









Key Question: What should the exclusion policy be for HCPs or food handlers (or HCPs who also handle food) be during a GI outbreak?

Ref. List # Author/Year ID#	Participants, Intervention (or exposure), Methods and Outcome Measures	Results	Conclusions and Comments: Strength of Design, Quality and Directness of Evidence
Friesema, I., Vennema, H., et al 2009-12- 10 Co-hort study	54 wards implemented a pre-described set of IC measures for outbreaks. Staff, resident attach rates where evaluated for association with exclusion for 48-72 hrs. Inconsistency in IC measures across sites	Exclusions of staff for 48-72 hours may contribute to a lower attach rate in staff but not in length of outbreak.  Adobe Acrobat Document	Exclusion of staff for 48-72 hrs. post illness may have contributed to a lower attack rate in staff. Mod. Design Direct evidence High quality
Vivancos, R., Sunkvist, T et al. In press Retrospective summary review	Outbreak reports from 63 outbreaks with a 72 hr. exclusion policy were compared to 33 outbreak reports with a 48 hr. exclusion policy.	Attack rate lower in staff with a 72 hr. exclusion policy. No change in pt. attach rate or duration of outbreak. Does not differentiate between staff who handle food and those who do not  Adobe Acrobat Document	Weak design and quality but results consistent with others
Grieg, J., Todd, e. et al 2007 Retrospective summary review	816 outbreak reports were reviewed (1927-2006). In many food handlers where known or suspected to be implicated. Goal was to understand the dynamics of transmission of infectious agents to and from the food worker in a variety of settings. Complete report described in 6 different articles	Conclusions support meticulous hand hygiene, no bare hand contact with ready to eat food, exclusion for work if symptomatic, hygienic food preparation areas. No recommendation on exclusion after symptoms  Adobe Acrobat Document  Adobe Acrobat Document subside	Weak design, quality moderate. Thorough review and discussion of all documentation.
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Note: See Evidence Grading System for definitions re design and quality ratings and for criteria for the evidence grade assigned.

Text Summary For Key Question
<p><u>Recommendation:</u> It is recommended that employees remain off work for 48 hours following resolution of symptoms. This may decrease the risk of the individual relapsing while at work. Diligent hand hygiene, which includes all surfaces of hands, wrists, finger tips and under fingernails, is essential upon return to work Evidence Grade: B11</p> <p><u>Rationale for evidence grade rating:</u> Evidence from cohort study and multiple summery reviews, clinical experience and opinions of experts.</p>