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Policy Area COVID-19  
Applicability St. Lawrence Health system-wide content  
Key Phrases COVID-19, Coronavirus, SARS-CoV-2

## COVID-19 Positive Patients Isolation Precaution Discontinuation Policy

### PURPOSE

COVID-19 isolation precaution discontinuation for known COVID-19 patients of all ages who either (1) remain hospitalized, (2) are discharged and returning to ambulatory clinics, (3) are discharged home or to another facility, or 4) are admitted/readmitted to the hospital.

### SCOPE

All St. Lawrence Health System (SLHS) affiliate entities and all workforce and non-workforce members including, but not limited to, physicians, contractors, and volunteers.

### DEFINITIONS

Hospital admission or hospitalized patient means an admission to an inpatient facility (not an emergency room or urgent care facility) wherein the patient's length of stay is overnight and typically exceeds twenty four (24) hours, and the patient is formally admitted to the facility for inpatient care. Furthermore, for the purposes of this policy, the definition of admission shall extend to include those patients with an observation status.

### POLICY

A test-based strategy is no longer recommended as the criteria for discontinuation of COVID-19 Transmission-Based Precautions. In the majority of cases, it results in prolonged isolation of patients who continue to shed detectable SARS-CoV-2 RNA but are no longer infectious. Approved strategies to discontinue COVID-19 Isolation Precautions for patients with COVID-19 should be followed in determining the appropriate COVID-19 isolation precautions and testing/re-testing of patients.

Note: Meeting criteria for discontinuation of Transmission-Based Precautions is not a prerequisite for a patient's discharge.

# PROCEDURE

## STRATEGIES TO DISCONTINUE COVID-19 ISOLATION PRECAUTIONS FOR PATIENTS WITH COVID-19

Enhanced COVID-19 Isolation precautions may be discontinued when the patient meets the following criteria:

1. At least twenty four (24) hours have passed since last fever without the use of fever-reducing medications; AND
2. Symptoms (e.g., cough, shortness of breath) have improved; AND
3. The required amount of time has passed since symptom onset for appropriate patient categories in the below table. If the patient is asymptomatic throughout his/her infection, the date of the positive test begins the clock for the required isolation time

Patient Type*	Required Days since Symptom Onset or Positive Test
<b>ICU/Step-down/Severe Illness - Inpatient</b> ICU/Step-down stay at any point during admission, or severe illness	> 20 days
<b>Inpatient (No ICU/Step-down - not severely ill)</b>	> 9 days
<b>Severely Immunocompromised Patients (inpatient or outpatient)</b> Examples of severe immunocompromising conditions include, chemotherapy for cancer, untreated HIV infection with CD4 T lymphocyte count < 200, combined primary immunodeficiency disorder, and receipt of prednisone >20mg/day for more than 14 days. Ultimately, this is the provider's discretion.	> 20 days
<b>Outpatient</b> Patients tested in the outpatient setting and planning an admission or ambulatory visit for non-COVID related treatment	> 9 days
<b>Patients undergoing elective surgical procedures</b> Patients who test newly COVID-19 positive on pre-operative screening, should have their procedure delayed 21 days, if procedure is non-urgent.** Consider timing the elective surgery according to the needs and condition of the patient and complexity of the surgery.	> 20 days
* Maximum isolation for non-severely immunocompromised patients is 21 days. **New York State requires a COVID-19 test 3-5 days prior to surgery. If the patient still	

*tests positive after 21 days, the procedure can proceed if the patient meets discontinuation criteria above.*

### **COVID-19 RECOVERED PATIENTS**

Following the discontinuation of isolation precautions for known COVID-19 recovered patients of all ages, a negative pressure room is NOT required, and COVID-19 transport safety is NOT required. Please refer to the [Employee Toolkit](#) for the latest PPE requirements regarding COVID-19 recovered patients. In the absence of specific PPE guidance, COVID-19 recovered patients' PPE requirements shall mirror those of a COVID-19 negative patient, except during aerosol generating procedures during which airborne and contact PPE with eye protection is required.

Efforts should be made to cohort COVID-19 recovered patients where reasonably practicable.

Re-testing may be considered for patients with **NEW** symptoms highly concerning for COVID-19, or the clinical situation warrants such testing.

**New Symptoms:** If a patient case met criteria for COVID-19 precaution removal and later develops new symptoms highly concerning for COVID-19 (e.g., fever with new cough, shortness of breath, compatible radiographic findings, etc.) that are not explained by the patient's ongoing COVID-19 course of illness or another cause (e.g., new bacterial pneumonia, pulmonary embolism, volume overload), treat as a PUI; place in negative pressure room using airborne and contact PPE with eye protection and retest the patient. Consultation with Infectious Diseases recommended.

*To remove COVID-19 flag in Care Connect (following April 30, 2022 EPIC GO-LIVE):*

- *Flag will automatically expire at 45 days after positive result.*
- *To remove flags earlier than 45 days, notify Infection Prevention to remove flag. Email [RRHInfectionPreventionists@rochesterregional.org](mailto:RRHInfectionPreventionists@rochesterregional.org) or hospital Infection Preventionist.*
- *Patients who are Admitted/Readmitted within the 45 days are placed on Enhanced Isolation precautions and assessed for ongoing symptoms.*
- *Flag will be removed when patient meets discontinuation criteria as described in this policy.*

### **TESTING POSITIVE PATIENTS AND REPEAT TESTING**

Repeat COVID-19 viral testing after first positive is not indicated for cases within **ninety (90) days** from positive result. Retesting of patients to remove precautions is not recommended. A positive or negative result will not alter the above recommendations for discontinuation of isolation precautions. Re-testing may be considered for patients with NEW symptoms. Patients presenting with new symptoms more than **ninety (90) days** after their first positive result should be placed in airborne and contact isolation with appropriate PPE protection until it is determined if testing is indicated.

Testing and Re-Testing on Admission: Do not re-test known (and confirmed) COVID-19 positive patients on admission to the hospital if they have met above criteria for COVID-19 isolation precaution discontinuation, do not have new symptoms concerning for COVID-19, and are within **ninety (90) days** of the first positive COVID-19 test. Place on regular floor with standard precautions. If it is more than **ninety (90) days** since the first positive COVID-19 test, then test if the patient is requiring admission or if the

patient has symptoms.

### **RETESTING NEGATIVE PATIENTS**

Patients who have previously tested negative for COVID-19 that are either transferred or readmitted to SLHS should be tested within the last twenty four (24) hours.

### **RETESTING PATIENTS DISCHARGING TO ANOTHER FACILITY**

Re-testing may be required by an accepting facility if the patient is being transferred from a SLHS hospital to either an inpatient rehab facility, psychiatry inpatient setting, long-term care facility, group home, dialysis center or other institutional setting required by New York State to have a negative COVID-19 test.

At the time of transfer, if the patient does not meet SLHS requirements for removal of COVID-19 precautions prior to transfer, coordinate with the discharge coordinator and ensure the setting is equipped to manage patients requiring COVID-19 isolation precautions. If the accepting facility requires negative COVID-19 testing prior to transfer, engage with discharge care coordinator to clarify the testing requirements at that specific facility and work with the patient and the care team to meet those requirements.

## **Related Policies, Documents, & Forms**

- [Employee Toolkit](#)
- [Temporary COVID-19 Policy: Screening Admitted Patients](#)
- [Infection Prevention - Standard Precautions - Transmission Based Isolation](#)

## **References/Citations**

- Duration of Isolation and Precautions for Adults with COVID-19. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html>
- NYSDOH Guidance 103252. Health Advisory: Discontinuation of Isolation for patients with COVID-19 Who are Hospitalized or in Nursing Homes, Adult Care Homes, or Other Congregate Settings with Vulnerable Residents. April 19, 2020. <https://coronavirus.health.ny.gov/system/files/documents/2020/04/doh-covid-19-discontinuing-isolation-hospital-congregate-setting.pdf>
- NYS Executive Order No. 202.30. <https://www.governor.ny.gov/news/no-20230-continuing-temporarysuspension-and-modification-laws-relating-disaster-emergency>

## **Approval Signatures**

**Step Description**

**Approver**

**Date**

Final Approval	Lisa Oldham: Chief Nursing Officer	2/15/2023
Compliance Review & Approval	Keri Allen: Director of Corporate Compliance	2/15/2023
HIM Review & Approval	Toni Fraser: Health Information Systems Operations Manager	2/6/2023
Surgical Services Review & Approval	Jeffrey Eckdahl: Director of Surgical Services	2/2/2023
Infection Prevention Approval	Jackie Scanlon: SLHS Director of Risk Management and Regulatory Af	2/1/2023
Infection Prevention Review	Emile Shumbusho: Infection Preventionist (GH)	2/1/2023
Infection Prevention Review	Nancy Pinckney: Infection Prevention Specialist	2/1/2023
Infection Prevention Review	Renee Dashnaw: Infection Prevention Specialist	2/1/2023

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