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To: Wisconsin Local Health Officers, Tribal Health Officials, Infection Prevention Staff, and Health Care Providers

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Public Health Guidance for Discontinuation of Home Isolation and Voluntary Home Quarantine for Individuals Infected with or Exposed to COVID-19

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Summary
COVID-19 is now a global pandemic caused by a transmissible respiratory virus, SARS-CoV-2. Because it is a novel pathogen, limited information is available to characterize the spectrum of clinical illness, transmission efficiency, and the duration of viral shedding for patients with COVID-19. To promote consistent practices based on the best available information, DHS is providing recommendations for health departments and clinical partners related to decisions about discontinuing isolation and quarantine. These guidelines are based on preliminary research related to the duration of viral shedding in infected persons, and review of practices by health departments in other jurisdictions.

Definitions
Isolation means the separation of a person or group of people known or reasonably believed to be infected with a communicable disease, and potentially infectious, from those who are not infected, in order to prevent spread of the communicable disease.

Quarantine means the separation of a person or group of people reasonably believed to have been exposed to a communicable disease but not yet symptomatic, from others who have not been so exposed, to prevent the possible spread of the communicable disease.

Recommendations
For patients diagnosed with COVID-19 who are recovering in a home (non-hospital) setting, isolation may be discontinued when both of the following have occurred:

1. The patient is free of fever, productive cough and other acute symptoms of respiratory infection for 72 hours.
   AND
2. 14 days has elapsed from the day the patient first experienced symptoms.

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Asymptomatic contacts of a confirmed COVID-19 case, with medium or high risk exposure, may be released from quarantine 14 days after the last time they were in close contact or shared an indoor living environment with a person with confirmed COVID-19. For people living in the same home, Day 1 of their quarantine would be the day after the case-patient is free of fever, productive cough, and other acute symptoms of respiratory infection.

**How long should patients be isolated after they are tested for COVID-19?**

Patients who are tested for COVID-19 because there is clinical suspicion, but who do not have known or suspected exposure to SARS-CoV-2 should be in appropriate isolation while the test is pending, but do not require prolonged isolation if the test for COVID-19 is negative. They can return to their normal activities, be mindful of sign and symptoms, and continue to practice good hygiene, consistent with recommendation for all respiratory infections.

Symptomatic patients who are tested and are medium or high risk contacts of a COVID-19 case, or have traveled from a country with a level 3 travel health notice or a U.S. state with community transmission, should remain in isolation for at least 14 days after their last exposure (or last date in the affected country/state), even if their COVID-19 test is negative. Separation of individuals with exposure to COVID-19 for 14 days is recommended, regardless of if the individual is symptomatic, or if they have respiratory symptoms from any cause.

**Contacts**

Please contact DHSResponse@dhs.wisconsin.gov with questions about the COVID-19 response. A team of DHS staff is monitoring the inbox. We will use the incoming questions to update our FAQs and guidance.

For specific questions about considerations for testing, or to discuss a particular case during business hours, please call 608-267-9003 and leave a message or send an email to DHSDPHBCD@wi.gov. For after-hours assistance, call 608-258-0099.