Contact Tracing II

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This is a series about COVID-19 preparation and regional updates. Check the Press daily for new information, tips, and ways our health care professionals are working to keep our community safe.

Contact tracing, what does that really mean?

With the recent surge in the number of people testing positive for COVID-19, there have been a lot of questions around contact tracing. What does contact tracing really mean?

Contact tracing is the process our epidemiologists (epi) use to understand how an infectious disease is spreading in our community. The purpose of contact tracing is twofold: to find out how an individual became sick, and to find out who else might have been exposed.

How does contact tracing work?

When a person tests positive for COVID-19, after the ordering provider is notified, the lab report is sent to the Health District. Our epi team contacts the person to assess their health and wellbeing. Then the epi team begins to trace who they have been in contact with prior to becoming sick. It is important to trace backwards to better understand connections and how COVID-19 is spreading through the community, and which activities are putting people at higher risk. After the timeline and travel history have been established, the epi team begins to gather information on who might have been in close contact with the individual while infectious. They then begin to notify those individuals to follow isolation guidelines and begin active monitoring for the next 14 days.

How are people who have been exposed notified?

Panhandle Health District (PHD) calls individuals over the phone and prioritizes individuals using the Center for Disease Control (CDC) Guidelines Risk Assessment. The first line of people to be contacted for contact tracing are individuals who have been identified as high-risk. High-risk exposures refer to individuals who had prolonged close contact with a patient with COVID-19. These are people who
currently live in the same household, or are providing care in a nonhealthcare setting for a person with symptomatic laboratory-confirmed COIVD-19 without using recommended precautions.

The second line of people contacted are individuals who are at medium risk. These are individuals who had close contact with a person with symptomatic laboratory confirmed COVID-19. They may have been on an aircraft seated within 6 feet of a traveler (approximately 2 seats in each direction), living in the same household, or caring for a person in a nonhealthcare setting, like a home, with symptomatic laboratory-confirmed COVID-19 infection while using recommended precautions.

The third line of people PHD works to contact are individuals who might have been in the same indoor environment (e.g. classroom, hospital waiting room) as a person with symptomatic laboratory-confirmed COVID-19 for a prolonged period of time, but not considered a close contact.

Finally, according to the CDC guidelines, people who have no identifiable risk are people whose interaction with a person with symptomatic laboratory confirmed COVID-19 infection that do not meet any high, medium, or low-risk conditions. These would be people who might have walked by the person or been briefly in the same room. These individuals will not be contacted by PHD.

Why doesn’t the Health District make public service announcements about the details of all infected individuals travel and whereabouts?

Beyond the legal reasons why this is not best practice, there are other reasons why Panhandle Health District does not make public announcements of the travel history of every infected individual. One, we know COIVD-19 spreads through close contact (within 6 feet) of 10 minutes or more. Contracting COVID-19 by passing someone in the grocery store, will likely not spread the infection. Two, making announcements of all the locations a positive COVID-19 client has been would cause undue panic and anxiety that could lead to a massive and unnecessary strain on our health care system.


Panhandle Health District provides over 40 different public health programs to families, individuals and organizations in northern Idaho. From food and drinking water safety to health education and disease control, public health services are critical to ensure our community is a safe and healthy place to live, work and play.

The PHD team is made up of nurses, nutritionists, environmental health specialists, health educators and many other dedicated professionals with a common goal to deliver vital public health services.

Panhandle Health District is one of seven health districts in the state of Idaho.

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