

Coronavirus-2019 (COVID-19): Guidance for Veterinary Practices

DC Health has reviewed information from the Centers for Disease Control and Prevention (CDC) and the American Veterinary Medical Association (AVMA) to create this interim guidance for veterinary practices. Veterinary practices should implement the following measures to help reduce the risk of COVID-19 transmission among employees, clients, and the community. For additional information, visit coronavirus.dc.gov/healthguidance.

Please note that anyone experiencing symptoms of COVID-19, or who is required to isolate or quarantine¹ due to COVID-19 diagnosis or exposure must not work at or visit a veterinary practice due to the risk of exposing others. Symptoms of COVID-19 may include: fever (subjective or 100.4 degrees Fahrenheit), 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.

General information

- **The risk of pets spreading SARS-CoV-2 infection to people is very low.**
- A small number of pets (including dogs and cats) worldwide have been reported to be infected with SARS-CoV-2 mostly after close contact with people with COVID-19.
- Signs compatible with SARS-CoV-2 infection in animals include fever, coughing, difficulty breathing or shortness of breath, lethargy, sneezing, nasal/ocular discharge, vomiting, and diarrhea.
 - It is not recommended that animals be routinely tested for COVID-19. Other more common causes of symptoms should be ruled out.
 - For additional guidance on determining when to test an animal for SARS-CoV-2 please visit cdc.gov/coronavirus/2019-ncov/animals/animal-testing.html.
- **If veterinarians see a new, concerning illness in an animal that has had close contact with a person who tested positive for COVID-19**, contact your state public health veterinarian (**Nivedita Ravi-Caldwell**, Nivedita.RaviCaldwell@dc.gov | 202-442-9143) or state veterinarian (**Vito DelVento**, Vito.DelVento@dc.gov | 202-724-8813)

How COVID-19 spreads

- The main way COVID-19 spreads is from person-to-person when an infected person breathes out droplets and particles that contain the virus.
 - People can become sick with COVID-19 by breathing in infected air, being splashed or sprayed in their eyes, nose, or mouth with infectious droplets (e.g., from a cough), or touching their eyes, nose or mouths with hands that have the virus on them.
- People who are 6 feet or closer to the infected person are most likely to get sick.
- COVID-19 can sometimes spread between people in the air over longer distances, especially in crowded indoor settings with poor ventilation.
- COVID-19 can also spread from environmental surfaces, but this is uncommon.

¹For more information see *Guidance for People who Test Positive for COVID-19 and their Household Members* and *Guidance for Quarantine after COVID-19 Exposure* at coronavirus.dc.gov/healthguidance.

COVID-19 prevention fundamentals

COVID-19 Vaccination

Vaccination is one of the most important actions veterinary clinic staff can take to protect themselves and others. COVID-19 vaccines are highly effective even against the circulating variants of the virus that causes COVID-19, including the Delta variant. However, no vaccines are 100% effective and there are breakthrough cases of COVID-19 even in fully vaccinated people. Fortunately, if you catch COVID-19 when you are fully vaccinated, the infection will likely be mild. The vaccines are very effective at preventing severe illness, hospitalization, and death. At this point, most people who become very sick with COVID-19 are unvaccinated people.

People are considered fully vaccinated 14 days after they received the final dose of a COVID-19 primary² vaccination series (after the second dose of a 2-dose series, or after one dose of a single-dose vaccine).

Per DC Health order issued August 16, 2021, all health care workers including veterinary staff in the District of Columbia must be vaccinated for COVID-19. The deadline for health care workers care to have received at least the first dose of the Pfizer or Moderna vaccine, or one dose of the Johnson & Johnson vaccine was September 30, 2021. For more information, see coronavirus.dc.gov/release/mayor-bowser-and-dc-health-announce-vaccination-requirement-district-health-professionals.

- Support staff in getting vaccinated by providing leave options for them to get the vaccine and for if they experience vaccine side effects.
- Find out more about the COVID-19 vaccine at coronavirus.dc.gov/vaccine.

Masks

Masks are very important tools for preventing the spread of COVID-19. Face masks protect the wearer and protect other people. Wearing masks also prevents asymptomatic/pre-symptomatic spread, which is estimated to be responsible for more than 50% of COVID-19 cases.

- All people must wear a face mask or cloth face covering while in a veterinary clinic³, with the exception of temporary removal of masks for eating and drinking or for changing into a new mask or cloth face covering. (*Note:* In situations where staff are temporarily unmasked, social distancing is very important)
- Mask wearing is especially important for people who are not fully vaccinated or immunocompromised.
- To be effective, masks must be worn correctly. Masks should be 2-3 layers of tightly woven fabric, cover the nose and mouth, and fit snugly against the sides of the face.
- A mask is not a substitute for social distancing.

Social distancing

Social distancing remains **an important tool for preventing the spread of COVID-19.**

- **All people in a veterinary clinic (staff, volunteers, clients⁴, visitors, vendors) are**

² The standard vaccine course before any extra (i.e., “booster”) doses

³ Except when the situation requires them to wear a facemask or a respirator. See PPE (personal protective equipment) table on page 6-7.

⁴ **Client(s)** in this setting refers to any human accompanying an animal to an appointment.

recommended to maintain social distancing of at least 6 feet from other people as much as possible.

- Social distancing strategies that veterinary practices can consider implementing:
 - Have a separate entrance and exit for the facility to allow one-way flow of foot traffic.
 - Install physical barriers, such as sneeze guards and partitions, in areas where it is difficult for staff to remain at least 6 feet from clients (such as at reception areas), or for staff to remain at least 6 feet from each other.
 - Modify facility layout to allow for 6 feet of social distancing between people in the facility (e.g., remove seats in waiting rooms and employee areas). Use visual markers or signs to reinforce social distancing policies.
 - Monitor areas prone to congregation (e.g., common areas, staff breakrooms) and use visual cues and room occupancy limits to help prevent congregation.
 - Stagger staff shift and break start times.
 - Discourage physical contact (e.g., handshakes, hugs, high-fives) in the workplace. Encourage people to greet each other verbally or use other non-contact means of communication (e.g., waving).
 - Document verbal consent for care rather than requiring written signatures.
 - Use contactless electronic payment as much as possible.

Screening

- All people entering the facility must be screened for signs and symptoms of COVID-19 infection regardless of vaccination status. This includes all staff, volunteers, clients, visitors, and vendors.
 - Staff screening (e.g., symptom questionnaires) should occur before they start their shifts.
 - Screening may occur either at entry to the facility or prior to arrival (e.g. via phone or electronic format)
 - For detailed screening guidance, see *Guidance for Screening in the Healthcare Setting*.
 - For a sample screening questionnaire, see *Screening Tool Guidance*.
 - These guidances can be found at coronavirus.dc.gov/healthguidance.
- Pets should also be screened for exposure to people with suspected or confirmed COVID-19. This can take place before appointments or upon arrival.
- Post signage stating that no persons with a fever or symptoms of COVID-19 are permitted to enter the facility.
- Facilities must maintain a daily record of persons who have been in the facility for at least 30 days to assist with contact tracing. Information collected must include name, date and time of visit, phone number, and email (if available). This information must be provided within 24 hours if requested by DC Health if a case of COVID-19 occurs at your establishment, in order to assist with contact tracing.

Animal health care during the COVID-19 pandemic:

Caring for patients and Interacting with clients:

Since COVID-19 is mainly spread person to person (and not between people and animals), preventing COVID-19 requires more attention to staff-client interactions. Steps should be taken to minimize face to face interactions.

- Strategies to consider to decrease risk:

- Maximize the use of telemedicine for veterinary appointments.
- Utilize pre-visit triage to determine which patients require in-person evaluation.
 - Use clinical judgement to assess whether there is any suspicion for the pet having COVID-19.
- For in-person evaluations, utilize pet curbside drop-offs and pick-ups involving little to no contact with clients, as much as feasible.
- For clients who must enter the clinic with their pet:
 - Do not permit clients to bring extra people into the clinic with them.
 - Limit the total number of clients in the facility at one time.
 - Minimize number of clients in waiting rooms.
 - Consider admitting client/pet directly from car to examination room.
 - Have staff members (rather than clients) hold animals during evaluation.

If treating a sick animal with suspected or confirmed SARS-CoV-2 infection:

- Direct the client and animal to a single exam room or isolation room.
- Limit the number of veterinary personnel that have contact with the animal.
- Limit or prohibit visitors and non-essential foot traffic in the area where animals with suspected or confirmed SARS-CoV-2 infection are being treated/housed.
- Have plans for safe handling and disposal of animal waste. Certain waste produced during the care of animals that are/may be infected with SARS-CoV-2 needs to be disposed of as medical waste: animal feces, blood and body fluids and any disposable materials soiled with these waste products.

Sick or quarantined pet owners:

- To the maximum extent possible, do not allow sick clients or clients who in quarantine due to COVID-19 exposure to accompany pets to their appointment. They should ask a healthy trusted person from another household to take the pet to its appointment.
 - **Do not** deny a pet emergency care because their owner is sick or has been exposed to COVID-19.
- **If emergency animal care is medically necessary and a pet owner who has COVID-19 or is quarantining due to COVID-19 exposure must enter a facility:**
 - Require the person to wear a surgical facemask. Provide a mask to the person if they do not have their own.
 - Direct the client and animal to a single exam room or isolation room.
 - Limit the number of veterinary staff that enter the room, handle the animal, or interact with the client and wear **appropriate PPE** as described on page 6-7.
 - Clean and disinfect the room, surfaces, supplies, floor, and equipment located within 6 feet of the client after they leave.
- **If you are a mobile or house call veterinarian and are called to evaluate a animal in the home of a client who has COVID or is quarantining due to COVID-19 exposure,** follow the American Veterinary Medical Association (AVMA)'s *Considerations for Mobile and House Call Veterinarians During COVID-19*, available at [avma.org/resources-tools/animal-health-and-welfare/covid-19/mobile-house-call-veterinarians-covid19-pandemic](https://www.avma.org/resources-tools/animal-health-and-welfare/covid-19/mobile-house-call-veterinarians-covid19-pandemic).
- If a pet owner is sick with COVID-19, a different member of the household should care for their animal at home, if possible. The ill owner (or ill household members) should avoid contact with the pet, including petting, snuggling, being kissed or licked, and sharing food. If an ill individual must care for the pet, they should wash their hands before and after interacting with the pet and wear a mask.

Additional infection control recommendations:

- **Hygiene:**
 - All veterinary staff should practice strict hand hygiene, including: before and after all pet contact, client contact, contact with potentially infectious material, before putting on and after removing PPE (including gloves), after using the restroom, before eating, after blowing their nose, coughing, or sneezing, and after handling dirty laundry.
 - Avoid touching your eyes, nose, and mouth with unwashed hands.
 - Cough or sneeze into your elbow, or use a tissue to cover your nose and mouth, then throw the tissue into a trash can.
 - Employers must provide hygiene supplies for use by staff and visitors, including alcohol-based hand rub (ABHR) with 60 - 95% alcohol, tissues, and no-touch receptacles for disposal, at entrances, waiting rooms, exam rooms, and pet owner/client check-ins.
- Restrict unnecessary visitors to the practice (e.g., employees' family, friends, pets)
- Encourage employees to avoid using other employee's phones, desks, offices or other work tools and equipment (e.g., pens, pencils, etc.).
- Remove toys, magazines, and other frequently touched objects that cannot be regularly cleaned from waiting areas.
- Laundering items exposed to SARS-CoV-2: (such as scrubs, gowns, blankets, or towels)
 - It is safe to launder these items together with other unexposed linens.
 - Use the warmest appropriate water setting and dry items completely.
 - Wear gloves and a mask.
 - Always wash hands after handling dirty laundry.

Additional staff considerations:

- Implement leave policies that are flexible and non-punitive, and that allow sick employees to stay home. Leave policies are recommended to account for the following:
 - Employees who report COVID-19 symptoms
 - Employees who were tested for COVID-19 and test results are pending
 - Employees who tested positive for COVID-19
 - Employees who are a close contact⁵ of someone who tested positive for COVID-19 and need to quarantine
 - Employees who need to stay home with their children if there are school or childcare closures, or to care for sick family members
 - Staff who need to get the COVID-19 vaccine
 - Staff who are experiencing side effects from the COVID-19 vaccine
- Keep abreast of current law, which has amended both the DC Family and Medical Leave Act and the DC Sick and Safe Leave Law and created whole new categories of leave, such as Declared Emergency Leave that will end in November 2021.
- Learn about and inform your employees about COVID-related leave provided through any new federal laws and all applicable District law relating to sick leave.

⁵ **Close contact:** Someone who was within 6 feet of an infected person for a cumulative total of 15 minutes or more over a 24-hour period, starting from 2 days before illness onset (or for asymptomatic infected people, 2 days prior to positive test collection).

- Employers should educate employees about COVID-19. Refer to coronavirus.dc.gov for more information.

Personal Protective Equipment

- **For recommended PPE based on animal or pet owner history, please see the table below.**
- Employers must provide comprehensive PPE training to employees whose job duties may require them to use PPE. For more information see cdc.gov/hai/prevent/ppe.html.
- **Employees must wear gloves when handling animals** and interacting with clients.
- PPE must be discarded/changed between patients, and hand hygiene performed before donning and after doffing PPE (to remove any pathogens that might have been transferred to bare hands during the removal process).
- Clinicians and staff must wear eye protection (goggles, protective eyewear with solid side shields, or a full-face shield), gloves, and a gown during procedures likely to generate splashing or spattering of blood or other body fluids.
- N95 respirators must only be used in the context of a respiratory protection program, which includes medical evaluations, training, and fit testing.
- Clinicians and staff should remove their mask or cloth face covering and put on a fresh mask/cloth face covering when leaving the facility at the end of their shift.
- For information regarding PPE conservation, see *Conserving the Supply of PPE in Healthcare Facilities* at coronavirus.dc.gov/healthguidance.

Required PPE for clinical scenarios based on companion animal and owner's history⁶

	Cloth face covering	Facemask	Eye protection	Gloves	Gown	Respirator
Healthy companion animal without exposure to a person with COVID-19 like symptoms ⁷	X	X		X		
Companion animal with an illness that is not suspicious for SARS-CoV-2 infection and without exposure to a person with COVID-19-like symptoms ⁷	X	X		X		

⁶ PPE standard precautions should be applied in any setting where veterinary care is delivered and if exposure to exudates, feces, saliva, or other animal fluids is possible.

⁷ In this scenario, either a cloth face covering **or** a facemask is acceptable

	Cloth face covering	Facemask	Eye protection	Gloves	Gown	Respirator
Companion animal with an illness that is not suspicious for SARS-CoV-2 infection, but who has been exposed to a person with COVID-19 like symptoms		X		X		
Companion animal with an illness that is suspicious for COVID-19.		X ⁶	X	X	X	X ⁶
Aerosol-generating procedure for any animal without exposure to a person with COVID-19 like symptoms		X ⁶	X	X	X	X ⁶
Aerosol-generating procedure for any animal with an exposure to a person with COVID-19 like symptoms.			X	X	X	X
Any procedure on a confirmed COVID positive animal.			X	X	X	X
Any procedure where a person with suspected or confirmed COVID-19 will be present.			X	X	X	X

Establish a plan for COVID-19 exposure

- Establish a plan in the event an employee, client, or visitor is diagnosed with COVID-19.
- Staff members who become sick at work must be separated from other employees and pet owners and sent home immediately.
- For detailed information about how to manage staff members exposed to COVID-19 or diagnosed with COVID-19, refer to *Guidance for Healthcare Personnel Monitoring*,

⁶ A respirator may be preferred per practitioner’s judgement

Restriction, and Return to Work at coronavirus.dc.gov/healthguidance.

- Pet owners should be requested to notify veterinary practices if they are diagnosed with COVID-19 within 14 days of their visit.
- Identify a point of contact at the facility that an employee can notify if they test positive for COVID-19 and choose to disclose this information
- If an employee chooses to report to the facility that they are positive for COVID-19, the facility must have a notification process to share the following with staff:
 - Education about COVID-19, including the signs and symptoms of COVID-19.
 - Referral to the *Guidance for Contacts of a Person Confirmed to have COVID-19*, available at coronavirus.dc.gov.
 - Information on options for COVID-19 testing in the District of Columbia, available at coronavirus.dc.gov/testing.
- Establishments must notify DC Health when:
 - An employee who interacts frequently with pet owners notifies the practice they **tested positive for COVID-19** (not before results come back)
AND
 - The pet owner was on the premises **during their infectious period**.
 - The infectious period starts two days before symptom onset or date of test if asymptomatic, and typically ends 10 days after symptom onset/test date.
- Notify DC Health by submitting an online form on the DC Health COVID-19 Reporting Requirements website dchealth.dc.gov/page/covid-19-reporting-requirements:
- An investigator from DC Health will follow up within 24-48 hours to all appropriately submitted notifications. Please note this time may increase as cases of COVID-19 increase in the District.

Additional resources

- *COVID-19 and Animals* at cdc.gov/coronavirus/2019-ncov/daily-life-coping/animals.html
- *COVID-19 Clinic Signage* avma.org/resources-tools/animal-health-and-welfare/covid-19/communicating-veterinary-teams-clients/clinic-signage
- *What Veterinarians Need to Know* at avma.org/resources-tools/animal-health-and-welfare/covid-19

These recommendations will continue to be updated. Please visit coronavirus.dc.gov for the most updated information.