



Technical Bulletin



Date: March 17, 2020
Topic: Interim Guidelines for Discontinuation of In-Home Isolation and Transmission-Based Precautions among Hospitalized Patients with COVID-19
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To: Health Care Providers, Medical Facilities and Laboratories

Background

Limited information is available to characterize the spectrum of clinical illness, transmission efficiency, and the duration of viral shedding for persons with novel coronavirus disease (COVID-19). Based on available information, about COVID-19 and subject to change as additional information becomes available, on March 16, 2020 the National Centers for Disease Control and Prevention (CDC) issued interim guidance for non-hospitalized patients, please see ([Interim Guidance for Discontinuation of In-Home Isolation for Patients with COVID-19](#)).

Children and adults have done extremely well in terms of recovery, however, the decision to discontinue home isolation should be made in the context of local circumstances. Current options include both **Non-test based** and **Test-based Strategies**.

Non-test-based strategy: Time-since-illness-onset and time-since-recovery strategy

Persons with COVID-19 who have symptoms and were advised to care for themselves at home may discontinue home isolation under the following conditions:

- At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications; **and**,
- Improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,
- At least 7 days have passed *since symptoms first appeared*.

Individuals with laboratory-confirmed COVID-19 who have not had any symptoms may discontinue home isolation when at least 7 days have passed since the date of their first positive COVID-19 diagnostic test and have had no subsequent illness.

Test-based strategy

Previous recommendations for a test-based strategy remain applicable; however, a test-based strategy is contingent on the availability of ample testing supplies and laboratory capacity, as well as convenient access to testing. For providers who choose to use a test-based strategy, the recommended protocol has been simplified so that only one Nasopharyngeal (NP) Swab is needed at every sampling.

Persons who have COVID-19 who exhibit symptoms and were directed/advised to care for themselves at home may discontinue home isolation under the following conditions:

- Resolution of fever without the use of fever-reducing medications; **and**,
- Improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,
- Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from at least two consecutive nasopharyngeal swab specimens collected ≥ 24 hours apart* (total

of two negative specimens). Please see Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons Under Investigation (PUIs) for 2019 Novel Coronavirus (2019-nCoV) for specimen collection guidance.

For Hospitalized Patients with COVID-19 Under Transmission-Based Precautions

Interim guidance for discontinuation of Transmission-Based Precautions and disposition of hospitalized patients has been developed based on available information about COVID-19 and what is known about similar diseases caused by related coronaviruses (i.e., MERS-CoV and SARS-CoV). This guidance is subject to change as additional information becomes available. For Hospitalized Patients, see (Interim Guidance for Discontinuation of Transmission-Based Precautions Among Hospitalized Patients with COVID-19).

The decision to discontinue Transmission-Based Precautions for hospitalized patients with COVID-19 should be made on a case-by-case basis in consultation with clinicians, infection prevention and control specialists, and public health officials. This decision should consider the following:

1. Disease severity, and
2. Illness signs and symptoms, and
3. Results of laboratory testing for COVID-19 in respiratory specimens

Considerations to discontinue Transmission-Based Precautions include all of the following:

- Resolution of fever, without use of antipyretic medication
- Improvement in illness signs and symptoms
- Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from at least two consecutive sets of paired nasopharyngeal and throat swabs specimens collected ≥ 24 hours apart (total of four negative specimens—two nasopharyngeal and two throat swabs).
- Due to a severe shortage in testing availability, *Nevada Governor's COVID-19 Medical Advisory Team* determined that two tests as CDC recommends are currently not needed to discontinue Transmission-Based, and one single test that includes two negative specimens (NP and OP) would be adequate at this time to discontinue Transmission-Based Precautions

* All test results should be final before isolation is ended. Testing guidance is based upon limited information and is subject to change as more information becomes available

Reporting

Healthcare providers should **immediately** notify both infection control personnel at their healthcare facility and their local/state health department in the event of a PUI for COVID-19.

- **Nevada Division of Public and Behavioral Health (DPBH):** (775)-684-5911 (M-F 8:00 AM to 5:00 PM); (775)-400-0333 (after hours)
- **Southern Nevada Health District (SNHD):** (702)-759-1300 (24 hours)
- **Washoe County Health District (WCHD):** (775)-328-2447 (24 hours)
- **Carson City Health and Human Services (CCHS):** (775)-887-2190 (M-F 8:00 AM to 5:00 PM); (775)-887-2190 (after hours)

For More Information: Please contact DPBH M-F 8:00 AM to 5:00 PM at (775)-684-5911. The after-hours line can be contacted at (775)-400-0333.



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