



## Discontinuation of Transmission-Based Precautions and Disposition of Patients with COVID-19 to Long-Term Care or Assisted Living Facilities

Adapted Guidelines from the Centers for Disease Control and Prevention

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html>

### Discontinuation of transmission-based precautions for patients with COVID-19:

The decision to discontinue [Transmission-Based Precautions](#) should be made using either a non-test-based strategy (i.e., time-since-illness-onset and time-since-recovery strategy) or a test-based strategy. Meeting criteria for discontinuation of Transmission-Based Precautions is not a prerequisite for discharge.

#### 1. *Non-test-based strategy (RECOMMENDED)*

- At least 7 days 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)\*

\*Facilities should consider extending the period of isolation beyond the non-test-based-strategy duration for discontinuation of Transmission-Based Precautions, on a case by case basis in consultation with the facility, private physician, state public health authorities. Given that hospitalized patients may have longer periods of SARS-CoV-2 RNA detection in a setting where they may have close contact with individuals at risk for severe disease, it is recommended that at least 7 days have passed since recovery, prior to discontinuation of Transmission-Based Precautions.

#### 2. *Test-based strategy.*

- Resolution of fever without the use of fever-reducing medications **and**
- Improvement in respiratory symptoms (e.g., cough, shortness of breath), **and**
- Negative results of an FDA Emergency Use Authorized COVID-19 molecular assay for detection of SARS-CoV-2 RNA from at least two consecutive nasopharyngeal swab test specimens collected  $\geq 24$  hours apart (total of two negative specimens)



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## Discontinuation of empiric transmission-based precautions for patients suspected of having COVID-19:

The decision to discontinue empiric [Transmission-Based Precautions](#) by excluding the diagnosis of COVID-19 for a suspected COVID-19 patient, can be made based upon having negative results from at least one FDA Emergency Use Authorized COVID-19 reverse transcription-polymerase chain reaction assay (RT-PCR) for detection of SARS-CoV-2.

- If a higher level of clinical suspicion for COVID-19 exists, consider maintaining Transmission-Based Precautions and performing a second test for SARS-CoV-2.
- If a patient suspected of having COVID-19 is never tested, the decision to discontinue Transmission-Based Precautions can be made based upon using the *non-test-based strategy* described above.

Ultimately, clinical judgement and suspicion of SARS-CoV-2 infection determines whether to continue or discontinue empiric Transmission-Based Precautions.

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## Disposition of Patients with COVID-19:

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

- Transmission-Based Precautions *are still required*, the patient should go to a facility with an ability to adhere to infections prevention and control recommendations for the care of COVID-19 patients. Preferably, the patient would be placed in a location designated to care for COVID-19 residents.
- Transmission-Based Precautions *have been discontinued*, 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, and wear a facemask during care activities until all symptoms are completely resolved or until 14 days after illness onset, whichever is longer.
- Transmission-Based Precautions *have been discontinued* and the patient's symptoms have resolved, they do not require further restrictions, based upon their history of COVID-19.