

# Quick Reference: Discontinuation of Transmission-Based Precautions and Home Isolation for Persons Diagnosed with COVID-19



This guidance is provided to assist healthcare facilities, healthcare providers and local public health officials in determining when to discontinue isolation for persons with confirmed COVID-19. This document is intended to serve as a general resource. For the complete guidance, refer to the COVID-19 Communicable Disease Manual Chapter (see section 7A.Isolation) at [https://www.nj.gov/health/cd/documents/topics/NCOV/NCOV\\_chapter.pdf](https://www.nj.gov/health/cd/documents/topics/NCOV/NCOV_chapter.pdf).

Decisions to extend or remove persons from transmission-based precautions or home isolation should be made in consultation with a healthcare provider and/or public health professional and is subject to differences in disease course, symptoms, living situation, available resources and clinical management. It is important to note that it is possible that a person *known* to be infected with COVID-19 could discontinue isolation earlier than a person who is quarantined because of the *possibility* they are infected.

## Guidance for discontinuation of transmission-based precautions for COVID-19 confirmed persons in healthcare settings:

Clinical Scenario	Criteria for Discontinuation of COVID-19 Isolation and Transmission-Based Precautions
<b>Symptomatic cases:</b>	
<p>Laboratory confirmed case of COVID-19 in healthcare settings (e.g., acute care hospital, long-term care facilities [LTCFs], comprehensive rehabilitation hospitals)</p>	<p><b>Symptom-based strategy:</b></p> <ul style="list-style-type: none"> <li>• Patient should remain on isolation with full Transmission-Based Precautions at least <b>until 10 DAYS</b> have passed since symptoms attributed to COVID-19 first appeared <b>AND</b> <ul style="list-style-type: none"> <li>○ <b>At least 3 days (72 hours) have passed since recovery defined as</b> <ul style="list-style-type: none"> <li>▪ Resolution of fever, without use of fever-reducing medication <b>AND</b></li> <li>▪ Improvement in respiratory signs and symptoms</li> </ul> </li> </ul> </li> </ul> <p><b>Test-based strategy<sup>1</sup>:</b></p> <ul style="list-style-type: none"> <li>• Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from <u>at least two</u> consecutive respiratory specimens collected ≥24 hours apart (total of two negative specimens) <b>AND</b></li> <li>• Resolution of fever, without use of fever-reducing medication <b>AND</b></li> <li>• Improvement in illness signs and symptoms</li> </ul>

Clinical Scenario	Criteria for Discontinuation of COVID-19 Isolation and Transmission-Based Precautions
<b>Asymptomatic cases:</b>	
<p>Laboratory confirmed case of COVID-19 in healthcare settings (e.g., acute care hospital, long-term care facilities [LTCFs], comprehensive rehabilitation hospitals)</p>	<p><b>Time-based strategy:</b></p> <ul style="list-style-type: none"> <li>Person should remain on transmission-based precautions <b>until 10 DAYS</b> have passed since the date of their first positive COVID-19 diagnostic tests <b>AND</b></li> <li><b>Remain asymptomatic</b> (if symptoms occur then this strategy no longer applies; refer to above)</li> </ul> <p><b>Test-based strategy<sup>1,2</sup>:</b></p> <ul style="list-style-type: none"> <li>Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from <u>at least two</u> consecutive respiratory specimens collected <math>\geq 24</math> hours apart (total of two negative specimens).</li> </ul>

Note: Patients should NOT remain hospitalized for the sole purpose of isolation. If discharge is clinically indicated, refer to the appropriate isolation guidance when providing discharge instruction.

**Guidance for discontinuation of home isolation precautions for COVID-19 confirmed persons with or without symptoms:**

Clinical Scenario	Criteria for Discontinuation of COVID-19 Home Isolation
<b>Symptomatic cases:</b>	
<p>Laboratory confirmed case of COVID-19 who are recovering/isolating in non-healthcare settings. (e.g., independent living complexes, hotels, dormitories, group homes).</p>	<p><b>Symptom-based strategy:</b></p> <ul style="list-style-type: none"> <li>Persons should remain on home isolation at least <b>until 10 DAYS</b> have passed since symptoms first appeared <b>AND</b> <ul style="list-style-type: none"> <li><b>At least 3 days (72 hours) have passed since recovery defined as</b> <ul style="list-style-type: none"> <li>Resolution of fever, without use of fever-reducing medication <b>AND</b></li> <li>Improvement in respiratory symptoms</li> </ul> </li> </ul> </li> </ul> <p><b>Test-based strategy<sup>1</sup>:</b></p> <ul style="list-style-type: none"> <li>Negative results of an FDA Emergency Use Authorized molecular assay for COVID-19 from <u>at least two</u> consecutive respiratory specimens collected <math>\geq 24</math> hours apart (total of two negative specimens) <b>AND</b></li> <li>Resolution of fever, without use of fever-reducing medication <b>AND</b></li> <li>Improvement in respiratory symptoms</li> </ul>

Asymptomatic cases:	
<p>Laboratory confirmed case of COVID-19 who are recovering/isolating in non-healthcare settings. (e.g., independent living complexes, hotels, dormitories, group homes).</p>	<p><b>Time-based strategy:</b></p> <ul style="list-style-type: none"> <li>Person should remain on home isolation at least <b>until 10 DAYS</b> have passed since the date of their first positive COVID-19 diagnostic test <b>AND</b></li> <li>Have had <b>NO</b> subsequent illness provided they <b>remain asymptomatic</b> (if symptoms occur then this strategy no longer applies; refer to above)</li> </ul> <p><b>Test-based strategy<sup>1,2</sup>:</b></p> <ul style="list-style-type: none"> <li>Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive respiratory specimens collected ≥24 hours apart (total of two negative specimens)</li> </ul>

Note: The symptom-based, time-based, and test-based strategies may result in different timeframes for discontinuation of isolation post-recovery.

### Guidance for discontinuation of home isolation precautions for persons awaiting test results (e.g., PUI) and not in a healthcare setting:

Clinical Scenario	Criteria for Discontinuation of Home Isolation
<p>Non-hospitalized PUI, in non-healthcare settings, awaiting test results (e.g., independent living complexes, hotels, dormitories, group homes).</p>	<p><b>Symptomatic PUIs who are awaiting test results but NOT in a healthcare setting</b> should adhere to home isolation guidance until results return. <b>Asymptomatic persons</b> being tested should be assessed for possible exposures. Decisions to quarantine or advise work exclusion should be <b>based on exposure risk</b> and the not on “pending” status of results. Refer to NJDOH COVID-19: Information for Communities and the General Public, Isolation and Quarantine section at <a href="https://www.nj.gov/health/cd/topics/covid2019_community.shtml">https://www.nj.gov/health/cd/topics/covid2019_community.shtml</a>.</p>
	<p><b>IF POSITIVE for COVID-19</b> follow the isolation instructions in “Guidance for discontinuation of home isolation precautions for COVID-19 confirmed persons with or without symptoms”</p>
	<p><b>IF NEGATIVE for COVID-19</b> follow the instructions and next steps at <a href="https://www.nj.gov/health/cd/documents/topics/NCOV/COVID_Instructions_Persons_Who_Test_Negative.pdf">https://www.nj.gov/health/cd/documents/topics/NCOV/COVID_Instructions_Persons_Who_Test_Negative.pdf</a>. Home isolation should be based on the alternate diagnosis, if available.</p>

**Additional guidance specific to COVID-19 diagnosed healthcare personnel return to work criteria is available at COVID-19: Information for Healthcare Professionals [https://www.nj.gov/health/cd/topics/covid2019\\_healthcare.shtml](https://www.nj.gov/health/cd/topics/covid2019_healthcare.shtml).**

<sup>1</sup>Detecting viral RNA via PCR testing does not necessarily mean that infectious virus is present.

<sup>2</sup>For asymptomatic people, 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.