



## PHLN guidance on microbiological laboratory infection control measures for SARS-CoV-2 (the virus that causes COVID-19)

### Revision History

<i>Version</i>	<i>Date Endorsed by PHLN</i>	<i>Revision note</i>
1.0	14 April 2020	Initial document

Microbiological and molecular microbiological laboratories play a critical role in the testing of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (the virus that causes coronavirus disease 2019 (COVID-19)), that guides patient management and the public health response to the outbreak. PHLN is providing the following guiding principles to help minimise the risk of infection among laboratory staff, and to facilitate sustained capacity to test for SARS-CoV-2, as well as to maintain other required service levels.

### General Workplace Guidelines

- Working from home is strongly encouraged where feasible.
- Social distancing should be practiced in the workplace by all staff, consistent with national guidelines Social Distancing for Coronavirus (COVID-19)<sup>1</sup>. Staff to try to maintain an interpersonal distance of a minimum of 1.5 metres within the laboratory. During lunch and other breaks, and ensure the 4 m<sup>2</sup> rule is being applied whenever possible. Implementation may consist of whole of laboratory planning, closing shared tea rooms, reviewing distancing options for cleaners and stores people, and moving all lab communication online.
- Other specific steps include:
  - stopping shaking hands to greet others;
  - holding meetings via video conferencing or phone call;
  - putting off large meetings to a later date;
  - holding essential meetings outside in the open air if possible;
  - promotion of good hand, sneeze and cough hygiene;
  - provision of alcohol based hand rub for all staff and workers;
  - eating lunches at desks or outside rather than in the lunch room;
  - regularly cleaning and disinfecting surfaces that many people touch;
  - limiting food handling and sharing of food in the workplace;
  - avoidance of non-essential travel;
  - promotion of strict hygiene among food preparation staff; and
  - considering rescheduling, staggering or cancelation of non-essential meetings.

## Mitigation of Potential SARS-COV-2 Exposure in the Workplace

A risk-based approach is recommended to mitigate potential COVID-19 spread among laboratory staff. This should align with sections of CDNA National Guidelines for Public Health Units<sup>2</sup> relevant to health care workers, and includes:

- Rotational and/or separate rostering of laboratory staff to be implemented where possible, to avoid cross-infection among laboratory teams. This includes laboratory managers and supervisors that may be in close contact with those directly testing for SARS-CoV-2 in the laboratory.
- Supplementary laboratory staff may be credentialed, inducted, and given basic training in readiness for deployment into the essential laboratory.

Additional measures that may be considered as community circulation of SARS-CoV-2 rises to significant levels include:

- Consideration may be given to laboratory staff in critical areas to pre-emptively wear a surgical mask while at work to reduce transmission from pre- to early-symptomatic cases (if any) in the laboratory where physical distancing measures cannot be fulfilled (ie would fulfil CDNA National Guidelines for Public Health Units criteria for close contact with a case, such as cumulative 2 hours in the same space, or 15 minutes face to face contact over the preceding 24 hours).

Staff must act so as to exclude SARS-CoV-2 infection from the workplace:

- Laboratory staff must not attend work with fever and/or respiratory symptoms.
- Laboratory staff must follow current public health guidelines and not attend work if they have been in close contact with a confirmed, probable or suspect case of COVID-19 (either in the community or at work) within the past 14 days and have not been protected with appropriate personal protective equipment (PPE). If COVID-19 is subsequently ruled out for the probable or suspect case with which the laboratory worker has been in contact, via a negative laboratory test done in a manner compliant with National Guidelines for Public Health Units, then the Laboratory staff member may return to work after sighting of the result by laboratory leadership.
- Laboratory staff must closely monitor their health and should potential CoVID-19 symptoms develop at work, they should follow internal processes for notification, isolation and access to testing.

## Management of Staff Identified as Contacts in the Workplace

Staff who are contacts of a SARS-CoV-2 infected individual in the workplace as defined in CDNA National Guidelines for Public Health Units must follow internal processes for notification and should be categorised as close contacts where appropriate. Close contacts must self-isolate. Asymptomatic close contacts do not require laboratory testing.

- Staff who have been wearing PPE may not be categorised as close contacts, and are not required to isolate but should continue to self-monitor their symptoms.
- Priority testing is recommended for laboratory staff to assist in workforce management. Protocols may include:
  - Home specimen collection for testing that is immediately transported to the laboratory for priority testing; or
  - Priority testing request forms made available to laboratory staff that can be presented at staff clinics, general practitioners, or specimen collection centres if available for immediate action.

## Return to Work for Infected Laboratory Staff

- Laboratory staff who are probable or confirmed cases, must meet the following criteria as specified in the current CDNA [National Guidelines for Public Health Units before](#) returning to work:
  - the person has been afebrile for the previous 48 hours;
  - resolution of the acute illness for the previous 24 hours;
  - be at least 7 days after the onset of the acute illness; and
  - PCR negative on at least two consecutive respiratory specimens collected 24 hours apart after the acute illness has resolved – this will be reviewed as the pandemic evolves in Australia.

## References

1. <https://www.health.gov.au/news/health-alerts/novel-coronavirus-2019-ncov-health-alert/how-to-protect-yourself-and-others-from-coronavirus-covid-19/social-distancing-for-coronavirus-covid-19>
2. [https://www1.health.gov.au/internet/main/publishing.nsf/Content/7A8654A8CB144F5FCA2584F8001F91E2/\\$File/interim-COVID-19-SoNG-v2.5.pdf](https://www1.health.gov.au/internet/main/publishing.nsf/Content/7A8654A8CB144F5FCA2584F8001F91E2/$File/interim-COVID-19-SoNG-v2.5.pdf)