous viruses including human coronavirus, SARS associated coronavirus, H1N1, RSV, Hep B&C and numerous others. Alternatively, Rescue® can be used in a similar manner.
 - **If this protocol is activated, the clinician must immediately notify the Hospital Director via email (jeff.studer@okstate.edu).**

- Client communication and visitation
 - All communications with client should occur via phone or videoconferencing aside from curbside admission and discharge. All communications should be logged in UVIS.
 - Any client visitation requests must be approved by the Hospital Director or Hospital Administrator.
- Discharge
 - Discharges will occur with the same protocol as admissions (see above).
 - Whenever possible, the student should accompany the staff member at discharge to answer any client questions. The student is responsible for having all discharge instructions, medications and supplies ready at the time of discharge.
 - All charges must be finalized by the time of discharge.
- Deposit and payment information
 - The current financial policy remains in place. Appropriate charges should be entered in all situations. For patients being hospitalized overnight or receiving estimates with a high-end greater than \$500, clients are required to pay an initial deposit equal to 80% of the high end of the estimated charges. Because of the logistics of the current situation, the treatment plan and estimate will need to be presented over the phone and the owner may have left the premises prior to formation of the estimate. Therefore, the preferred method of payment is via phone with credit card or CareCredit. If these are not an option for the client, cash and check will be accepted, but must be delivered in a timely manner to the VTH (prior to non-life-saving treatment).
 - When accepting cash or check, please wear gloves and have the client place the appropriate amount of cash or check in a ziplock bag (available at the front desks) and close the bag. This will then be handled with precaution by the business office.

GOAL 4: Financial viability of the VTH and CVM

- ****Increasing caseload to help maintain financial health, but only to level that takes into consideration:**
 - Half the normal number of students
 - Inefficiency due to social distancing, altered staffing and curbside admission/discharge process
- **CRITICAL:** because caseload cannot resume to “normal,” it is imperative to be mindful of
 - All existing financial policies and protocols
 - Limiting expenses
 - Charging appropriately (enter correct fee, charge for all procedures, supplies, medications, etc.)
 - Ensure all charges are in at the time of discharge
 - Obtain all deposits and final payment at the time of discharge
 - Limiting non-exempt employee overtime

Attachment I:



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Clinical Year Externship Requirements

Externships are a critical part of the clinical year curriculum and OSU CVM is supportive of the externship experience and grateful to all host sites that welcome our students and offer them a holistic clinical experience. During the COVID-19 pandemic, we are challenged with doing everything possible to keep our students safe, mitigating the spread of COVID-19 between communities, and being respectful of host site policies and protecting host site personnel. The following requirements are in place to address these concerns. If you have any questions regarding the requirements, please do not hesitate to contact Dr. Margi Gilmour, Associate Dean for Academic and Student Affairs (margi.gilmour@okstate.edu, 405-744-6595).

Students

- The student is responsible for scheduling the externship with the host site, and providing this information sheet to the host site supervisor for signature.
- This signed form must be submitted to the Veterinary Clinical Sciences Department (vcsdept@okstate.edu) no later than 5 pm of the first day on externship. It can be submitted in advance at any time.
- The student is responsible for arriving at the host site with their own masks. Masks provided by the host site may be worn, but the host site is not required to provide a mask for the student.
- Students are REQUIRED to adhere to the same safety protocol at the host site as in the OSU Veterinary Teaching Hospital:
 - A mask must be worn at all times in the facility, and worn outside when within 6 feet of another person.
 - Maintain personal distancing from others whenever possible.
 - Maintain strict hand hygiene:
 - Wash hands for at least 20 seconds or use hand sanitizer frequently including when leaving an area or after touching a common use object (computer keyboard, mouse, drawer handle, medical equipment, etc.).
 - No hand shaking.
 - Always wash hands before eating.
 - Never sneeze or cough into your hand.
 - Leave the premises as soon as work is completed for the day.
- Students are required to stay home if experiencing any symptoms consistent with COVID-19, or if they have come into direct contact with a person who has tested positive for COVID-19. The student must contact their host site supervisor and the VCS Department in either situation.

- For ambulatory calls, if there are more than two individuals in the transport vehicle, it is strongly recommended that the student drive their personal vehicle to the ambulatory sites.
- The above requirements are a minimum. Students are required to adhere to any additional protective policies set by the host site. Non-compliance is grounds for dismissal from the host site with a “fail” grade.
- Students may leave an externship site at any time without penalty if they are concerned their health is at risk.
- Students returning from an externship must complete the COVID-19 STUDENT Entry/Re-entry Questionnaire no later than 3 pm on the Friday prior to the Monday return to the CVM VTH.
<https://intranet.vetmed.okstate.edu/course/view.php?id=7>

Externship Site

- Ensure students adhere to the requirements above for their safety, the safety of externship personnel, and the safety of the CVM community. A student returning from an externship site who has contracted COVID-19 puts the clinical year program at risk for closing, thus delaying graduation for the class of 2021.
- Notify the Veterinary Clinical Sciences Department (vcsdept@okstate.edu or 405-744-8468) if any student is non-compliant with the above requirements and/or the host site protective requirements.

By signing below, I acknowledge I have read and understand the above requirements, and agree to abide by them.

Student PRINTED Name

Student SIGNATURE

Date

Externship Supervisor PRINTED Name

Externship Supervisor SIGNATURE

Date

Attachment II: Key Resource Information for COVID-19 Containment and Safety from:

CDC / Coronavirus Disease 2019 / Considerations for Institutes of Higher Education

(Link to the full webpage including embedded additional specific topic links can be found below).

Promoting Behaviors that Reduce Spread

- **Staying Home or Self-Isolating when Appropriate**

- If a decision is made to have any version of in-person classes, before returning to campus, actively encourage students, faculty, and staff who have been sick with COVID-19 [symptoms](#), tested positive for COVID-19, or have been potentially [exposed](#) to someone with COVID-19 (either through [community-related exposure](#) or [international travel](#)) to follow CDC guidance to [self-isolate or stay home](#).
- Once back on campus, educate students, faculty, and staff on when they should [stay home or self-isolate](#) in their living quarters.
 - Actively encourage students, faculty, and staff who are sick or have recently had a [close contact](#) with a person with COVID-19 to stay home or in their living quarters (e.g., dorm room). Develop policies that encourage sick individuals to stay at home without fear of reprisals, and ensure students, faculty, and staff are aware of these policies. Offer virtual learning and telework options, if feasible.
 - Students, faculty, and staff should [stay home](#) when they have tested positive for or are showing [symptoms](#) of COVID-19.
 - Students, faculty, and staff who have recently had a [close contact](#) with a person with COVID-19 should also [stay home and monitor their health](#).
 - CDC's criteria can help inform return to work/school policies:
 - [If they have been sick with COVID-19](#)
 - [If they have recently had a close contact with a person with COVID-19](#)

- **Hand Hygiene and Respiratory Etiquette**

- Recommend and reinforce [handwashing](#) with soap and water for at least 20 seconds.
 - If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used.
- Encourage students, faculty, and staff to cover coughs and sneezes with a tissue or use the inside of your elbow. Used tissues should be thrown in the trash and hands washed immediately with soap and water for at least 20 seconds.
 - If soap and water are not readily available, hand sanitizer that contains at least 60% alcohol can be used.

- **Cloth Face Coverings**

- Recommend and reinforce use of [cloth face coverings](#) among students, faculty, and staff. Face coverings should be worn as feasible and are **most** essential in times when physical distancing is difficult. Individuals should be frequently reminded not to touch the face covering and to [wash their hands](#) frequently. Information should be provided to all students, faculty, and staff on [proper use, removal, and washing of cloth face coverings](#).
 - Note: [Cloth face coverings](#) should **not** be placed on:

- Babies and children younger than 2 years old
 - Anyone who has trouble breathing or is unconscious
 - Anyone who is incapacitated or otherwise unable to remove the cover without assistance
 - [Cloth face coverings](#) are meant to protect other people in case the wearer is unknowingly infected but does not have symptoms. [Cloth face coverings](#) are not surgical masks, respirators, or other medical personal protective equipment.
- **Adequate Supplies**
 - Support [healthy hygiene](#) behaviors by providing adequate supplies, including soap, hand sanitizer containing at least 60 percent alcohol, paper towels, tissues, disinfectant wipes, cloth face coverings (as feasible), and no-touch/foot pedal trash cans.

Maintaining Healthy Environments

- **Cleaning and Disinfection**
 - [Clean and disinfect](#) frequently touched surfaces (e.g., door handles, sink handles, drinking fountains, grab bars, hand railings, bathroom stalls, dining hall tables) within IHE facilities at least daily or between use as much as possible. Use of shared objects (e.g., lab equipment, computer equipment, desks) should be limited when possible, or cleaned between use.
 - Encourage students, faculty, and staff to keep their personal items (e.g., cell phones, other electronics) and personal work and living spaces clean. Encourage students, faculty, and staff to use disinfectant wipes to wipe down shared desks, lab equipment, and other shared objects and surfaces before use.
- **Shared Objects**
 - Discourage sharing of items that are difficult to [clean or disinfect](#).
 - Ensure adequate supplies to minimize sharing of high-touch materials to the extent possible (e.g., assigning each student their own art supplies, lab equipment, computers) or limit use of supplies and equipment by one group of students at a time and [clean and disinfect](#) between use.
 - Avoid sharing electronic devices, books, pens, and other learning aids.
- **Communal Spaces**
 - Close shared spaces such as dining halls, game rooms, exercise rooms, and lounges if possible; otherwise, stagger use and restrict the number of people allowed in at one time to ensure everyone can stay at least 6 feet apart, and [clean and disinfect](#) between use.

Maintaining Healthy Operations

- **Gatherings**
 - Pursue virtual group events, gatherings, or meetings, if possible, and promote social distancing of at least 6 feet between people if events are held. Limit group size to the extent possible.
 - Limit any nonessential visitors, volunteers, and activities involving external groups or organizations as possible – especially with individuals who are not from the local geographic area (e.g., community, town, city, or county).

- **Telework and Virtual Meetings**
 - Encourage telework for as many faculty and staff as possible, especially employees at [higher risk for severe illness from COVID-19](#).
 - Replace in-person meetings with video- or tele-conference calls whenever possible.
 - Provide student support services virtually, as feasible.
- **Travel and Transit**
 - Consider options for limiting non-essential travel in accordance with state and local regulations and guidance.
 - Encourage students, faculty and staff who use mass transit to consider using other transportation options (e.g., walking, biking, driving or riding by car- alone or with household members only) if feasible.
- **Support Coping and Resilience**
 - Encourage employees and students to take breaks from watching, reading, or listening to news stories, including social media if they are feeling overwhelmed or distressed.
 - Promote employees and students eating healthy, exercising, getting sleep and finding time to unwind.
 - Encourage employees and students to talk with people they trust about their concerns and how they are feeling.
 - Consider posting signages for the national distress hotline: 1-800-985-5990, or text TalkWithUs to 66746

Preparing for When Someone Gets Sick

- **Advise Sick Individuals of Home Isolation Criteria**
 - Sick faculty, staff, or students should not return to in-person classes or school facilities, or end isolation until they have met CDC's [criteria to discontinue home isolation](#).
- **Isolate and Transport Those Who are Sick**
 - Make sure that faculty, staff, and students know they should not come to the school if they are sick, and should notify school officials if they become sick with COVID-19 [symptoms](#), test positive for COVID-19, or have been [exposed](#) to someone with COVID-19 symptoms or a confirmed or suspected case.
 - Immediately separate faculty, staff, and students with COVID-19 [symptoms](#) (such as fever, cough, or shortness of breath). Individuals who are sick should go home or to a healthcare facility, depending on how severe their symptoms are, and follow [CDC Guidance for caring for oneself and others](#) who are sick. IHEs may follow [CDC's Guidance for Shared or Congregate Housing](#) for those that live in IHE housing.
- **Clean and Disinfect**
 - Close off areas used by a sick person and do not use these areas until after [cleaning and disinfecting](#)

- **Notify Health Officials and Close Contacts**
 - In accordance with applicable federal, state and local laws and regulations, IHEs should notify [local health officials](#), faculty, staff, and students immediately of any case of COVID-19 while maintaining confidentiality in accordance with the [Americans with Disabilities Act \(ADA\)](#), FERPA or and other applicable laws and regulations.
 - Inform those who have had [close contact](#) with a person diagnosed with COVID-19 to stay home or in their living quarters and [self-monitor for symptoms](#), and follow [CDC guidance](#) if symptoms develop.

Complete Link:

[Considerations for Institutes of Higher Education](#)