



COVID-19 RESPONSE

Definition of “COVID-RECOVERED”

Duration of Transmission-Based Precautions for Hospitalized Patients

A symptom and time-based strategy is indicated for non-critically ill patients:

- **Asymptomatic** patients or patients with **mild-to-moderate illness** (i.e., patient not requiring ICU admission or use of mechanical ventilation within **10 days** of positive SARS-CoV2 test result)
- **Not** severely immunosuppressed:

Symptomatic COVID-19 positive patients: At least **10 days** from symptom onset and at least 24 hours after resolution of fever and improvement in symptoms.

Asymptomatic COVID-19 patients: At least **10 days** from the test result, assuming the patient remains asymptomatic; if symptoms develop during this period, transition to guidance for symptomatic patients.

Re-testing for patients meeting the above criteria is not recommended

A **test and time-based strategy** will be used to determine when airborne, droplet, and contact or enhanced droplet and contact precautions may be discontinued for **critically ill patients**.

Critically ill patients should be re-tested between **1-2 weeks** from the initial positive test **AND** after **at least 24 hours after resolution of fever and clinical improvement**. The status may be changed to **COVID-19 recovered if two consecutive tests are negative for SARS-CoV-2**. If testing at 2 weeks is still positive, there is no need to repeat testing, and the patient can be considered COVID-19 recovered at **3 weeks from the initial positive test**.

The following parameters may be used to determine **improvement**:

- Decreased FiO₂
- Decreased ventilator support
- Decreased ECMO support (i.e., sweep gas flow)
- Improvement in other organ systems (i.e., dialysis or vasopressor requirement)

When clinical improvement is difficult to determine in critically ill patients, testing should be initiated at least 7 days after the initial positive test. Source: COVID-19 Duration of