

UCSF Health Guidance for Discontinuing Isolation COVID+ Patients

Confirmed COVID+ Infection

Concern for False Positive Result?

Email Contact Tracing Team: covidrnteam@ucsf.edu

Symptomatic improvement & Afebrile \geq 24 hrs w/o antipyretics?

Re-evaluate when patient meets symptom criteria

If symptom improvement is not clear because patient has a persistent oxygen requirement

Is the patient an **Adult service line patient** with history of Bone Marrow Transplant or active hematologic malignancy?

Contact HEM BMT COVID POOL IN APEX with your request

- Immunocompromised:**
1. Receiving chemotherapy within last 6 months including oral anti-cancer agents except endocrine therapy alone
 2. Hematologic Malignancy
 3. Hematopoietic stem cell transplant or CAR-T cell therapy within the last 2 years
 4. HIV with CD4 count < 200
 5. Primary Immunodeficiencies
 6. History of Solid Organ Transplant
 7. Receiving Prednisone 20mg/day (adults) or 1mg/kg/day (peds) or greater or other immunosuppressive therapy for autoimmune/systemic disorders

BCH-SF Patient?

Please complete the household contact questionnaire

If patient is inpatient at BCH-SF please complete the following dotphrase in Apex: **.COVIDHOUSEHOLDCONTACTSDATACOLLECTIONTABLE**

For inpatients, have you contacted the visitor escalation committee?

Contact the Visitor Escalation committee & await their response, then proceed with survey

Is the patient immunocompromised?

Did the patient have Severe COVID or Critical COVID Illness?

Discontinue isolation on Day 11 or later

Severe COVID: Requiring supplemental Oxygen for > 12 hrs
Critical Illness: Individuals who have respiratory failure, septic shock, and/or multiple organ dysfunction

Is the patient Severely Immunocompromised?

- Severely Immunocompromised:**
- 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. SCID/CVID), B-cell deficiencies and/or needing immunoglobulin replacement, idiopathic CD4 lymphopenia/severe lymphopenia; but NOT CGD or most DiGeorge's syndrome
 - a. Adult services
 - i. Adult AML/ALL until 3 months after completion of cytotoxic chemotherapy
 - ii. Adult CAR-T cell and Allogeneic stem cell transplant within last 3 months
 - b. Pediatric service
 - i. Patients with AML until 3 months after completion of chemotherapy
 - ii. Patients with infant ALL and/or ALL patients not in remission
 - iii. Patients with CAR-T cell therapy within the last 3 months
 - iv. All BMT patients without T cell reconstitution

11 days since symptom onset or if asymptomatic, date of COVID positive test

Reassess on Day 11

20 days since COVID test positive or symptom onset?

Repeat COVID PCR, NAAT, or two home or healthcare personnel collected COVID antigen tests 24 hrs apart (patients <10 years of age are not eligible for home antigen testing based clearance)

Discontinue Novel respiratory isolation on day 21 or later

Repeat COVID PCR, NAAT, or two home or healthcare personnel collected COVID antigen tests 24 hrs apart (patients <10 years of age are not eligible for home antigen testing based clearance)

Reassess 20 days after symptom onset or if asymptomatic, first positive test

If repeat tests remain positive after two tests, contact covidrnteam@ucsf.edu

Continue Novel Respiratory Isolation

Discontinue Novel respiratory isolation on day 21 or later

Repeat testing every 3-5 days

Repeat Test

Negative

Discontinue Novel Respiratory isolation on Day 11 or later

Positive

Repeat Test Positive

Repeat Test Negative