

TO: Vermont Health Care Providers and Health Care Facilities **FROM:** Jennifer S. Read, MD, FIDSA, Medical Epidemiologist

Duration of Isolation and Precautions for Adults with COVID-19

This update follows the previous <u>Health Update (June 26, 2020)</u> addressing how long SARS-CoV-2, the etiologic agent of COVID-19, can be detected by PCR after an initial positive PCR test result. The purpose of this Health Update is to provide further information to inform decisions regarding the duration of isolation and precautions to prevent transmission of SARS-CoV-2 while avoiding unnecessary prolonged isolation and use of laboratory testing resources. Of note, the data currently available are from adults, and equivalent data from infants and children are not available at this time. Also, more data are necessary regarding viral shedding among immunocompromised people.

The Centers for Disease Control and Prevention (CDC) have issued <u>updated guidance</u> regarding the duration of isolation and precautions for people with COVID-19, based on the currently available data:

- People with **mild to moderate COVID-19** remain infectious no longer than 10 days after symptom onset.
- People with more severe to critical illness or severe immunocompromise likely remain infectious no longer than 20 days after symptom onset.
- Recovered people can continue to shed detectable SARS-CoV-2 RNA in upper respiratory specimens for up to 3 months after illness onset, albeit at concentrations considerably lower than during illness, in ranges where replication-competent virus has not been reliably recovered and infectiousness is unlikely.
- Studies to date have not found evidence that clinically recovered people with persistence of viral RNA have transmitted SARS-CoV-2 to others.
 - If such a person remains asymptomatic during this 90-day period, then any re-testing is unlikely to yield useful information, even if the person had close contact with an infected person.
 - O If such a person becomes symptomatic during this 90-day period and an evaluation fails to identify a diagnosis other than SARS-CoV-2 infection (e.g., influenza), then the person may warrant evaluation for SARS-CoV-2 reinfection in consultation with an infectious disease or infection control expert. Quarantine may be warranted during this evaluation, particularly if symptoms developed after close contact with an infected person.
- Reinfection with SARS-CoV-2 has not yet been definitively confirmed in any
 recovered people to date. If and when people can be re-infected with SARS-CoV-2
 remains unknown and is a subject of investigation, as noted in the Health Update of
 June 26, 2020. People infected with related endemic human betacoronavirus appear
 to become susceptible again at around 90 days after onset of infection.



Thus, in summary:

- For people recovered from SARS-CoV-2 infection, a positive PCR during the 90 days after illness onset more likely represents persistent shedding of viral RNA than reinfection.
- Accumulating evidence supports ending isolation and precautions for people with COVID-19 using a symptom-based strategy so that people who are by current evidence no longer infectious are not kept unnecessarily isolated and excluded from work or other responsibilities.

RECOMMENDATIONS:

The following recommendations are based on the best information currently available:

1. Duration of isolation and precautions:

- For most people with COVID-19 illness, isolation and precautions can generally be discontinued 10 days after symptom onset (the date on which symptoms first began, including non-respiratory symptoms) and resolution of fever for at least 24 hours, without the use of fever-reducing medications, and with improvement of other symptoms.
 - A limited number of people with severe illness may produce replicationcompetent virus beyond 10 days that may warrant extending duration of isolation and precautions for up to 20 days after symptom onset; consider consultation with infection control experts.
- For people who never develop symptoms, isolation and other precautions can be discontinued 10 days after the date of their first positive RT-PCR test for SARS-CoV-2 RNA.
- 2. Role of PCR testing (use of an RT-PCR assay to detect the presence of SARS-CoV-2 RNA) to discontinue isolation or precautions:
 - For people who are severely immunocompromised, a test-based strategy could be considered in consultation with infectious diseases experts.
 - o For all others, a test-based strategy is no longer recommended.
- 3. Role of PCR testing (use of an RT-PCR assay to detect the presence of SARS-CoV-2 RNA) after discontinuation of isolation or precautions:
 - For people 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 the initial SARS-CoV-2 infection. In addition, quarantine is not recommended in the event of close contact with an infected person.



- For people who develop new symptoms consistent with COVID-19 during the 3 months after the date of initial symptom onset, if an alternative etiology cannot be identified by a provider, then the person may warrant retesting; consultation with infectious disease or infection control experts is recommended. Quarantine may be considered during this evaluation based on consultation with an infection control expert, especially in the event symptoms develop within 14 days after close contact with an infected person.
- o For people who never developed symptoms, the date of first positive RT-PCR test for SARS-CoV-2 RNA should be used in place of the date of symptom onset.

If you have any questions, please contact the HAN Coordinator at 802-859-5900 or vthan@vermont.gov

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