

## Management of potential COVID-19 inpatient exposure

**COVID-19 inpatient exposure** is defined as sharing an inpatient room for 15 minutes or longer with a source patient with laboratory confirmed COVID-19 during the source patient's infectious period. There could be an exception to exposure if the source (positive) patient continued to wear a mask and did not have it off for more than 15 minutes AND the source patient and roommate spent less than 4 hours together.

1. Source patient is **symptomatic**: The infectious period begins 48 hours before the source patient's symptom onset and ends when the source patient meets criteria for discontinuation of COVID-19 isolation precautions.
2. Source patient is **asymptomatic**: The infectious period begins 48 hours before the source patient's first positive test and ends 10 days after the source patient's first positive test (or when patient meets criteria for discontinuation of COVID-19 isolation precautions if becomes symptomatic).

Note: See [here](#) for employee exposure information.

### Management of exposed patients:

- Have the source (infected) patient don a medical grade mask immediately. The source patient must wear the mask continuously until they have been moved to a private room.
- Notify exposed patient's attending provider of the potential exposure.
- Care for exposed patient in a private room. Place an order for Droplet precautions based on chart below. (While all staff are currently following "universal" droplet precautions by wearing a medical grade mask, placing an order for droplet precautions communicates the need for a private room in the EMR and bed management systems).
- Quarantine and post exposure testing guidance for exposed patients (**2 options below depending on recent recovery status**):

**Exposed patients  
NOT Recently Recovered within the last 90 days**

Date of last exposure:

Dates of precautions:

Due date of test(s):

- a. Test as soon as potential exposure is confirmed.
- b. Attending provider notifies patient they were potentially exposed to COVID-19<sup>†</sup>.
- c. Remain in Droplet precautions for minimum of 5 days post-exposure
- d. Test on day 5 post-exposure (day 0 is day of last exposure). **If negative, remove precautions.**
- d. During precaution period, monitor for symptoms of COVID-19 and document temperature at a minimum of BID. If the exposed patient develops any symptoms, they should be placed in Modified Airborne/Contact/Eye protection precautions and tested for COVID-19.
- e. If discharging after day 5 test:
  1. Self-monitor for symptoms. No outpatient testing is needed unless symptoms develop.
  2. Regardless of vaccination status, no home quarantine is needed but wear a mask around others inside your home or indoors in public until 10 days have passed since the exposure (day 0 is day of last exposure).
- f. If discharging prior to 5-day test:
  1. If possible, obtain a COVID-19 test on or around day 5 as outpatient. Patient should be instructed to monitor for symptoms and seek testing if they develop symptoms. If testing at UIHC is desired, use SmartSet REF 7386 and choose FOLLOW-UP – ILI RESPIRATORY CLINIC (Asymptomatic High Risk Exposed Testing), including date test is needed.
  2. Regardless of vaccination status, no home quarantine is needed but wear a mask around others inside your home or indoors in public until 10 days have passed since the exposure (day 0 is day of last exposure).
- g. Discharge instructions: use SmartPhrase .coviddischinst or SmartText HCI: COVID-19 Exposure Discharge.

<sup>†</sup>Do not disclose to the exposed patient specifics who the source of the exposure was or other details about the exposure. Per Legal, this should be referred to as “a potential exposure”.

<b>Exposed patients Recently Recovered from COVID-19 within the last 90 days</b>
Date of last exposure:
<ul style="list-style-type: none"> <li>a. No initial testing is needed.</li> <li>b. <b>No isolation is needed.</b></li> <li>c. Attending provider notifies patient they were potentially exposed to COVID-19<sup>†</sup>.</li> <li>d. For 10 days following the last exposure, monitor for symptoms of COVID-19 and document temperature at a minimum of BID. If the exposed patient develops any symptoms of COVID-19, they should be placed in Modified Airborne/Contact/Eye protection precautions and <b>tested with a Respiratory Pathogen Panel order.</b></li> <li>e. If going to be discharged before 10 days, no home quarantine is needed but wear a mask while around others inside your home or indoors in public until 10 days have passed since the exposure (day 0 is day of last exposure).</li> <li>g. Discharge instructions: use SmartPhrase .coviddischinst or SmartText HCI: COVID-19 Exposure Discharge.</li> </ul>
<p><sup>†</sup>Do not disclose to the exposed patient specifics who the source of the exposure was or other details about the exposure. Per Legal, this should be referred to as “a potential exposure”.</p>

Post exposure test costs will be covered by UIHC for inpatients. PHE will provide patient and test details to Risk Management.

If an exposed patient is discharged to a congregate setting prior to discovery of the exposure and the source patient has been deemed infectious, the Program of Hospital Epidemiology will notify the facility.

Patient is notified if they are discharging or are remaining inpatient, even before confirmation of the infectiousness of the source patient. If the source is determined to be non-infectious, then attending provider will update the patient that they’re not considered exposed.

**References**

(CDC), Centers for Disease Control and Prevention. (2022, August 24). *Quarantine and Isolation*. Retrieved from <https://www.cdc.gov/coronavirus/2019-ncov/your-health/quarantine-isolation.html>

(IDPH) Iowa Department of Public Health. (n.d.). *COVID-19 (SARS-CoV-2)*. Retrieved from IDPH Epi Manual: <https://wiki.idph.iowa.gov/epimanual/Home/CategoryID/522>