

**Quarantine** is for individuals who may have been exposed to someone who is COVID-19 positive but are not exhibiting any symptoms and have not tested positive. Individuals who are in quarantine should stay in place for 14 days.

**Isolation** is for individuals who have either tested positive for COVID-19 or who are exhibiting symptoms of COVID-19 (including fever, chills, shaking chills, muscle pain, headache, sore throat, or new loss of taste or smell) and have been told by a provider that they have, or probably have, COVID-19, even in the absence of a test.

Worker Type	Quarantine for 14 days when...	Isolate when...	End Isolation and Return to work when...
Health Care Workers	As of May 4, 2020, the CDC is not recommending that these workers self-quarantine after an exposure if they are not experiencing COVID-19 symptoms. <a href="#">All workers should wear appropriate PPE, and self-monitor for symptoms.</a>	You have tested positive for COVID-19 <b>OR</b> you have symptoms of COVID-19	<p><b>Symptomatic</b></p> <ol style="list-style-type: none"> <li><b>Symptom-based strategy</b> <ul style="list-style-type: none"> <li>At least 3 days (72 hours) have passed <i>since recovery</i> defined as resolution of fever without the use of fever-reducing medications <b>and</b></li> <li>Improvement in respiratory symptoms (e.g., cough, shortness of breath); <b>and</b>,</li> <li>At least 10 days have passed <i>since symptoms first appeared</i>.</li> </ul> </li> <li><b>Test-based strategy:</b> <ul style="list-style-type: none"> <li>Resolution of fever <b>without</b> the use of fever-reducing medications <b>and</b></li> <li>Improvement in respiratory symptoms (e.g., cough, shortness of breath), <b>and</b></li> <li>Negative results of two consecutive respiratory specimens collected ≥24 hours apart</li> </ul> </li> </ol> <p><b>Asymptomatic</b></p> <ol style="list-style-type: none"> <li><b>Time-based strategy:</b> At least <b>10 days have passed</b> since the date of their first positive COVID-19 diagnostic test assuming they have <b>not subsequently developed symptoms</b> since their positive test.</li> <li><b>Test-based strategy:</b> Negative results of two consecutive respiratory specimens collected ≥24 hours apart</li> </ol> <p><i>*A positive test does not necessarily correlate with the person's ability to transmit the disease</i></p>
First Responders			
Essential Workers			
All Other Workers	You have been exposed to someone with COVID-19 <b>BUT</b> you don't have symptoms		

## Healthcare Personnel (HCP):

### Return to Work for Healthcare Personnel with Confirmed or Suspected COVID-19

#### *Ending Isolation/Return to Work Guidance*

#### Symptomatic HCP with suspected or confirmed COVID-19

1. **Symptom-based strategy.** Exclude from work until:

- At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,
- At least 10 days have passed *since symptoms first appeared*

2. **Test-based strategy.** Exclude from work until:

- Resolution of fever without the use of fever-reducing medications **and**
- Improvement in respiratory symptoms (e.g., cough, shortness of breath), **and**
- Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive nasopharyngeal swab specimens collected  $\geq 24$  hours apart (total of two negative specimens).
- **Note: there have been reports of prolonged detection of RNA without direct correlation to viral culture.**

#### HCP with laboratory-confirmed COVID-19 who have not had any symptoms

1. **Time-based strategy.** Exclude from work until:

- 10 days have passed since the date of their first positive COVID-19 diagnostic test assuming they have not subsequently developed symptoms since their positive test. If they develop symptoms, then the *symptom-based* or *test-based strategy* should be used.
- Note: because symptoms cannot be used to gauge where these individuals are in the course of their illness, it is possible that the duration of viral shedding could be longer or shorter than 10 days after their first positive test.

2. **Test-based strategy.** Exclude from work until:

- Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive nasopharyngeal swab specimens collected  $\geq 24$  hours apart (total of two negative specimens).
- Note: because of the absence of symptoms, it is not possible to gauge where these individuals are in the course of their illness. There have been reports of prolonged detection of RNA without direct correlation to viral culture.

Note that detecting viral RNA via PCR does not necessarily mean that infectious virus is present.

If HCP had COVID-19 ruled out and have an alternate diagnosis (e.g., tested positive for influenza), criteria for return to work should be based on that diagnosis.

### *Return to Work Practices and Work Restrictions*

After returning to work, HCP should:

- Wear a facemask for source control at all times while in the healthcare facility until all symptoms are completely resolved or until 14 days after illness onset, whichever is longer. A facemask instead of a cloth face covering should be used by these HCP for source control during this time period while in the facility. After this time period, these HCP should revert to their facility policy regarding [universal source control](#) during the pandemic.
  - A facemask for source control does not replace the need to wear an N95 or higher-level respirator (or other recommended PPE) when indicated, including when caring for patients with suspected or confirmed COVID-19.
  - Of note, N95 or other respirators with an exhaust valve might not provide source control.
- HCP should be restricted from contact with severely immunocompromised patients (e.g., transplant, hematology-oncology) until 14 days after illness onset
- HCP should self-monitor for symptoms, and seek re-evaluation from occupational health if respiratory symptoms recur or worsen

***Employers should not require a COVID-19 test result or a healthcare provider's note for employees who are sick to validate their illness, qualify for sick leave, or to return to work.***