## LM Employee COVID-19 Positive or Symptoms

You are confirmed positive for COVID-19 via a lab test or are showing signs of COVID-19 illness

For additional information on COVID-19 symptoms, please reference the <u>CDC website</u>

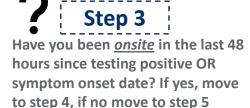


Notify your leader, leave the facility if onsite



Contact the nearest LM Wellness Center ASAP, ensure you have:

- □ Your symptom start date or positive test date
- Last date onsite
- U Whereabouts while onsite (building, quad, room, etc...)
- Best way to be contacted about your case
- Ask the Wellness Center for your case number once the case is initiated



to step 4, if no move to step 5



Please gather the names & employee ID numbers for any individual that you had direct contact\* within your preceding 48 hours onsite prior to testing positive OR exhibiting symptoms of COVID-19:

• Please do not provide information or direction to the individuals you identify

\*Direct contact is defined as within 6 feet for a cumulative total of 15 minutes or more over a 24 hour period) with someone confirmed positive for COVID-19 or exhibiting **COVID-like symptoms** 



**Contact** your leader and provide the guidance you received from the Wellness **Center including:** 

- Actions you must take
- **Quarantine duration**
- □ Your case number
- □ Name and Emp ID of direct contacts from step 4 (if applicable)

## Your Leader will:

- Notify all identified direct contacts identified in step 4 of next steps related to COVID exposure and guarantine
- Be contacted by facilities if cleaning is required and to confirm specific locations/details.

LOCKHEED MARTIN PROPRIETARY INFORMATION



You must *remain* offsite for the duration of your Wellness **Center determined guarantine** timeframe and until cleared via automated process.



1 – 2 days prior to your quarantine end date you will receive an electronic survey at the email address provided to the Wellness Center. Please complete this survey ASAP in order to be cleared to return to the facility at the end of your quarantine

## LM Employee COVID-19 Exposed

You had direct contact (within 6 feet for a cumulative total of 15 minutes or more over a 24 hour period) with someone confirmed positive for COVID-19 or exhibiting COVID-like symptoms

## For additional information on COVID-19 symptoms, please reference the <u>CDC website</u>

**Exposed to COVID-19?** 

□ Fully vaccinated and/or have recovered from in the last 90 days?

- □ If Yes, please review the quarantine exemption guidelines. If you qualify for an exemption stop here, monitor for symptoms and remain at the facility. If you test positive or start to show COVID-19 like symptoms please initiate actions identified here.
- □ If No, move to Step 2



Contact your leader and provide the guidance you received from the Wellness **Center including:** Actions you must take

- **Quarantine duration**



Contact the nearest LM Wellness Center ASAP, ensure you

have:

- **Your exposure date**
- **Last date onsite**
- □ Whereabouts while onsite (building, quad, room, etc...)
- Best way to be contacted about your case



You must remain offsite for the duration of your Wellness Center determined quarantine timeframe and until cleared via automated process.



1-2 days prior to your quarantine end date you will receive an electronic survey at the email address provided to the Wellness Center. Please complete this survey ASAP in order to be cleared to return to the facility at the end of your quarantine