



Health Alert Network Message 20-49: Message on Quarantine Options After Exposure to COVID-19

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Quarantine Options After Exposure to COVID-19

The Louisiana Department of Health (LDH) is adopting the Centers for Disease Control and Prevention’s (CDC) recently updated [recommendations regarding options to shorten quarantine due to COVID-19 exposure](#) based on evolving epidemiologic data and in an effort to reduce the burden of quarantine and increase overall quarantine compliance. The alternative quarantine options carry an increased risk of post-quarantine transmission compared to the full 14 day quarantine period. This increased risk is detailed below and should be carefully evaluated during consideration of quarantine options. Since even a small post-quarantine transmission risk could result in substantial secondary clusters in settings where there is a high risk for transmission, LDH is currently recommending the full 14 day quarantine period for use among residents and staff of congregate living settings such as nursing homes and correctional facilities.^[i]

1. In accordance with CDC guidance, LDH accepts the following alternative options to a 14-day quarantine for [close contacts](#) of an individual infected with COVID-19^[ii] :
 - Quarantine can end *after* Day 10 post-exposure without testing and if no symptoms have been reported during daily monitoring.
 - With this strategy, residual post-quarantine transmission risk is estimated to be about 1% with an upper limit of about 10%.
 - When diagnostic testing resources are sufficient and available (see number 3 below), quarantine can end *after* Day 7 post-exposure if a diagnostic specimen (molecular/PCR or antigen) tests negative and if no symptoms were reported during daily monitoring. The specimen may be collected and tested within 48 hours before the time of planned quarantine discontinuation (e.g., in anticipation of testing delays), but quarantine cannot be discontinued earlier than after Day 7.
 - With this strategy, the residual post-quarantine transmission risk is estimated to be about 5% with an upper limit of about 12%.
2. Persons can discontinue quarantine at these time points only if all of the following criteria are also met:
 - No clinical evidence of COVID-19 has been elicited by daily symptom monitoring during the entirety of quarantine up to the time at which quarantine is discontinued.
 - Daily symptom monitoring continues through quarantine Day 14.
 - Persons are counseled regarding the need to adhere strictly through quarantine Day 14 to [all recommended non-pharmaceutical interventions](#)^[iii] including distancing, avoiding crowded indoor spaces, hand washing, **and especially wearing masks/face coverings when outside the home** . They should be advised that if any symptoms develop, they should immediately self-isolate and

- contact the local public health authority or their healthcare provider to report this change in clinical status. To be clear, adhering to non-pharmaceutical interventions like masking and distancing are important always and for everyone but, due to the increased transmission risk, they are of vital importance to those wishing to avail themselves of these alternative quarantine protocol options.
- Visitation to hospitals or to high-risk congregate facilities such as nursing homes or correctional facilities should not occur until after quarantine Day 14.
3. In the event that testing capacity is limited, diagnostic testing for the purpose of earlier discontinuation of quarantine should not interfere or compete with testing of symptomatic individuals and should only be considered if it will have no impact on community diagnostic testing.
 4. The utility of serologic (antibody) testing to provide evidence of prior infection that would permit exclusion from quarantine has not been established and is not recommended.
 5. Persons may continue to quarantine for 14 days without testing per existing recommendations. **The existing 14-day quarantine protocol is the “gold standard”; it guaranties maximum reduction of post-quarantine transmission risk and is the strategy with the greatest collective experience at present.**

In addition, LDH recommends that any close contacts who develop symptoms within the 14 days after their last exposure to a person with COVID-19 infection should get tested as soon as possible.

- If a symptomatic close contact does not get tested, they should isolate until they meet the end of isolation criteria (when it has been 10 days since symptoms first appeared AND 24 hours with no fever without the use of fever-reducing medications AND other symptoms of COVID-19 are improving) or complete the 14 day quarantine, whichever is longer.
- If a symptomatic close contact tests positive, they should isolate until they meet end of isolation criteria (when it has been 10 days since symptoms first appeared AND 24 hours with no fever without the use of fever-reducing medications AND other symptoms of COVID-19 are improving).
- If a symptomatic close contact tests negative, they should complete the 14 day quarantine.

[\[i\]](#) Correctional facilities may consider allowing exposed and asymptomatic critical infrastructure staff members to continue to work in select instances when it is necessary to preserve correctional facility operations. **This option should be used as an absolute last resort for staff members who remain asymptomatic and have not tested positive.** This option should only be undertaken in consultation with medical direction or the Office of Public Health. Additionally, [risk mitigation measures](#) such as symptom monitoring, screening at the worksite, masking, distancing and cleaning/disinfection should be implemented in such circumstances.

[\[ii\]](#) Any quarantine period begins the day after last exposure to an infected individual during the period of infectiousness. If an infected individual is unable to isolate from household contacts while they are infectious, the quarantine period for household contacts begins the day after the infected individual [meets end of isolation criteria](#).

[\[iii\]](#) NPIs that should be practiced by individuals include the following: correct and consistent mask use, social distancing, hand and cough hygiene, environmental cleaning and disinfection, avoiding crowds, avoiding areas with inadequate indoor ventilation, and self-monitoring for symptoms of COVID-19 illness. These are also summarized [here](#).