COVID-19 Isolation Precaution Discontinuation

Last updated August 4, 2020 at 3:50 PM EST

COVID-19 isolation precaution discontinuation for known COVID-19 patients of all ages who either (1) remain hospitalized, (2) are discharged and returning to ambulatory clinics or (3) are discharged home or to another facility:

<table>
<thead>
<tr>
<th>Strategies to Discontinue COVID-19 Isolation Precautions for Patients with COVID-19</th>
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<tbody>
<tr>
<td><strong>Uncomplicated Patient Cases</strong>&lt;sup&gt;1&lt;/sup&gt;</td>
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<tr>
<td>10-day Symptomatic Protocol 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>
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<tr>
<td>10-day Asymptomatic Protocol 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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<sup>1</sup>Complicated patient cases: Patients who required ICU care during their hospitalization, are severely immunocompromised<sup>3</sup> or are pregnant or less than 2 weeks post-partum. Patients who do not meet these criteria are considered uncomplicated patient cases.

<sup>2</sup>Group care settings: Group care settings include inpatient rehabilitation, psychiatry facilities or are receiving dialysis.

<sup>3</sup>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

- **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 JH. 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.
  - **Re-Testing on Admission:** Do not re-test known COVID-19 positive patients on admission to the hospital if they have met above criteria for COVID-19 isolation precaution discontinuation and do not have new symptoms concerning for COVID-19. Place on regular floor with standard precautions of surgical/procedure mask and face shield. Use airborne and contact PPE with eye protection for likely aerosol generating procedures. Do not re-test known COVID-19 negative patients on admission if they have had COVID-19 test in the past 7 days if they are asymptomatic.
  - **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.
    - **Emergency Procedures:** If emergency surgery or procedure is required within 20 days of first positive test for an uncomplicated case treat as a PUI; place patient in negative pressure room using airborne and contact PPE with eye protection and perform procedure with airborne and contact PPE with eye protection in negative pressure operating room. JHM Coronavirus Testing Strategy for ASYMPTOMATIC Patients Needing Surgery or a Procedure in a Procedure Suite during COVID-19 Pandemic.
- **New Symptoms:** If a complicated or uncomplicated patient<sup>1</sup> case met criteria for COVID-19 precaution removal and later develops new symptoms highly concerning for a new episode of COVID-19 (e.g., fever with new cough, shortness of breath, sore throat) 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.

- **Patient Discharge to Home:** For patients being discharged home who have not met criteria for COVID-19 isolation precaution removal, please include discharge education in AVS for COVID-19 patients regarding self-isolating from household contacts until removal criteria are met. If patients cannot arrange to have private transportation (i.e., not Uber or Lyft) at the East Baltimore campus, please contact Lifeline at ext. 4-7777 and ask to speak with HopComm. There are transport services (e.g., cab, taxi, etc.) that transport COVID-19 positive patients.

- **Patient Discharge to Another Facility:** Re-testing may be required by an accepting facility if the patient is being transferred from a JHHS hospital to either an inpatient rehab facility, psychiatry inpatient setting, long-term care facility, group home, dialysis center or other institutional setting.
  - At the time of transfer, unless the patient is going to a setting that is specifically equipped to manage patients requiring COVID-19 isolation precautions, the patient should meet JHM requirements for removal of COVID-19 precautions prior to transfer.
  - If the accepting facility requires negative COVID-19 testing prior to transfer, engage with discharge care coordinator to clarify the testing requirements at that specific facility and work with the patient and the care team to meet those requirements.

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

- 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)