Clinical Alignment Summary: COVID-19 Isolation Precautions

The purpose of this summary is to display how clinical guidance from different organizations is aligned in this topic area.

A
Instituting Isolation Precautions

EMERGENCY DEPARTMENT

Patient has viral respiratory symptoms but has not yet tested for COVID-19

- Provide contact (1)
- Offer to test (1)
- Provide mask guidance (1)

Patient has viral respiratory symptoms and has not yet tested for COVID-19

- Screen patient for respiratory illness, new muscle aches, anosmia or exposure to COVID-19-positive contact in last 14 days (1)
- Isolate and monitor for symptoms, or test if patient has viral respiratory illness (1)

If patient cannot immediately be isolated, sit at least 6 feet apart from others, preferably with physical barrier (3)

AMBULATORY CARE

Patient has viral respiratory symptoms but has not yet tested for COVID-19

- Screen patients telephonically, if possible. If screen +, skill team visit and manage remotely, if clinically appropriate. If not, direct to correct clinical setting (3)
- Provide mask with mask advice, must be worn at all times (3)
- Erase a barrier between patients and front desk personnel to keep 6 feet OR minimize interactions to <10 min.
- Room immediately and keep door closed. Maintain 6 ft distance from others if patient can’t be roomed immediately (3)
- PPE: See ED PPE (3)

B
Removing Isolation Precautions

TRANSFER

COVID-19 patient transferred from hospital to other institution

Facilities include Inpatient Rehab Facility, Psychiatry Inpatient Setting, Long-Term Care Facility, Group Home, Dialysis Center

- Patient should meet criteria for removal of COVID-19 isolation precautions unless patient is being transferred to an institution that is equipped to manage COVID-19 patients (1)
- Must have approval from isolation control (2)
- If respiratory symptoms are improved but persistent, consider isolated patient room (3)

Remove COVID-19 precautions when patient meets all three clinical criteria:

1. Improvement of respiratory symptoms (cough, SOB, not requiring vent) for at least 24 hours apart (patients with tracheostomy require an additional negative test result from tracheal aspirate sample) (4,5)
2. Negative results from two consecutive COVID-19 nasopharyngeal tests at least 24 hours apart (1,4,5)
3. Resolution of fever without antipyretics for at least 3 days (2,4)
4. Improve of respiratory symptoms/clinically improving (cough, SOB, not requiring vent) (1,4,5)
5. Negative results from two consecutive COVID-19 nasopharyngeal tests at least 24 hours apart (1,4,5)

Remove COVID-19 isolation precautions when inpatient

- Resolution of fever without antipyretics for at least 3 days and improved respiratory symptoms (1)
- Improvement of respiratory symptoms (2)
- At least 7 days have passed since first positive test or symptoms (3)

COVID-19 patient is tested for COVID-19

- Conduct telehealth/video/phone visits with patients for any visit that does not require an in-person visit (2)
- If respiratory symptoms remain, keep isolation orders (1,4)

COVID-19 patient is hospitalized

- Test isolation precautions (1)
- If respiratory symptoms are improved but persistent, consider isolated patient room (3)
- PPE: See ED PPE (3)

CONTINUED HOSPITALIZATION

COVID-19 patient remains hospitalized

Remove COVID-19 precautions when inpatient meets all three criteria (1):

1. Resolution of fever without antipyretics for at least 7 days (1,4,5)
2. Improvement of respiratory symptoms (2)
3. At least 7 days have passed since first positive test or symptoms (3)

Remove COVID-19 isolation precautions when inpatient

- Resolution of fever without antipyretics for at least 3 days (2)
- Improvement of respiratory symptoms (3)
- At least 7 days have passed since first symptom appeared (4)

- Repeat testing NOT required to achieve resolution of infection status (1)
- Two negative COVID-19 tests over 24 hours apart required for discharge (3)
- Infection control approval is required to resolve isolation status/isolation orders (4)

DISCHARGE FROM INPATIENT

COVID-19 patient discharged home from inpatient facility

Patients should self-isolate at home until time of final test result (1)

- Resolution of fever without antipyretics for at least 3 days (1,4,5)
- Improvement of respiratory symptoms (2)
- At least 7 days have passed since first symptom appeared (3)

- Repeat testing NOT required to achieve resolution of infection status (1)
- Two negative COVID-19 tests over 24 hours apart required for discharge (4)
- Infection control approval is required to resolve isolation status/isolation orders (4)

SOURCES

2. Massachusetts General Hospital Guidance for Providers with Suspected Viral Respiratory Illness. Updated 3/2/2020
3. Massachusetts General Hospital Guidance for Ambulatory care staff with Contact, Close, and Influenza Isolation. Updated 1/27/2020
4. Massachusetts General Hospital Guidance for Ambulatory care facilities with Contact, Close, and Influenza Isolation and Discontinuation of isolation. Updated 3/24/2020
5. DHFP Isolation, Infection Control and Staff Mask Guidelines for Symptomatic and Asymptomatic Patients. Updated 4/22/2020

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