



INFECTION CONTROL POLICY & PROCEDURE

Title: Duration of Isolation and Precautions for Adults with COVID-19

Number: IC-6003

Effective Date: 02-15-22

Revised Date:

Review Date: (no revisions):

PURPOSE

In order to stop the transmission of a COVID-19 infection, patients with an active disease are either quarantined as an outpatient or placed in special respiratory and droplet precautions while hospitalized. The CDC established clinical criteria based on the duration since the first positive COVID-19 PCR test and resolution of symptoms. This information is then used to determine the recommended period of isolation and precautions for adults as a means to define when a patient is considered no longer infectious for COVID-19.

POLICY

Harbor Regional Health Community Hospital will follow recommendations described by the CDC plus State and local/county health authorities to determine the recommended period of isolation and precautions for adults as a means to define when a patient is considered no longer infectious for COVID-19.

DEFINITIONS

CDC defines the following acuity of COVID-19 illness as:

- **Mild Illness:** Individuals who have any of the various signs and symptoms of COVID-19 (fever, cough, sore throat, malaise, headache, muscle pain) without shortness of breath, dyspnea, or abnormal chest imaging.
- **Moderate Illness:** Individuals who have evidence of lower respiratory disease by clinical assessment or imaging, and a saturation of oxygen greater than or equal to 94% on room air
- **Severe illness:** Individuals who have respiratory frequency greater than 30 breaths per minute, SPO2 less than 94% room air (or, for patients with chronic hypoxemia, a decrease from baseline of greater than 3%), ratio of arterial partial pressure of oxygen to fraction of inspired oxygen (PaO₂/FiO₂) less than 300mmHg, or lung infiltrates greater than 50%.
- **Critical Illness:** Individuals who have respiratory failure, septic shock, and/or multiple organ dysfunction.
- **Fever** is defined as a temperature of greater than 100.4 degrees.

PROCEDURE

1. Duration of isolation and precautions

- Patients with a mild clinical course due to COVID-19 remain infectious no longer than 10 days after symptom onset and resolution of fever for at least 24 hours, without fever-reducing medications, and with improvement of other symptoms.

- Patients who are moderately immunocompromised and have at least 20 days from onset of symptoms and at least 24 hours have passed since last fever without the use of fever-reducing medication and symptoms have improved (cough, shortness of breath).
- Patients with more severe to critical illness or severely immunocompromised and have at least 20 days from first symptom onset and at least 24 hours from last fever without the use of fever-reducing medications, and symptoms have significantly improved (cough, shortness of breath), and one negative COVID-19 PCR test.
- Recovered patients can continue to shed detectable SARS-coV-2RNA in upper respiratory specimens for up to 3 months after illness onset.
- Patients previously diagnosed with symptomatic COVID-19 who remain asymptomatic after recovery, retesting is not recommended within 3 months after the date of symptom onset
- For patients who never developed symptoms, the date of first positive COVID-19 test should be used in place of the date of symptom onset.

References:

CDC Ending Isolation and Precautions for people with COVID-19: Interim Guidance January 14, 2022

CHI Franciscan Health Policy 2021 St. Joseph Medical Center

Approved By:

Director Infection Control/Employee Health

Date

Chief Nursing Officer

Date