

Discontinuation of Isolation Precautions and Discharge Related to COVID-19

Policy:

- Policy applicable to all COVID-19 or suspected patients.
- Place patients with suspected or confirmed with COVID-19 in Droplet and Contact Isolation.
- If admitted, place a patient with known or suspected COVID-19 in a singleperson room with the door closed.
- In general, reserve airborne Infection Isolation Rooms (AIIRs) for patients who will be undergoing aerosol-generating procedures.
- Discharge patients from a healthcare facility with a positive COVID-19 test whenever clinically indicated. Meeting criteria for discontinuation of isolation precautions is not a prerequisite for discharge.

Purpose: To provide a reference guide for healthcare providers discontinuing transmission-based isolation precautions and discharging hospitalized patients with COVID-19.

General: The decision to discontinue Isolation Precautions for patients with confirmed COVID-19 should be made using either a test-based strategy or a symptom-based (i.e., time-since-illness-onset and time-since-recovery strategy) or time-based strategy as described below. Meeting criteria for discontinuation of Transmission-Based Precautions is not a prerequisite for discharge.

SYMPTOMATIC PATIENTS with COVID-19 should remain in Transmission-Based Precautions until either:

SYMPTOM-BASED STRATEY: 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 10 days have passed since symptoms first appeared.

SYMPTOMS AND INITIAL COVID RESULT IS NEGATIVE:

- No other COVID tests required.
- Discontinue COVID-19 isolation
- Continue droplet precautions if symptoms indicate need (e.g. flu).

ASYMPTOMATIC PATIENTS with laboratory-confirmed COVID-19 should remain in Transmission-Based Precautions until either:

TIME-BASED STRATEGY

- 10 days have passed since the date of their first positive COVID-19 diagnostic test, assuming they have not subsequently developed symptoms since their positive test.
- Note, because symptoms cannot be used to gauge where these individuals are in the course of their illness, it is possible that the duration of viral shedding could be longer or shorter than 10 days after their first positive test.

DISCHARGE OF PATIENTS WITH COVID-19

- Physician will discharge patient from the healthcare facility whenever clinically indicated.
- If patient in isolation at time of discharge due COVID suspect or known:
 - 1. If medication needed from the MLH pharmacy, coordinate with pharmacy so that a visit to the MLH pharmacy is NOT required by the patient or family. This includes med to bed process or curbside delivery.
 - 2. Notify family of discharge and what time to arrive at hospital.
 - 3. Instruct family not to enter the hospital unless in-person care training required (e.g. tube feeding training, other device care, or other training needed for caregiver).
 - 4. Place surgical mask on patient.
 - 5. Place clean sheet over patient for transport.
 - 6. Patient should be transported directly to car and not go to other locations in hospital (e.g. such as pharmacy, cafeteria).

If discharged to home:

- Home isolation should be maintained if the patient returns home before discontinuation of isolation precautions.
- The decision to send the patient home should be made in consultation with the patient's clinical care team and local or state public health departments.

If discharged to a long-term care or assisted living facility:

- Communicate to the accepting facility continued need for Isolation as appropriate.
- If isolation precautions <u>have been discontinued</u>, but the patient has persistent symptoms from COVID-19 (e.g., persistent cough), they should be placed in a single room, be restricted to their room until resolution of symptoms.
- If isolation precautions <u>have been discontinued</u> and the patient's symptoms have resolved, the patient does not require further restrictions, based upon history of COVID-19.