Health Care Providers FAQs for COVID-19 Testing, Isolation, and Quarantine

Who should be tested? The easiest answer is to test everyone who has symptoms of any viral syndrome or has had a close contact exposure to a person with COVID-19. In asymptomatic patients, testing should be performed 5-8 days after exposure to allow for the development of viral shedding. HOWEVER, ability to test asymptomatic close contact exposed people is very often limited due to inadequate testing capabilities. Presently (8/19/20), there is sufficient capacity to test asymptomatic exposures, but this may change. All symptomatic patients should be tested because COVID-19 can manifest as virtually any viral syndrome from a URI, gastroenteritis, carditis, pneumonitis or encephalitis. Those with a less severe exposure than a close contact exposure generally does not warrant testing.

What is a close contact exposure"? This is defined as any individual who was within 6 feet of an infected person for at least 15 minutes beginning from 2 days before illness onset until the time the patient is isolated, or for asymptomatic patients, 2 days prior to positive specimen collection until the time the patient is isolated.

When should an individual be tested? It is our recommendation that an individual be tested 5-8 days after they had close contact with an individual who tested positive for COVID-19. If someone is experiencing symptoms of COVID-19, they should be tested as soon as possible.

If a person is exposed, asymptomatic but COVID-19 test positive how long is isolation? Per CDC guidelines, these people should isolate for ten days from the test date. If they develop symptoms, they should then isolate for ten days from onset of symptoms AND symptoms should be "improved" (this is not defined by CDC) with no fever of 100.4 degrees Fahrenheit or greater while not on any fever lowering medication for the last 24 hours. If they do not meet these criteria, then they should isolate until they do. Immune suppressed patients may require longer isolations up to 20 days or more.

If symptomatic and COVID-19 test positive, how long to isolate? As above, they should isolate for ten days from onset of symptoms AND symptoms should be "improved" (this is not defined by CDC) with no fever of 100.4 degrees Fahrenheit or greater while not on any fever lowering medication for the last 24 hours. If they do not meet these criteria, then they should isolate until they do. After this 10-day isolation they can then resume normal activities and work, if they feel strong and well enough to do so. Immune suppressed patients may require longer isolations up to 20 days or more.

Hayden – Kootenai County	Sandpoint – Bonner County	Kellogg – Shoshone County	Bonners Ferry – Boundary County	St. Maries – Benewah County
8500 N. Atlas Rd.	2101 W. Pine St.	35 Wildcat Way	7402 Caribou St.	137 N. 8th St.
Hayden, ID	Sandpoint, ID	Kellogg, ID	Bonners Ferry, ID	St. Maries, ID
83835	83864	83837	83805	83861
208.415.5100	208.263.5159	208.786.7474	208.267.5558	208.245.4556

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If symptomatic and COVID-19 test negative and no known exposure to COVID-19 patient? These patients should still quarantine for 14 days since a negative COVID-19 test doesn't eliminate the possibility that they have COVID-19 disease, as described above. They can be retested if desired or symptoms persist.

If symptomatic and COVID-19 test positive, when can one return to work? Per CDC guidelines above, they should isolate for ten days from onset of symptoms AND symptoms should be "improved" (this is not defined by CDC) with no fever of 100.4 degrees Fahrenheit or greater while not on any fever lowering medication for the last 24 hours, as described above. Immune suppressed patients may require longer isolations, even beyond 20 days.

If symptomatic and COVID-19 test positive, should they be retested? Generally, no, since the PCR test can remain positive for more than 6 weeks even though the patient is improving and is not contagious. A repeat test, therefore, will add nothing to the patient's treatment or prognosis and will just add confusion. It is for this reason that the CDC recommends clearance of patient on clinical grounds only, as described above.

If exposed but not tested, how long to quarantine? First, one needs to determine if this is a close contact exposure. Because the incubation period for the development of COVID-19 can be up to 14 days, these people who had a close contact exposure should quarantine for 14 days. If the exposure was NOT a close contact exposure they do not need to quarantine but should self-monitor for onset of symptoms for 2 weeks.

If exposed and tested COVID-19 negative, how long is their quarantine? First, one needs to determine if this is a close contact exposure, as defined above. Because the incubation period for the development of COVID-19 can be up to 14 days, these people who had a close contact exposure should quarantine for 14 days. If the exposure was NOT a close contact exposure, they do not need to quarantine but should self-monitor for the onset of symptoms for 2 weeks.

Since the COVID-19 test has up to a 30% false negative rate (testing not done correctly, patient hasn't yet developed enough virus to be identified in testing) this test does not assure that the person won't develop COVID-19. Therefore, the person should still quarantine for 14 days.

If the exposed person is an employee or person in your care?
1. The exposed person is COVID-19 test positive-follow recommendations above.
2. The exposed person is symptomatic-since the person is symptomatic, they should be tested for COVID-19 and not return to work until ten days after symptom onset AND symptoms should be improved with no fever for the last 24 hours (as above). Even if the COVID-19 test is negative this protocol should be followed because of false negative tests as mentioned above.
3. The exposed person is asymptomatic, but this was a close contact exposure (as defined above): As above, the person should quarantine for 14 days. As an alternative, the person can be COVID-19 tested at 5-8 days after exposure (testing prior to this time is likely to be negative) and if negative continue the 14-day quarantine and if positive follow the recommendations mentioned above.

Does the wearing of masks (including N-95 masks) change any of the recommendations described above?
No, masks do provide significant protection to others but little protection to the patient (except N-95

masks) and as of now the CDC has not modified recommendations based on mask use. The purpose of masks is to keep respiratory droplets from reaching others by aiding in source control.

Masks with one-way valves or vents allow exhaled air to be expelled out through holes in the material. This can allow exhaled respiratory droplets to reach others and potentially spread the COVID-19 virus. Therefore, CDC does not recommend using masks if they have an exhalation valve or vent.

Return to work criteria for Health Care Professionals: Same as for any other symptomatic, COVID-19 test positive patient above. Presently, a COVID-19 test-based strategy is generally no longer recommended because of continued positivity of the test despite lack of contagiousness as discussed above. After return to work, the health care professional should wear a face mask until all symptoms resolve and self-monitor for worsening of symptoms.

Given recent statements by the CDC about COVID-19 testing of persons with asymptomatic close contact exposure; what is the recommendation of Idaho and Panhandle Health District for testing of asymptomatic persons who have had a recent, close contact exposure to a COVID-19 positive patient? We continue to recommend COVID-19 testing for these exposed people, as described above.

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