Guidance for Patients Confirmed to Have COVID-19 (with or without symptoms) Attending Ambulatory Clinics or Facilities

Conduct telehealth/video/phone visits with patients for any visit that does not require an in-person visit. If a patient must be seen in-person, the patient must meet criteria for discontinuation of COVID-19 isolation precautions unless the clinic is approved to care for patients confirmed to have COVID-19. Providers should wear surgical or procedural mask and face shield with standard precautions when caring for patients who meet criteria for discontinuation of COVID-19 precautions.

COVID-19 isolation precaution discontinuation for known COVID-19 patients of all ages who either (1) are discharged and returning to ambulatory clinic or (2) diagnosed in ambulatory setting and attending ambulatory clinic.

(Note these criteria are the same for those patients who remain hospitalized)

## Strategies to Discontinue COVID-19 Isolation Precautions for Patients with COVID-19

<table>
<thead>
<tr>
<th>Uncomplicated Patient Cases¹</th>
<th>Complicated Patient Cases¹ or Group Care Settings²</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>10-day Symptomatic Protocol</strong> for patients who had symptoms of COVID-19 at time of first positive test: Can be removed from COVID-19 precautions when they have been afebrile for at least 24 hours without antipyretics, symptoms have improved and 10 days have passed since the first positive test was obtained. Retesting is not recommended.</td>
<td><strong>20-day Symptomatic or Asymptomatic Protocol</strong> for patients with complicated cases or patients going to group care settings. Can be removed from COVID-19 precautions when 20 days have passed since the first positive test was obtained. Retesting is not recommended.</td>
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<tr>
<td><strong>10-day Asymptomatic Protocol</strong> for patients who did not have symptoms of COVID-19 at time of first positive test and never developed symptoms: Can be removed from COVID-19 precautions when 10 days have passed since first positive test. Retesting is not recommended.</td>
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</tbody>
</table>

¹**Complicated patient cases:** Patients who required ICU care during their hospitalization, are severely immunocompromised or are pregnant or less than 2 weeks post-partum. Patients who do not meet these criteria are considered uncomplicated patient cases.

²**Group care settings:** Group care settings include inpatient rehabilitation, psychiatry facilities or are receiving dialysis.

³**Severely immunocompromised patients:** The degree of immunocompromise for the patient is ultimately determined by the treating provider. Conditions include but are not limited to active chemotherapy, active hematologic malignancy, solid organ or bone marrow transplant recipient, untreated HIV infection with CD4 T lymphocyte count < 200, primary or acquired severe immunodeficiency disorder, treatment with high-dose prednisone or the equivalent, or treatment with other immunocompromising agents. For a list of high-risk immunosuppression medications, click here.

### Important Notes

- **Outside COVID-19 Test:** Determine if the patient has had outside COVID-19 viral testing performed.
  - Although COVID-19 test results available through CRISP may pull into EPIC, some patients may have COVID-19 testing obtained at other facilities. All patients should be asked if they have had COVID-19 positive test in the past 20 days prior to arrival. If patient says yes to having a COVID-19 diagnosis, reassess with isolation discontinuation measures above.

- **Repeat Testing:** Repeat COVID-19 viral testing after first positive is not indicated for either complicated or uncomplicated cases within 90 days from positive result. Retesting of patients to remove precautions is not recommended at JHM. A positive or negative result will not alter the above recommendations for discontinuation of isolation precautions. Re-testing after 90 days may be considered for patients with NEW symptoms. Patients presenting with new symptoms more than 90 days after their first positive result should be placed in airborne and contact isolation with eye protection until it is determined if testing is indicated.
  - **Pre-Procedure Testing:** Do not re-test known COVID-19 positive patients as part of pre-procedure testing.
- **Elective Procedures:** Do not perform elective procedures within 20 days of first positive test.

- **New Symptoms:** If a complicated or uncomplicated patient’s case met criteria for COVID-19 precaution removal and later develops new symptoms highly concerning for a new episode of COVID-19 that are not explained by the patient’s ongoing COVID-19 course of illness or another cause (e.g., new bacterial pneumonia, pulmonary embolism, volume overload), treat as a PUI; place in negative pressure room using airborne and contact PPE with eye protection and re-test the patient.

- **Isolation Flag Removal:** Please contact your infection control representative to remove precautions if COVID-19 isolation flag does not auto-discontinue at day 20.

- **Serology Tests:** Serology tests are not being used to guide isolation.

- **The CDC describes the evidence on which these recommendations are based here:** [www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html](http://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html)

**Caregivers accompanying patient**

- [JHM Visitor Restriction Guidelines Grid Related to COVID-19](#)

**Appropriate PPE for caring for patients with previous history of COVID-19**

- All staff and patients older ≥ 3 years of age should wear masks throughout the clinic visit per universal masking policy.
- Cloth masks are allowed for patients and visitors.
- Staff caring for patients should wear a surgical/procedural mask with a face shield.
- Always follow standard precautions (e.g., gloves and gowns if expect contact with bodily fluids).
- Please see the HEIC website for additional PPE guidance: [https://intranet.insidehopkinsmedicine.org/heic/](https://intranet.insidehopkinsmedicine.org/heic/)