As of the week of September 27, 2021, all Mount Sinai Health System (MSHS) employees, hospital staff, faculty members, students, and trainees to whom the MSHS Exemption Committee has granted an exemption from the COVID-19 vaccine mandate, or who have submitted an exemption request that is still pending, must test regularly for infection with the SARS-CoV-2 virus as a condition of continued employment or matriculation. Weekly testing will be conducted through Employee Health Services (EHS) at no cost to the individual. Before MSHS can perform the required testing, you must provide your informed consent to be tested. Please read this consent form carefully. If you have questions, you may email them to testingexempt@mountsinai.org.

Although we will not test you without your informed consent, testing is a condition of continued employment or matriculation for non-vaccinated individuals with approved exemptions. If you do not agree to be tested, you may be subject to disciplinary action, up to and including termination from employment, educational programs, the faculty, or medical staff.

Employees who do not live and/or work near an MSHS EHS site can opt to be tested weekly outside of MSHS and report their results to EHS. In these instances, employees are responsible for any costs related to testing.

Employees who work remotely only need to be tested on weeks that they are working onsite. It is the employee’s responsibility to notify EHS when they are working remotely.

What is the purpose of this form?
- This form gives you information about the MSHS testing program, including the process for testing, the limitations of test results, and the process for notifying you of test results.

How does the onsite MSHS EHS testing program work?
- Individuals must submit a COVID-19 PCR saliva specimen weekly to EHS.
- The testing week is defined as Sunday through Saturday and testing must be completed:
  - At least 3 days apart (e.g. if test is on Friday, the next test cannot be before Monday), and
  - No more than 8 days apart (e.g. if test is on a Monday, the next test must be on or before Tuesday.)
- Employees complete their weekly sample on their own time; they are given home saliva testing kits by EHS when they drop off the current week’s sample.
- Saliva specimens should be prepared no more than 12 hours prior to being dropped off at an EHS site.
- EHS will send all saliva specimens to a MSHS Lab to be analyzed, and will typically be processed within 24-36 hours after drop off.
- Individuals will be informed of test results:
  - Negative results: will be sent to MyChart
  - Positive results: EHS will call the individual. The individual will immediately be removed from work/training and will self-isolate for 10 days. During this time, employees will have to use accumulated PTO or other leave time if available consistent with MSHS policy. Employees may work remotely if previously approved by their manager. Individuals must be cleared by EHS to return to work or training onsite. Additionally, weekly testing may be suspended for up to 90 days.
INFORMED CONSENT FORM
Informed Consent for COVID-19 Saliva Testing

- Positive test results will be shared with your supervisor and others at MSHS who need to know for operational or educational purposes. MSHS is also required to notify government authorities of both positive and negative tests, as well as basic demographic information about the individuals tested. MSHS also may disclose positive and negative tests and basic demographic information within MSHS.
- For employees who work outside of Manhattan, Brooklyn, and Queens at MSHS medical office locations, EHS will coordinate with practice leadership for weekly specimen collection at their work location.

How does the Offsite/Non-EHS testing program work?
- Employees must submit a weekly SARS-CoV-2 PCR tests to EHS.
- With few exceptions, MSHS will accept results of all SARS-CoV-2 PCR (NAAT) tests that have received an EUA (emergency use authorization) from the FDA and are performed at a CLIA-approved lab. Abbott IDnow SARS-CoV-2 Point of Care PCR test will not be accepted. Rapid antigen tests such as the Abbott Binax Now and the BD Veritor Plus Antigen test will also not be accepted.
- The testing week is defined as Sunday through Saturday and testing must be completed:
  - At least 3 days apart (e.g. if test is on Friday, the next test cannot be before Monday)
  - No more than 7 days apart (e.g. if test is on a Monday, the next test must be on or before Monday.)
- A copy of the test results must be uploaded into the Mandatory Testing REDCap tool within 24 hours of your receiving the results.
- It is the employee’s responsibility to notify EHS of positive test results. The employee must also notify their supervisor and self-isolate for 10 days. During this time, the employee will have to use accumulated PTO or other leave time if available. Employees may work remotely if previously approved by their manager. Employees must be cleared by EHS to return to work onsite. Additionally, weekly testing may be suspended for up to 90 days.
- Positive test results will be shared with your supervisor and others at MSHS who need to know for operational or educational purposes. MSHS is also required to notify government authorities of both positive and negative tests, as well as basic demographic information about the individuals tested. MSHS also may disclose positive and negative tests and basic demographic information within MSHS.

Are there any possible risks of getting tested?
- There are no health risks to you from getting tested. Although MSHS has validated the test being used, there is no 100% accurate COVID-19 diagnostic test, and it is possible that the test will result in a false positive or a false negative result. That means that if your test comes back positive, it is possible that in reality there is no COVID-19 infection, and if your test comes back negative, it is possible that in reality there is a COVID-19 infection.

ACKNOWLEDGEMENT AND INFORMED CONSENT TO PARTICIPATE

This form must be completed and returned to your Line Manager/director of education program by Friday, October 1, 2021.
I acknowledge that regular testing for the SARS-CoV-2 virus is a condition of my continued employment or matriculation at Mount Sinai Health System because I have not registered my record of full vaccination with EHS and I have been granted an exemption by the MSHS Exemption Committee or a decision is still pending on my exemption request.

I consent and authorize MSHS to collect samples from me and conduct COVID-19 screening tests on those samples, as described in this informed consent form.

If I choose to be tested outside of MSHS EHS, I am responsible for any incurred charges and am responsible for submitting my test results to EHS weekly through the Mandatory Testing REDCap tool.

I acknowledge that signing this form and participating in the program is voluntary. I acknowledge that MSHS has adopted protocols for COVID-19 screening for individuals covered by the vaccine mandate and that I may be subject to disciplinary action, up to and including termination or dismissal from school/training, if I do not participate in the program.

I authorize MSHS to share test results as described in this informed consent form. I understand that all personal information that I provide as part of the program will be kept confidential and will be disclosed only as described in this informed consent form.

I understand and agree that, in the case of a positive test result, the following information may be provided to government agencies as required by law: the test result and the test subject’s (1) name, (2) date of birth, (3) phone number, and (4) email address; (5) race/ethnicity.

If my screening test result is positive, I agree to abide by MSHS protocols for COVID-19 screening and positive screening test results.

I acknowledge that the result of this test alone is not enough to know for sure if I have been exposed to or infected with the virus that causes COVID-19. I understand that it is possible that this test may produce false positive or false negative results.

I have been informed of the purpose of the test and the test procedure, and I have received a copy of this Informed Consent Form.

I understand and acknowledge that MSHS is not acting as my medical provider, that the tests performed under the program do not replace diagnostic testing or other treatment by my medical provider, and that it is my full responsibility to take any appropriate action with regard to my screening test results or any follow-up diagnosis or treatment. I will seek medical advice, care, and treatment from EHS or my medical provider if I have any questions or concerns about my screening test results.

Name

MSHS Life Number

Signature

Date

I have read this form and any questions have been answered to my satisfaction. I consent to undergo testing as described in this Informed Consent Form.