

Discontinuing Isolation for Patients with COVID-19 at UCSF Health

I. Criteria for discontinuing isolation:

The revised COVID-19 isolation discontinuation criteria below are based on updated [CDC recommendations](#) and apply to all UCSF healthcare settings (i.e., inpatient, outpatient, and procedural areas).

Table 1.

Patient characteristics	Criteria to remove a COVID Confirmed banner and Novel Respiratory Isolation NOTE: Date of Symptom onset = Day 0. If asymptomatic, date test collected = Day 0	
	All patients must be afebrile for > 24 hrs without antipyretics & have symptom improvement	
	Requirements for Time-Based Criteria	Requirements for Test-Based Criteria
Not immunocompromised AND did not have severe or critical COVID-19 infection	Discontinue isolation on/after Day 11 IF: <ul style="list-style-type: none"> At least 10 days have passed since symptom onset If asymptomatic, since first positive test collected 	Not Applicable
Immunocompromised ¹ (excludes severely immunocompromised ²) AND did not have severe or critical COVID-19 infection	Discontinue isolation on/after Day 21 IF: <ul style="list-style-type: none"> At least 20 days have passed since symptom onset If asymptomatic, since first positive test collected 	Discontinue isolation on/after Day 11 IF: <ul style="list-style-type: none"> At least 10 days have passed since symptom onset If asymptomatic, since first positive test collected AND Repeat COVID-19 test on/after Day 10 is negative⁴
Had severe or critical COVID-19 infection ³	Discontinue isolation on/after Day 21 IF: <ul style="list-style-type: none"> At least 20 days have passed since symptom onset 	Discontinue isolation on/after Day 11 IF: <ul style="list-style-type: none"> At least 10 days have passed since symptom onset AND Repeat COVID-19 test on/after Day 10 is negative⁴
Select Severely Immunocompromised ²	Not Applicable	Discontinue Isolation on/after Day 21 IF: <ul style="list-style-type: none"> At least 20 days have passed since symptom onset If asymptomatic, 20 days since first positive test collected AND Repeat COVID test on/after Day 20 is negative⁴

¹ UCSF **Definition of Immunocompromised** (adapted from [CDC guidance](#)):

1. Receiving current chemotherapy for malignancy including but not limited to chemotherapy within the last 6 months, any oral anti-cancer agent except endocrine therapy alone,

- immunotherapy with check point inhibitor or equivalent.
2. Hematologic malignancy
 3. Untreated HIV infection and CD4 T lymphocyte count < 200
 4. Primary severe immunodeficiency disorders
 5. Solid organ transplant recipient
 6. Hematopoietic stem cell (bone marrow) transplant recipient within the last 2 years
 7. CAR-T therapy within the last 2 years
 8. Receipt of prednisone of 20 mg/day (adult patients) and 1mg/kg/day (pediatric patients) or the equivalent for more than 14 days, or treatment with other high-risk immunosuppressive medications (see Appendix A for examples)

²**Definition of select severely immunocompromised patients.** Refer to the [isolation discontinuation guidance for select severely immunocompromised patients](#) for additional details.

All patients

1. Solid organ transplant recipient in the last year
2. Receiving rituximab or other B-cell depleting agents within the last 6 months
3. Primary immunodeficiencies - combined immunodeficiencies (e.g. Severe combined immunodeficiency (SCID)/common variable immunodeficiency (CVID)), B-cell deficiencies and/or needing immunoglobulin replacement, idiopathic CD4 lymphopenia/severe lymphopenia; but NOT chronic granulomatous disease (CGD) or most DiGeorge's syndrome

Adult services

4. Adult AML/ALL until 3 months after completion of cytotoxic chemotherapy
5. Adult CAR-T cell and allogeneic stem cell transplant within last 3 months

Pediatric services

6. Patients with AML until 3 months after completion of chemotherapy
7. Patients with infant ALL and/or ALL patients not in remission
8. Patients with CAR-T cell therapy within the last 3 months
9. All BMT patients without T cell reconstitution

³**Disease severity definitions** (adapted from [CDC guidance](#)):

- **Severe Illness:** Individuals who have respiratory frequency >30 breaths per minute or tachypnea based on normal age cutoffs, SpO2 <94% on room air at sea level (or, for patients with chronic hypoxemia, a decrease from baseline of >3%), ratio of arterial partial pressure of oxygen to fraction of inspired oxygen (PaO2/FiO2) <300 mmHg, or lung infiltrates on >50% of a chest radiograph. (*Patients should meet one of these criteria for at least 12 hours when deciding whether severe illness is present*).
- **Critical Illness:** Individuals who have respiratory failure, septic shock, and/or multiple organ dysfunction.

⁴**COVID-19 repeat testing recommendations for test based isolation clearance:**

- Re-test using nucleic acid amplification test such as PCR, Abbott ID Now rapid isothermal NAAT or two home or healthcare worker-collected COVID-19 antigen tests at least 24 hours apart with negative result or CT Value >=35
 - Pediatric patients under 10 years of age are not eligible for home collected antigen-based test clearance

II. Discontinuing isolation for hospitalized patients who continue to require critical care:

For COVID-19 ICU patients with persistent systemic inflammatory response syndrome and/or respiratory

failure for >20 days who are clinically stable and no longer suspected of having active SARS-CoV-2 infection, place a consult order to request review by HEIP: “Inpatient Consult to HEIP/IC for COVID Recovered Evaluation” after 20 days of isolation

III. Discontinuing isolation for patients with presumed Multisystem Inflammatory Syndrome (MIS) of children (MIS-C) or adults (MIS-A)

Patients with suspected or confirmed MIS-C or MIS-A may or may not have a history of prior COVID-19 infection. The need for Novel Respiratory Isolation and if indicated removal of a “COVID (Confirmed) infection flag will be considered on a case-by-case basis.

Place a consult order to request review by HEIP:

- I. *Inpatients:* “Inpatient Consult to HEIP/IC for COVID Recovered Evaluation.”
- II. *Outpatients:* “Ambulatory Referral to HEIP for COVID Flag Removal.”

IV. Criteria for COVID Recovered Banner:

Any patient with confirmed COVID-19 infection and with an active COVID Confirmed banner will be eligible to receive a COVID Recovered banner at the time when isolation and the COVID confirmed banner are removed. The COVID Recovered banner will serve as an indicator of recent infection and remains on the patient’s Apex chart for 90 days from the date of symptom onset (Day 0) or if asymptomatic, from the date the COVID test was collected. Expedited manual resolution of the COVID Confirmed banner to the COVID Recovered banner can be pursued by the provider if their patient meets the appropriate time or test-based criteria for COVID Recovery (see [Table 1](#)) (Page1).

Criteria to receive a COVID Recovered Banner: Must meet all 3 criteria

1. Documentation in chart around time of symptom onset or positive test. Examples of documentation include and are not limited to:
 - a. Photograph of positive test
 - b. Mychart messaging between patient and provider regarding symptoms or positive test
 - c. Provider documentation in care everywhere or Apex
 - d. Scanned Clinical documents from outside providers
2. Specific date of test or symptom onset is required
3. Must be within 90 days of positive COVID test or date of symptom onset

Patients ineligible for COVID Recovered Banner:

1. Patients that do not meet criteria 1-3 above
2. False positive patients
3. Patients who report a COVID infection >90 days from the date of notification or chart review

FOLLOWING RECOVERY FROM COVID-19 INFECTION		
	0-90 Days from date of symptom onset or date positive COVID Test Collected	>90 Days from date of symptom onset or date positive COVID Test Collected
New or worsening signs/symptoms concerning for COVID-19 Infection	Place patient in Novel Respiratory Isolation & Consider repeat testing	Place patient in Novel Respiratory Isolation & repeat testing
New COVID Exposure & asymptomatic	Do not isolate, do not repeat COVID Testing	Place patient in Novel Respiratory Isolation & repeat testing per UCSF Exposure Guidelines

**Should clinical services have questions regarding interpretation of positive COVID-19 testing, recommend discussing with clinical infectious diseases services. Questions regarding proper COVID-19

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isolation & duration should be directed to HEIP**

Appendix A**High Risk Immunosuppressive Medications (Examples only, not all-inclusive)**

High Risk Immunosuppression		
Class	Generic	Trade
Steroids	Prednisone > 20 mg/day (adults) or > 1mg/kg/day (children) for >14 days or the equivalent for other steroid agents	
Purine analog	Azathioprine > 3mg/kg/day 6-Mercaptopurine > 1.5 mg/kg/day	Imuran Purinethol
	Methotrexate > 0.4 mg/kg/week	
Alkylating agents	Cyclophosphamide Chlorambucil	Cytoxan
TNF inhibitor	Etanercept Infliximab Adalimumab Certolizumab pegol Golimumab	Enbrel Remicade Humira Cimzia Simponi/Simponi Aria
CTLA-4 Ig	Abatacept	Orencia
B-cell inhibitor	Rituximab Belimumab Ocrelizumab	Rituxan Benlysta Ocrevus
B- and T-cell inhibitor	Alemtuzumab	Campath
Anti-IL 12/23	Ustekinumab	Stelara
Anti-IL 17/23	Secukinumab Ixekizumab Brodalumab	Cosentyx Taltz Siliq
Anti-IL-1	Anakinra Rilonacept Canakinumab	Kineret Arcalyst Ilaris
Phosphodiesterase 4	Apremilast	Otezla
Jak/Stat inhibitors	Tofacitinib Baracitinib Ocalacitinib Ruxolitinib	Xeljanz Olumiant Apoquel Jakafi/Jakavi
Anti-IL-5/-IL-6	Tocilizumab Reslizumab Benralizumab	Actemra Cinquair Fasnera

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