



ACUPUNCTURE &
INTEGRATIVE MEDICINE
COLLEGE, BERKELEY

AIMC

**COVID-19 SAFETY PLAN
MANUAL**

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INTRODUCTION

This site-specific plan for reopening the AIMC facility during the COVID-19 pandemic was initially written over June and July 2020. Since then, revisions have been made in response to changing guidance from public health authorities. Although vaccines remain broadly available, transmission of COVID in our community remains prevalent. Therefore, our ongoing effort is to continue to provide a high standard of academic and clinical education in a learning environment that prioritizes the safety of students, faculty, staff and patients.

The overall safety plan seeks to mitigate exposure and transmission through:

- Procedures for entry to the facility
- Guidance for using common areas in the clinical and didactic areas
- Protocols for disinfection, appropriate face coverings, physical distancing, hand-washing/sanitizing and optimal air ventilation
- Protocols for screening, testing, quarantine, isolation, contact tracing, and return to campus

This plan spans safety procedures for the entire facility of AIMC. It encompasses safety during on-campus didactic classes, as well as clinic routines for on-campus clinic shifts and telehealth online clinic shifts. It addresses protocols for restrooms and the library and outlines how COVID-19 related incidents will be handled.

During this COVID-19 crisis, this manual also acknowledges that in order to support students in moving through the internship levels, special considerations may need to be made on a case by case basis.

As COVID-19 research, policy and social dynamics evolve, aspects of AIMC's plan will evolve and sections of this manual will be updated. Likewise, as we move forward with reopening for on-campus activities, daily practice will uncover further ways the school's plan will need to be refined or shifted. The school prioritizes clear and ongoing communication in order to coordinate efforts on the part of every individual in the school body.

As we move forward into these unknown times, let us move as a well-coordinated community, maintaining high standards for safety, professionalism and academic excellence.

Joseph Davis
Clinic Director
August 2021

CAMPUS ENTRY

BEFORE COMING TO CAMPUS

Prior to heading to campus, all students, faculty, administration, patients and visitors must review the self-assessment form for guidance in self-screening for signs and symptoms of COVID-19 as well as possible exposure through recent activities.

SELF-ASSESSMENT COVID-19

In the AIMC self-assessment form, we ask all individuals to attest that they are not experiencing:

- Fever (100.4°F/38°C)
- Chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

The form also asks individuals to declare that:

- They do not believe they have been exposed to someone with a suspected and/or confirmed case of the Coronavirus/COVID-19.
- If they have been diagnosed with COVID-19, they have been cleared as non-contagious according to guidance from public health authorities.

WEEKLY PCR TESTING FOR VACCINE-EXEMPT INDIVIDUALS

Per CDC guidelines for Institutes of Higher Education, those individuals that have qualified for vaccine-exempt status are required to submit a weekly negative PCR/NAAT to be on campus.

- A copy of this test is to be emailed to pcrtest@aimc.edu before Sunday, 8PM, in order to attend class that week.
- The test must be dated within the last 7 days.
- Rapid tests (antigen tests) will not be accepted.

FACE COVERINGS

All individuals on campus are required to wear face coverings. Before entering the building each person will be assessed for acceptable face covering. These include:

- Cloth face coverings that are store-bought or homemade, which cover the nose, mouth and chin and are secured by elastic or lines that hook around the ears or tie behind the head
- Disposable face masks
- N95 masks

Face coverings that we do not allow at AIMC are:

- Bandanas
- Scarves
- Valve masks
- Random fabric or clothing repurposed to cover the nose and mouth

ENTRY PROCEDURES

- All individuals entering the AIMC campus must come through the front door facing Shattuck Ave.
- At the front entrance, we check:
 - ◆ Temperature
 - ◆ Appropriate face covering. We do not allow bandanas, scarves, valve masks or random fabric repurposed to cover one's face. Disposable face masks will be provided.
- Inside the entryway:
 - ◆ Use hand-sanitizer immediately
 - ◆ Sign the attestation to self-assessment and consent to be on campus form.

ON CAMPUS

- After signing in, students and faculty can proceed to their classrooms or to the student clinic.
- Please note that the student lounge is now accessible. Students may use the student lounge and remove masks while actively eating or drinking. Vaccine exempt students are strongly recommended to avoid any areas within the facility where unmasked people are present.
- There is no eating in the Clinic Consult area.
- We cannot emphasize enough to exercise the maximum degree of care, awareness and responsibility in order to ensure your own protection and the protection of others. This includes
 - ◆ Appropriately wearing your face mask at all times
 - ◆ Vaccine-exempt students should attempt to maintain an appropriate distance when possible. Requests may be made to move desks away from other students, and to sit near open windows and/or air filters, which are in every room.
 - ◆ Washing your hands with soap and water for at least 20 seconds or using hand sanitizer
 - ◆ Disinfecting all areas you've come in contact with while taking your class, including massage tables and other equipment

DIDACTIC EDUCATION

ONLINE CLASSES

Due to the shelter-in-place ordinance, the AIMC campus closed temporarily and nearly all didactic classes moved online in the second half of 2020. Some practical hands-on classes were offered on campus in the Fall 2020 trimester with limited class sizes. In the Fall 2021 term, AIMC will offer a combination format of online classes, hybrid classes, and in-person classes. In-person classes that don't require a hands-on component will be available in streaming format.

ON-CAMPUS DIDACTIC CLASS SAFETY PROCEDURES

All students and faculty entering campus for classes must enter following the facility entry procedures. the following protocols must be followed:

- Students and faculty must wear a face covering at all times
- Vaccine-exempt students are recommended to sit at minimum 6 feet apart, preferably by an open window and/or air filter
- Windows shall remain open for the duration of the lecture for ventilation, unless external air quality concerns are especially prevalent (e.g.- during wildfire season)
- Students may not share pens, markers, or other school supplies
- **At break, students:**
 - May gather in the student lounge and remove masks while actively eating or drinking, but are recommended to eat and drink outside the building
 - Vaccine-exempt students are strongly encouraged to avoid the student lounge area, or any other area where people are not wearing masks (actively eating or drinking)

CLINICAL EDUCATION

COVID-19 CLINIC FORMAT

In-person clinic shifts will largely return to pre-pandemic workflows, with the following added safety measures:

- All patients will receive a pre-visit screening survey via Jane EHR for any symptoms that may indicate exposure to COVID or active COVID infection, and a testification of vaccination status. Interns must verify that the screening survey has been completed by the patient before their arrival. If the patient did not complete the online survey, then the intern must wait for the patient and conduct the screening before the patient enters the building.
- Temperature will be taken at reception before rooming the patient.
- Patients may request any vaccine-exempt interns remain outside the room for the duration of their visit
- Thorough cleaning of each room following treatment (see below)
- **Fitted** N95 masks are recommended for all vaccine-exempt interns, but not required.
- As per extant clinic policy, there is no eating in the Clinic Consultation area.

CAMPUS CLINIC SHIFT PROCEDURES/PROTOCOLS

INTERN ARRIVAL

When students arrive for their shifts 15 minutes before the first appointment time, they will complete all necessary screenings and sign-in at the front desk.

The interns should then check the treatment room to be certain it is clean, well-stocked, and appropriately set up for an in-person patient appointment, with attention to maximum physical distancing of chairs, air filters functional and turned on, and the treatment table set up.

For Level 1 interns, the interviewing intern will wait for the patient to arrive at the clinic front door, while the charting intern prepares the patient's forms and chart on JANE. The charting intern will check if the pre-appointment survey has been completed. If not, this must be performed before bringing the patient back to the treatment room.

RECEIVING THE PATIENT

Level 2 and Level 3 interns will wait for their patients' arrival in the reception area. When the patient arrives at the front door, the intern will:

1. Assess for **proper face cover**
 - a. (See p. 5 regarding acceptable face coverings and how they should be worn) If the patient does not have an appropriate face cover, the intern will give the patient a disposable face mask.
2. **Check their temperature** with the AIMC provided no-touch thermometer and make sure the patient does not have a fever (100.4 F/ 38C)

With acceptable face covering, a complete pre-appointment survey or oral screening, and no fever, the patient may be brought back to the treatment room. Upon entry:

- The intern will have the patient use **hand sanitizer**
- The interviewing intern will measure the patient's **oxygen saturation** ([>94% is normal](#)) with the provided oximeter. The charting intern will document the results from the thermometer and oximeter.
 - If oxygen level is < 94%, double-check
 - Alert the supervisor
 - Assess for symptoms and exposure to COVID
 - If necessary, escort patient to exit, refer to COVID testing sites
- The interviewing intern will begin intake with the patient
- After the in-person acupuncture appointment, the interviewing intern will escort the patient directly from the treatment room to the exit.

INTERN/PATIENT FLOW CHART

In each treatment area is a sign outlining clinic procedures. To help orient level 1 intern groups to the flow of intern roles with a patient, the following summary is posted in each treatment area.

The table below applies to Level 1 interns. For Level 2 and Level 3 interns, interviewing, charting, and needling are all done by the same student, as intakes and treatment are one-on-one.

In a level 1 shift, up to three interns can get patient count if one intern conducts the intake, another one charts, and the third one needles.

Role Responsibilities for Level 1 Interns

INTERVIEWING INTERN	CHARTING / NEEDLING INTERN
<ul style="list-style-type: none"> ● Properly wash hands or use hand sanitizer ● Wait in entry area for patient ● As the patient approaches the front door, assess the face covering. If necessary, offer a disposable face mask. ● Confirm the patient's first name and take temperature. ● With proper face covering and no fever, allow the patient through the front door and instruct to immediately sanitize hands, sign or hand in pre-filled consent form ● Lead patient directly to intake area 	<ul style="list-style-type: none"> ● Set up chart in JANE
<ul style="list-style-type: none"> ● Use oximeter to check oxygen levels in blood <ul style="list-style-type: none"> ○ If oxygen level is < 94%, double-check ○ Assess for symptoms and exposure to COVID ○ If necessary, escort patient to exit, refer to COVID testing sites 	<ul style="list-style-type: none"> ● Document oximeter reading <ul style="list-style-type: none"> ○ If oxygen level is < 94%, double-check ○ Alert supervisor
<ul style="list-style-type: none"> ● Proceed with intake 	<ul style="list-style-type: none"> ● Proceed with charting
Consult with supervisor in designated consultation area	
	<ul style="list-style-type: none"> ● Implement acupuncture needle treatment
<ul style="list-style-type: none"> ● Conduct post-treatment counseling ● Escort patient to exit 	
>> IMPLEMENT DISINFECTION PROTOCOLS <<	

DISINFECTION PROTOCOL AFTER EACH PATIENT

Every on-site intern is responsible for disinfecting the treatment area **after each patient**. While disinfecting the treatment area, the interns must:

- Don disposable gloves
- Dispose of:
 - Table paper
 - Clean field
- Wiping down with disinfectant the following:
 - Waterproof pillow cases
 - Treatment table, including headrest
 - Patient chair
 - Supply table
 - All appointment tools: oximeter, blood pressure cuff, thermometer
 - Patient restroom door handles and occupancy sign, if used
- When the treatment area has been sanitized,
 - Replace table paper
 - Reset sanitized pillows
 - Reset clean field
- Bring any used towels to a dirty laundry bin (located on the 1st and 2nd floors) and replace
- Dispose of gloves and wash hands with soap and water for at least 20 seconds

END OF SHIFT PROCEDURES

In addition to duties for disinfecting the treatment area, every intern is responsible for insuring that the following duties are completed at the end of the on-site shift:

- Sanitize all wipeable surfaces, including desks and chairs used by interns in treatment room and supervisor/student consultation area
- Sanitize all computer keyboards, mouse, tablets that were used
- Refill/close alcohol and cotton containers as needed
- Properly position chairs in intake area; Use taped floor markers as guidelines for distance measures
- Turned off and unplug lights and equipment (especially heaters)
- Notify Clinic Admin if:
 - Sharps container is $\frac{3}{4}$ full
 - Clinic supplies are low
 - Equipment is damaged
 - Dirty laundry bin is full
 - Trash receptacle is full
- **FILL OUT THE CLINIC DISINFECTION CHECKLIST AND BRING IT TO THE FRONT DESK WHEN YOU SIGN OUT.**

Level 2/3 interns must bring their own BP cuff and pulse oximeter AND stock up their own clinic rooms. Supplies will be located in the storage rooms downstairs. Each room will be supplied with pillows, massage table sheets, gowns, gloves, a sharps container, and hand sanitizer dispensers.

HERB PHARMACY PROCEDURES

ARRIVAL FOR HERB SHIFT

All personnel reporting to the Herb Pharmacy will follow the facility entry procedures. After checking in at the Front Desk and sanitizing hands, Herb Room Personnel first go to the conference room at the back of the building and obtain a clean apron to be worn during the shift. They then report to the Herb Room.

SANITARY SUPPLIES & PERSONAL HYGIENE

At the start of each shift, all Herb Room personnel wash hands at the Herb Room sink. The non-touch paper towel dispenser in the Herb Room is used to dry hands. Hands must be washed before filling a prescription. If personnel step away from prescription filling to work on the computer or leave the herb room, hands must be washed in order to resume or start filling a new prescription.

REQUIRED PPE

The Pharmacy Manager, Herb Pharmacy Interns and Work Study Interns are required to use disposable gloves and face masks during their shift.

- **Gloves** are worn while filling prescriptions or when touching herbs
- **Masks** are worn while filling prescriptions
- **Aprons** or lab coats can be worn by Interns as a barrier between themselves and the herbs if desired.

PHYSICAL DISTANCING

The Herb Room is open to Herb Room personnel only.

When presenting an herbal formula to be checked for accuracy, interns place the formula on the metal table in the center of the room, then step away from the table and maintain 6 foot distance while a Licensed Acupuncturist confirms for accuracy.

DISINFECTING PROTOCOLS FOR HIGH-TOUCH SURFACES

The following need to be disinfected at the end of each 4-hour Herb Room shift with the corresponding disinfectant:

70% alcohol

- Computer keyboards
- Keyboard covers
- Mouse

Natural cleaners (with Thymol)

- Metal Work Table tops
- Metal Scale buttons

Cleaning products are kept under the sink.

Herb drawer handles and refrigerator handle are used less often. They will be cleaned and disinfected once per week. Or, at the end of any shift where they have received excessive use.

CLINIC COMPETENCIES AND COMPREHENSIVE EXAMS

Because of COVID-19, AIMC has created telehealth clinic shifts to support the students' education and advancement toward accumulation of necessary clinic hours and patient count. In the Fall 2020 term, AIMC reopened onsite clinic shift opportunities for students. In order for students to progress from one clinic level to the next level, appropriate competencies must be completed as well as comprehensive exams.

CLINIC COMPETENCIES

Many clinic competencies can be completed through telehealth clinic shifts. However, several clinic competencies must be completed in person. For students who are comfortable coming onto campus or who have an on-campus clinic shift, competencies and point location tests can be coordinated with their supervisor or the Clinic Director at any time before they reach the number of hours to move into the next level. Information/forms/documentation/prereqs on Level can be found on the AIMC website.

If a student is unable to come onsite to complete in-person competencies, on a **case-by-case approval by the ASC**, arrangements may be made with the Clinic Director for continuing to the next level via telehealth shifts, with the agreement and understanding that once the student is able to come onsite, all in-person competencies must be completed before a student can participate in the on campus clinic.

Point location tests will be conducted on Week 5 of the term. Patients will be blocked off from scheduling on Jane. Students will receive an email reminder that includes exam details (type of question for each intern Level) ahead of time.

COMPREHENSIVE EXAMS

Comprehensive exams are administered each term on the fourth Friday. Students are responsible for registering for the relevant level Comprehensive Exam (CE 100 or CE 200) during the Registration period prior to the term they intend to sit for the exam. All [prerequisites](#) must be met to qualify for the exam. The exam is administered online. Students are allotted 3 attempts to pass the Comprehensive Exams. Failure to pass after the 3rd attempt results in Academic Dismissal.

POINT LOCATION EXAMS

Point location exams will take place during the fifth week of the term. Intern and supervisors will be notified the week prior. Onsite interns will take their point location exams during their normally scheduled clinic shift, as will telehealth interns. A 70% passing grade is required to continue to the next clinic level. Interns will test at the level they are in during Week 5.

CLINIC HOURS AND PATIENT COUNT TRACKING

During on campus clinic shifts and telehealth clinic shifts alike, students need to use the clinic hours sheet to track their hours and patient count. Admin generates clinic hours sheets and the sheets can be found on the [Frequently Used Forms](#) page. Other forms of documentation such as excel sheets are not acceptable. These forms will act as the master document that when completed needs to be submitted to the Clinic administration for the individual student clinic files.

While supervisors will continue to sign off on forms during on campus clinic shifts, for telehealth shifts, Clinic admin will verify the hours and patients via JANE.

CLINIC SHIFT MAKE-UPS

Clinic hours missed will need to be made up and can be scheduled with the Clinic Liaison. For academic holidays, please refer to the [Registrar's Office](#) page.

AIMC does not permit banking of clinic hours for future terms.

Students needing clinic make-up hours can also do so in the herbroom. However, make up in the herbroom is only available to students who have completed CP 251.

While priority will be given to graduating students, clinic admin may not be able to accommodate their first options in clinic shifts.

RESTROOMS

RESTROOM PROTOCOLS

- Face masks are required at all times when using the restroom.
- Close the toilet cover before flushing to avoid aerosols.
- Everyone must wash their hands with soap and water for at least 20 seconds.

LIBRARY LOAN PROCEDURES

The AIMC Library room will resume normal operations in the fall. All surfaces will be regularly sanitized.

- Vaccine-exempt students are recommended to observe social distancing guidelines while in the library, and use the facility only during low utilization periods so as to reduce their risk of exposure.
- Contact the Librarian (pward@aimc.edu) with any questions .

PROFESSIONAL ACUPUNCTURE CLINIC

The Professional Clinic is available for in-person appointments. All providers using the facilities must abide by all the policies regarding masking, sanitization, and patient screening detailed in this manual above. They must also abide by the AIMC Vaccination Policy.

Staff and Student Exposure To COVID-19 & On-Campus Restrictions

The following information (based on [CDC](#) and [State of California](#) guidance) provides strict guidelines based on specific types of exposures. However, staff and students are urged to speak with their Clinic Supervisors and/or the Clinic Director whenever there is concern about any exposure scenarios.

“Close contact” means being within six feet of a COVID-19 case for a cumulative total of 15 minutes or greater in any 24-hour period within or overlapping with the “high-risk exposure period” defined by this section. This definition applies regardless of the use of face coverings.

“COVID-19 Symptoms” means: fever of 100.4 degrees Fahrenheit or higher, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhea, unless a licensed health care professional determines the person’s symptoms were caused by a known condition other than COVID-19.

If you have had close contact with a person with confirmed SARS-CoV-2 infection, you must take the following steps:

All exposed persons, even those who were fully vaccinated or previously infected and do not have to self-quarantine, should self-monitor for COVID-19 symptoms and strictly adhere to all [recommended non-pharmaceutical interventions](#) (e.g., wearing a mask, maintaining a distance of at least 6 feet from non-household members, frequently performing hand hygiene, avoiding crowds and poorly ventilated indoor spaces) for **14 days** following the last date of exposure.

Fully vaccinated individuals who remain asymptomatic and do not need to quarantine should get tested 3-5 days after exposure.

- If they test **positive**, they should immediately self-isolate and contact their healthcare provider with any questions regarding their care
- If they test **negative**, they should continue monitoring symptoms and following recommended non-pharmaceutical interventions, including masking in public indoor settings, for 14 days. In order to protect household members, exposed close contacts who do not have to quarantine due to being fully vaccinated or previously infected should consider masking in the home during this time, especially if they are immunocompromised or around persons who are immunocompromised, not fully vaccinated, or at increased risk of severe disease.

Non-Vaccinated individuals:

- **Self-isolate for 10 days** following exposure.

- Monitor for symptoms, as above, and follow non-pharmaceutical risk reduction interventions, as above

Post-Exposure Testing

Symptomatic Individuals

Testing is recommended for all symptomatic individuals to diagnose or exclude SARS-CoV-2 infection, regardless of vaccination status. Testing options:

- Option 1: One PCR test
- Option 2: Two Sofia rapid tests with respiratory specimens collected ≥ 24 hours apart

Asymptomatic Staff and Students

[CDC](#) recommends testing for anyone with a close contact exposure to SARS-CoV-2, regardless of vaccination status. Testing should be done 3-5 days after exposure.

Close contact is understood to mean “someone who has been within 6 feet of a person who is positive for COVID-19 for at least 15 minutes,” per the [Alameda County Health Department](#).

Individuals who may have been exposed to SARS-CoV-2 and are on a 10-day quarantine due to their vaccine-exempt status may complete a 7-day quarantine with a test-based approach. Test on Day 5 or 6 after initial exposure with PCR to minimize the likelihood of false negatives. If the test result is negative, the individual may return to campus on Day 8 after completing a seven day quarantine. However, the individual must adhere to symptom monitoring for a total of 14 days, beginning on the day of exposure. Link to: [CDC \(Options to reduce quarantine\)](#)

Reporting of Staff and Students with Confirmed COVID-19 to AIMC

Any staff who tests positive for COVID-19 must be logged for required OSHA tracking to clinicdirector@aimc.edu. This message must include:

- Name
- Date of symptom onset and positive test
- Last day onsite
- A list of people who were onsite and qualify as in close contact with them (2 days prior to symptom onset). Your instructors, clinic supervisors, and administration can help you determine this list.
- Any high risk contacts you are aware of (from the clinic)

- Phone number

The Clinic Director will notify those that were in close contact with you for potential exposures, while keeping your name private. Investigation will occur as necessary for COVID-19 positive cases

CONTACT TRACING AFTER EXPOSURE (Per the [City of Berkeley](#))

If one of our on-campus community members has tested positive, the Clinic Director will perform an investigation, make a list of contacts, and report results to Berkeley Public Health. The procedures, in line with the City of Berkeley, are as follows:

1. When a student/faculty/administrator/patient (“the individual”) tests positive for COVID-19, the Clinic Director will perform an investigation to identify anyone who may have been exposed. The individual’s schedule and work/study location will be reviewed to determine who they have had close contact with during their infectious period. For the purposes of the investigation:
 - **Close contacts:** a “close contact” is anyone who was within 6 feet of the infected employee for at least 15 minutes.
 - **Exposure dates**
 - If the individual has symptoms of COVID-19, the infectious period begins 2 days before symptoms first appeared
 - If an individual tested positive without symptoms, review their interactions for their last two days at the worksite
2. Report the COVID-19 occurrence to Berkeley Public Health’s Communicable Disease Prevention & Control Unit
3. Notify any students/faculty/administration/patients who have been identified as potentially being exposed.
 - Vaccinated individuals may continue to self-monitor their symptoms. PCR testing is recommended 3 to 5 days after exposure.
 - If an on-site **student** is self-isolating, the immediate faculty, other students within on-site class/clinic shift and administration will be notified that the student has come down with symptoms and will be tested for COVID-19. *The student’s personal identification information, however, will be kept private from the larger student body.*
 - **Patient** personal information is private and confidential, though potentially exposed students/faculty/administrators will be notified of the infection.
4. All people who may have been exposed will be encouraged to get tested through their health care provider, or at a public COVID-19 [testing site](#).

Return to Campus Criteria For Staff and Students Ruled Out for COVID-19

Symptomatic staff who have been ruled out for COVID-19 with either antigen or PCR tests (see Post-Exposure Testing section above) may return to work once the following criteria are met:

- At least 24 hours have passed since last fever without the use of fever-reducing medications and
- Symptoms (e.g., cough, shortness of breath) have improved

Return to Campus Criteria For Staff and Students with Confirmed or Presumed COVID-19

The following return to work guidelines are based on [CDC](#) recommendations and are for use with people who have been confirmed to have COVID-19 based on testing or presumed to have the disease based on the clinical judgment of the provider.

Symptom-Based Strategy (preferred)

Individuals with [mild to moderate](#) illness who are not severely immunocompromised:

- At least 10 days have passed since symptoms first appeared and
- At least 24 hours have passed since last fever without the use of fever-reducing medications and
- Symptoms (e.g., cough, shortness of breath) have improved

Individuals with [severe to critical illness](#) or who are severely immunocompromised:

- At least 10 days and up to 20 days have passed since symptoms first appeared and
- At least 24 hours have passed since last fever without the use of fever-reducing medications and
- Symptoms (e.g., cough, shortness of breath) have improved
- Consider consultation with infection control experts

Individuals who were **asymptomatic** throughout their infection and are not severely immunocompromised:

- At least 10 days have passed since the date of their first positive viral diagnostic test.

Definitions from CDC

Mild Illness: *Individuals who have any of the various signs and symptoms of COVID 19 (e.g., fever, cough, sore throat, malaise, headache, muscle pain) without shortness of breath, dyspnea, or abnormal chest imaging.*

Moderate Illness: Individuals who have evidence of lower respiratory disease by clinical assessment or imaging and a saturation of oxygen (SpO_2) $\geq 94\%$ on room air at sea level.

Severe Illness: Individuals who have respiratory frequency >30 breaths per minute, $SpO_2 < 94\%$ on room air at sea level (or, for patients with chronic hypoxemia, a decrease from baseline of $>3\%$), ratio of arterial partial pressure of oxygen to fraction of inspired oxygen (PaO_2/FiO_2) <300 mmHg, or lung infiltrates $>50\%$.

Critical Illness: Individuals who have respiratory failure, septic shock, and/or multiple organ dysfunction.

When to Seek Care

Persons in self-isolation or self-quarantine should seek medical assistance:

- If new symptoms develop or their symptoms worsen.
- If the infected or exposed person is going to a medical office, emergency room, or urgent care center, the facility should be notified ahead of time that the person is infected with or has been exposed to COVID-19; the person should wear a mask for the clinical visit.
- Any one of the following emergency warning signs signal a need to call 911 and get medical attention immediately:
 - Trouble breathing.
 - Bluish lips or face.
 - Persistent pain or pressure in the chest.
 - New confusion or inability to arouse.
 - New numbness or tingling in the extremities.
 - Other serious symptoms

In Case Of an Outbreak at AIMC

An outbreak is defined as 3 positive COVID cases within 14 days.

During an outbreak, AIMC will evaluate whether it is necessary to implement physical distancing and barriers for our community. Additional testing may be required in order to return to campus.

In the case of a major outbreak (defined as 20 or more cases in our community), AIMC will implement physical distancing, additional barriers, and mandated PCR testing for all community members who intend to be on campus.

FORMS

The following forms are specific to entering the AIMC facility during COVID-19.

1. COVID-19 Self-Assessment /Consent to be on Campus
2. Informed Consent to be Treated On Campus

RESOURCES

Worksite exposure, City of Berkeley Guidance: <https://www.cityofberkeley.info/covid19-worksite-exposure/>

Alameda County Contact Tracing Guidance: <https://covid-19.acgov.org/contact-tracing.page>

State of California Guidelines for Fully Vaccinated People:

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/COVID-19-Public-Health-Recommendations-for-Fully-Vaccinated-People.aspx>

CDC Covid Data Tracking Tool: <https://covid.cdc.gov/covid-data-tracker/index.html#county-view>

Alameda County Covid Information: <https://covid-19.acgov.org/index>

Alameda County Free Testing Sites: <https://covid-19.acgov.org/covid19/testing.page?#Community>

Alameda County Guidance on Quarantine and Isolation: <https://covid-19.acgov.org/isolation-quarantine.page?>

City of Berkeley Masking Guidelines: <https://www.cityofberkeley.info/covid19-masks/>

CDC Guidance for Institutes of Higher Education where everyone is not fully vaccinated:

<https://www.cdc.gov/coronavirus/2019-ncov/community/colleges-universities/considerations.html#section3>

CDC Testing, Screening Guidance for IHEs:

<https://www.cdc.gov/coronavirus/2019-ncov/community/colleges-universities/ihe-testing.html>

CA Dept of Public Health Guidelines for Testing:

<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Updated-COVID-19-Testing-Guidance.aspx>