



Ending Home Isolation and Returning to Work after Suspected or Confirmed COVID-19

March 23, 2020

AUDIENCE: Health Care Providers who need to advise their patients; Employers who need to advise their personnel

BACKGROUND: This document is based directly on CDC guidance referenced below. CDC recommendations are based on experience from other respiratory viral infections suggesting that persons with COVID-19 may shed potentially infectious virus for some time after recovery.

Availability of testing for COVID-19 is limited. In the setting of community transmission and limited testing, many or most persons infected with COVID-19 will not undergo testing. If they have compatible symptoms, they should be considered as suspected COVID-19 and isolated.

This document describes criteria for discontinuing home isolation and return to work, for patients with either confirmed or suspected COVID-19, as per CDC guidance.

The most common signs and symptoms of COVID-19 infection include acute (newly developed) fever, cough, difficulty breathing, fatigue, muscle aches, sore throat, and headache. Acute (newly developed) nausea, vomiting, or diarrhea are less commonly reported symptoms of COVID-19 infection.

GUIDANCE:

CDC provides 2 strategies: a test-based strategy and a time-based strategy. Given limited availability of testing, only the time-based strategy is shown here; the test-based strategy can be found in the CDC guidance.

ENDING HOME ISOLATION

Persons with confirmed or suspected COVID-19 may discontinue home isolation under the following conditions:

- **At least 3 days (72 hours) have passed *since recovery***, where recovery is 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 7 days have passed *since symptoms first appeared*.**

When ending home isolation, persons whose cough is improved, but not gone, should wear a facemask when around others.

Criteria are the same for immunocompromised and non-immunocompromised individuals.

RETURNING TO WORK

Persons working in non-healthcare settings may return to work when they meet criteria for ending home isolation and should follow instructions above.



Persons working in healthcare settings may return to work when they meet criteria for ending home isolation, **but must ALSO:**

- Wear a facemask at all times while in the healthcare facility until all symptoms are completely resolved or until 14 days after illness onset, whichever is longer
- Be restricted from contact with severely immunocompromised patients (e.g., transplant, hematology-oncology) until 14 days after illness onset
- Adhere to hand hygiene, respiratory hygiene, and cough etiquette in [CDC's interim infection control guidance](#) (e.g., cover nose and mouth when coughing or sneezing, dispose of tissues in waste receptacles)
- Self-monitor for symptoms, and seek re-evaluation from occupational health if respiratory symptoms recur or worsen
- Check with their institution's occupational health regarding any additional considerations.

For more information:

This and other clinical guidance specific to San Francisco are posted online: <http://www.sfchcp.org/covid19hcp>

CDC: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>
<https://www.cdc.gov/coronavirus/2019-ncov/healthcare-facilities/hcp-return-work.html>
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/ending-isolation.html>