

Preventing the Spread of Coronavirus Disease 2019 in Homes and Residential Communities

Recommended precautions for household members, intimate partners, and caregivers in a non healthcare setting¹ of

A patient with symptomatic laboratory-confirmed COVID-19

OR

A patient under investigation

Household members, intimate partners, and caregivers in a non healthcare setting may have close contact₂ with a person with symptomatic, laboratory-confirmed COVID-19 or a person under investigation. Close contacts should monitor their health; they should call their healthcare provider right away if they develop symptoms suggestive of COVID-19 (e.g., fever, cough, shortness of breath) (see Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential Coronavirus Disease 2019 (COVID-19) Exposure in Travel-associated or Community Settings.)

Close contacts should also follow these recommendations:

• Make sure that you understand and can help the patient follow their healthcare provider's instructions for medication(s) and care. You should help the patient with basic needs in the home and provide support for getting groceries, prescriptions, and other personal needs.

- Monitor the patient's symptoms. If the patient is getting sicker, call his or her healthcare provider and tell them that the patient has laboratory-confirmed COVID-19. This will help the healthcare provider's office take steps to keep other people in the office or waiting room from getting infected. Ask the healthcare provider to call the local or state health department for additional guidance. If the patient has a medical emergency and you need to call 911, notify the dispatch personnel that the patient has, or is being evaluated for COVID-19.
- Household members should stay in another room or be separated from the patient as much as possible. Household members should use a separate bedroom and bathroom, if available.
- Prohibit visitors who do not have an essential need to be in the home.
- Household members should care for any pets in the home. Do not handle pets or other animals while sick. For more information, see <u>COVID-19 and Animals</u>.
- Make sure that shared spaces in the home have good air flow, such as by an air conditioner or an opened window, weather permitting.
- Perform hand hygiene frequently. Wash your hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer that contains 60 to 95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used preferentially if hands are visibly dirty.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- The patient should wear a facemask when you are around other people. If the patient is not able to wear a facemask (for example, because it causes trouble breathing), you, as the caregiver, should wear a mask when you are in the same room as the patient.
- Wear a disposable facemask and gloves when you touch or have contact with the patient's blood, stool, or body fluids, such as saliva, sputum, nasal mucus, vomit, urine.
 - Throw out disposable facemasks and gloves after using them. Do not reuse.
 - When removing personal protective equipment, first remove and dispose of gloves. Then, immediately clean your hands with soap and water or alcohol-based hand sanitizer. Next, remove and dispose of facemask, and

immediately clean your hands again with soap and water or alcohol-based hand sanitizer.

- Avoid sharing household items with the patient. You should not share dishes, drinking glasses, cups, eating utensils, towels, bedding, or other items. After the patient uses these items, you should wash them thoroughly (see below "Wash laundry thoroughly").
- Clean all "high-touch" surfaces, such as counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables, every day. Also, clean any surfaces that may have blood, stool, or body fluids on them.
 - Use a household cleaning spray or wipe, according to the label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.
- Wash laundry thoroughly.
 - Immediately remove and wash clothes or bedding that have blood, stool, or body fluids on them.
 - Wear disposable gloves while handling soiled items and keep soiled items away from your body. Clean your hands (with soap and water or an alcohol-based hand sanitizer) immediately after removing your gloves.
 - Read and follow directions on labels of laundry or clothing items and detergent. In general, using a normal laundry detergent according to washing machine instructions and dry thoroughly using the warmest temperatures recommended on the clothing label.
- Place all used disposable gloves, facemasks, and other contaminated items in a lined container before disposing of them with other household waste. Clean your hands (with soap and water or an alcohol-based hand sanitizer) immediately after handling these items. Soap and water should be used preferentially if hands are visibly dirty.

• Discuss any additional questions with your state or local health department or healthcare provider. Check available hours when contacting your local health department.

Footnotes

¹Home healthcare personnel should refer to <u>Interim Infection Prevention and Control</u> <u>Recommendations for Patients with Known or Patients Under Investigation for</u> <u>Coronavirus Disease 2019 (COVID-19) in a Healthcare Setting.</u>

2Close contact is defined as—

a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case

– or –

b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).

Page last reviewed: March 6, 2020

Content source: <u>National Center for Immunization and Respiratory Diseases</u> (NCIRD), <u>Division of Viral Diseases</u>

HAVE QUESTIONS?
Visit CDC-INFO
Call 800-232-4636
Email CDC-INFO
Open 24/7

CDC INFORMATION

Footnotes

Isolation is defined as the separation or restriction of activities of an ill person with a contagious disease from those who are well.

Additional Resources

- Interim Healthcare Infection Prevention and Control Recommendations for Persons Under Investigation for Coronavirus Disease 2019 (COVID-19)
- Interim Guidance for Preventing Coronavirus Disease 2019 (COVID-19) from Spreading to Others in Homes and Communities
- Interim Guidance for Healthcare Professionals

What is a quarantine?

This is when — under state or federal law — individuals or groups are essentially on lockdown. Recent examples include passengers from cruise ships where other passengers fell ill with COVID-19; those passengers who didn't fall ill on the ship were then required to stay at military bases for 14 days to see if they developed the disease.

The U.S. hasn't closed off entire areas — such as towns or cities — since the 1918-1919 Spanish flu. But the federal government and the states do have the power to do so.

In New Rochelle, N.Y., officials have established a "containment zone" because of a high number of COVID-19 cases in the region. School and houses of worship are closed and large gathering

Discontinuation of Home Isolation for Persons with COVID-19 (Interim Guidance)

CDC guidance for COVID-19 may be adapted by state and local health departments to respond to rapidly changing local circumstances.

Summary Page Who this is for:

Healthcare providers and public health officials managing persons with coronavirus disease 2019 (COVID-19) under home isolation.

Summary of Recent Changes Guidance as of March 16, 2020

- New guidance is added for a strategy to discontinue home isolation without testing.
- Updated guidance for a test-based strategy: The recommendation to collect both NP and OP swabs at each sampling has been changed so that only one swab is necessary, preferably NP, at each sampling.

Limited information is available to characterize the spectrum of clinical illness, transmission efficiency, and the duration of viral shedding for persons with novel coronavirus disease (COVID-19). This guidance is based on available information about COVID-19 and subject to change as additional information becomes available. For Hospitalized Patients, see (Interim Guidance for Discontinuation of Transmission-Based Precautions Among Hospitalized Patients with COVID-19).

For Persons with COVID-19 Under Home Isolation:

The decision to discontinue home isolation should be made in the context of local circumstances. Options now include both 1) a time-since-illness-onset and time-since-recovery (non-test-based) strategy, and 2) a test-based strategy.

Time-since-illness-onset and time-since-recovery strategy (non-test-based strategy)*

Persons with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue home isolation under the following conditions:

- 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 7 days have passed since symptoms first appeared.

Test-based strategy (simplified from initial protocol) Previous recommendations for a test-based strategy remain applicable; however, a test-based strategy is contingent on the availability of ample testing supplies and laboratory capacity as well as convenient access to testing. For jurisdictions that choose to use a test-based strategy, the recommended protocol has been simplified so that *only one swab is needed at every sampling*.

Persons who have COVID-19 who have symptoms and were directed to care for themselves at home may discontinue home isolation under the following conditions:

- 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 molecular assay for COVID-19 from at least two consecutive nasopharyngeal swab specimens collected ≥24 hours apart^{**} (total of two negative specimens). See <u>Interim</u> <u>Guidelines for Collecting, Handling, and Testing Clinical Specimens from</u> <u>Persons Under Investigation (PUIs) for 2019 Novel Coronavirus</u> (2019-nCoV)for specimen collection guidance.

Individuals with laboratory-confirmed COVID-19 who have not had <u>any</u> symptoms may discontinue home isolation when at least 7 days have passed since the date of their first positive COVID-19 diagnostic test and have had no subsequent illness.

Footnote

*This recommendation will prevent most, but may not prevent all instances of secondary spread. The risk of transmission after recovery, is likely very substantially less than that during illness.

**All test results should be final before isolation is ended. Testing guidance is based upon limited information and is subject to change as more information becom