COVID-19 Guidance for Students, Faculty and Staff in Non-Healthcare Settings on Campus

Updated August 19, 2022

The following guidance recommends actions for students, faculty, and staff on campus (except for those in healthcare) who are close contacts of an infected person, or who suspect, or have confirmed, that they have COVID-19. These actions are intended to protect the health and safety of our campus population and are not medical guidance.

What is an exposure?

For COVID-19, a close contact is defined as any person who was within 6 feet of an infected person for a cumulative total of at least 15 minutes over a 24-hour period, starting from 2 days before illness onset or a positive test and until the time the person is isolated, whether or not face coverings were being worn.

Close contact also includes instances where there was direct contact with infectious bodily fluids (like being coughed on), direct physical contact with the person (touching, hugging, or kissing), or touching a surface or object that may have been contaminated with the virus (shared door handles or tables, eating or drinking utensils, for instance) without proper personal protective equipment (PPE). Heavy breathing, such as during exercise, or talking loudly, singing or shouting, may increase the distance that virus particles spread and increase the risk of virus transmission. Being in an enclosed space (like a classroom) for an extended period of time, even if not within 6 feet may also be considered close contact.

Close contact generally does not include brief interactions, such as walking past a person. However, if you have been in a classroom with a student or instructor who has COVID-19 you will be considered to have been exposed.

Instructions for Supervisors/Advisors

While employees or students who suspect they may have COVID-19 should fill out the self-report form themselves, supervisors or faculty advisors may also report suspected or known cases of COVID-19 for their employees/students using the COVID-19 self-report form. The U of U Contact Tracing Team will merge any duplicate records.

For confirmed COVID-19 cases (positive test results), official identification and notification of “close contacts” will be made by contact tracers from either the Salt Lake County Health Department or University of Utah.

The Supervisor/Faculty Advisor should:

- Let close contacts within the potentially impacted area of the infected person know that somebody they may have been exposed to (without disclosing the name) has been identified as having COVID.
- Notify the department head.
What to do if there was an exposure or possible exposure?

If you meet this definition of a close contact, or have been exposed in a classroom, you may be contacted by a Salt Lake County Health Department or a University of Utah Contact Tracing Team or by your supervisor. You might see a missed call from an unknown Utah-based phone number. Please know that if you don’t pick up, we will email your UID email address and/or send a text. Please check these regularly. If you believe it is likely that you have been exposed to someone with COVID-19, such as being in the same household, please follow the instructions below.

1. **If you have been exposed but do not have symptoms, you should do the following (regardless of your vaccination status):**
   a. You do NOT need to quarantine and may return to your normal routine.
   b. Enroll in active monitoring with the University Contact Tracing Team by marking ‘exposed’ to the question about COVID-19 status or test results on the [self-report form](#). During active monitoring, you will monitor your symptoms and temperature for 10 days and report the results.
   c. Wear a tight-fitting mask for 10 days. Day 0 is the day you were exposed.
   d. Get tested 5 days after your exposure using a PCR test (i.e., not a home test). Contact the Contract Tracing Team to report the result. If you test positive, isolate as described below.

2. **If you have symptoms (coughing, fever, respiratory distress, flu or cold symptoms), or suspect that you have COVID-19:**
   a. Get tested. [Symptomatic testing](#) is available on campus. Home tests (rapid antigen) are available at many local pharmacies. You should isolate at home while you are waiting for your results.
   b. Fill out the [self-report form](#) and work with your instructors or supervisors to manage your absence.

3. **Take the appropriate action for your test results:**
   a. If you have a **negative** test and your symptoms are improving, you may return to your regular routine while wearing a mask around others for 10 days.
   b. If you have a **positive** test, isolate at home staying home for 5 days. Day 0 is the day you tested positive or started having symptoms, whichever is first.

**Isolation** is a public health term that means that people who have symptoms of COVID-19 and/or test positive for COVID-19 are separated from the general population until they are no longer infectious.

*For students living in Housing & Residential Education, visit [http://housing.utah.edu/coronavirus](http://housing.utah.edu/coronavirus). In advance of their arrival, all students*
have been asked to create an off-campus isolation plan or be prepared to isolate in place.

For those students and families that are living at University Student Apartments, you should also create an off-campus isolation plan or be prepared to isolate in place. The university will not offer a dedicated building for isolation and quarantine for 2022-23 academic year.

Call your primary care physician or health care provider for guidance on any further actions you should take.

Get another test on Day 5 using an antigen test. COVID testing is available on campus. If your Day 5 is still positive, you should continue to isolate up to 10 days or until your symptoms are gone, you haven’t had a fever for at least 24 hours, and you test negative using an antigen test (e.g., an at-home test), whichever occurs first.

Continue to wear a mask around others.

4. When can I go back to classes or work?

a. If you were exposed and had no symptoms, or if you initially tested negative, you may return to your regular routine while wearing a mask around others for 10 days. Enrolling in active monitoring through the self-report form will assist you in monitoring any symptoms that may develop.

b. If you think or know you had COVID-19, and had symptoms you may leave isolation and return to your regular routine after:
   i. At least 5 days since symptoms first appeared, and
   ii. At least 24 hours with no fever without fever-reducing medication, and
   iii. Symptoms have significantly improved (note that loss of taste and smell may persist for weeks or months after recovery and need not delay the end of isolation), and
   iv. Testing negative on Day 5 using a Rapid Antigen test and contact the Contract Tracing Team to report the result. If you do not get tested or test positive with an antigen test, remain in isolation until you test negative or for 10 days, whichever comes first.

Note: Some people may require a longer period of isolation. People who are severely ill with COVID-19 might need to stay home longer than 10 days and up to 20 days after symptoms first appeared.

Persons who are severely immunocompromised may require testing to determine when they can be around others. Please talk to your healthcare provider for more information. If testing is available, it may be recommended by your healthcare provider. Your healthcare provider will let you know if you can resume being around other people based on the results of your testing.
Further Information:

- University of Utah COVID-19 Information: [https://coronavirus.utah.edu/](https://coronavirus.utah.edu/)