Removal of COVID-19 Isolation Precautions

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Discharge Home of Inpatients with COVID-19

- Patients can be discharged home to a private residence whenever clinically indicated.

- If at time of discharge the patient remains on COVID precautions, he/she should continue to self-isolate at home until ALL THREE of the following criteria are met:
  1. At least 3 days (72 hours) have passed since recovery defined as resolution of fever without the use of fever-reducing medications
  2. Improvement in respiratory symptoms (e.g., cough, shortness of breath)
  3. At least 7 days have passed since symptoms first appeared

- Repeat COVID-19 testing is not needed for patients being discharged home to a private residence.

** Please include discharge education in AVS for COVID-19 patients regarding self-isolating from household contacts until above criteria are met.

Removal of COVID Precautions for Known COVID-19 Patients who Remain Hospitalized

- ALL THREE of the following criteria must be met for removal of an inpatient* from COVID-19 precautions:
  1. Resolution of fever without the use of fever-reducing medications for at least 24 hours
  2. Improvement of respiratory symptoms (e.g., cough, shortness of breath for patients not requiring mechanical ventilation and FiO₂ ≤ 40% and PEEP ≤ 5 cm H₂O for patients requiring mechanical ventilation)
  3. Negative results of COVID-19 test from at least two consecutive nasopharyngeal swab specimens collected ≥24 hours apart (total of two negative specimens*)

  *NOTE: A patient with a tracheostomy must have one additional negative COVID-19 test result from a tracheal aspirate sample bringing the total number of negative specimens to three (2 nasopharyngeal and 1 tracheal aspirate). A tracheal aspirate should be collected at time of, or shortly after, the first nasopharyngeal swab specimen.

- Patients cannot be removed from COVID precautions without approval from infection control.

- If patients have improved but persistent respiratory symptoms, and meet criteria for removal of COVID precautions consider placing them in a private room.
Transfer from a JHHS Hospital to Inpatient Rehab Facility, Psychiatry Inpatient Setting, Long Term Care Facility, Group Home, Dialysis Center or Other Institutional Setting

- At the time of transfer, the patient should meet requirements for removal of COVID precautions unless the patient is going to a setting that is specifically equipped to manage patients with COVID-19.

- **ALL THREE** of the following criteria must be met for removal of an inpatient from COVID-19 precautions:
  1. Resolution of fever without the use of fever-reducing medications for at least 24 hours
  2. Improvement of respiratory symptoms (e.g., cough, shortness of breath)
  3. Negative results of COVID-19 test from at least two consecutive nasopharyngeal swab specimens collected ≥24 hours apart (total of two negative specimens*).

  *NOTE: A patient with a tracheostomy must have one additional negative COVID-19 test result from a tracheal aspirate sample bringing the total number of negative specimens to three (2 nasopharyngeal and 1 tracheal aspirate). A tracheal aspirate should be collected at time of, or shortly after, the first nasopharyngeal swab specimen.

- Patients cannot be removed from COVID precautions without approval from infection control.

- If patients have improved but persistent respiratory symptoms, and meet criteria for removal of COVID precautions consider placing them in a private room.

**These criteria will be reviewed regularly to align with bed allocation, prioritization and resources.**

**Return of Patients Confirmed to Have COVID-19 to Ambulatory Clinics or Facilities**

- Refer to the Guidance for the Return of Patients Confirmed to Have COVID-19 to Ambulatory Clinics or Facilities document on the HEIC intranet:
  [https://intranet.insidehopkinsmedicine.org/heic_docs/2019-nCoV_ambulatory_confirmedReturning_to_facility.pdf](https://intranet.insidehopkinsmedicine.org/heic_docs/2019-nCoV_ambulatory_confirmedReturning_to_facility.pdf)