



COVID-19 TESTING RECOMMENDATIONS AND REQUIREMENTS

WHEN TO GET TESTED:

- If a person has symptoms of COVID-19, you should get tested with a nasal test*

Common symptoms of COVID-19: Fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and diarrhea. This list does not include all possible symptoms, and CDC will continue to update this list as we learn more about COVID-19.

- If you have been exposed to COVID-19 - but do not have symptoms - you should wait at least 3-4 days after exposure before being tested.
- The Alabama Department of Public Health (ADPH) recommendation for testing is a PCR (nasal swab) test only. Blood tests for antibodies are NOT currently recommended for determining illness status.

AFTER YOU GET TESTED:

- **IT IS VERY IMPORTANT THAT INDIVIDUALS REMAIN ISOLATED – AWAY FROM OTHERS – UNTIL YOU AT LEAST GET YOUR TEST RESULTS***
- Once you get your test results, you will get (or will need to get) additional quarantine/isolation instructions

GOING BACK TO WORK:

- Whether an individual is a CASE or a CLOSE CONTACT, they should totally complete isolation/quarantine instructions before going back to work – plus – be completely free of fever.
- **Having a repeat test in order to go back to work IS NOT recommended and is discouraged – – except in very specific situations (individual is immunocompromised).**
- Employers should not need any additional documentation beyond the quarantine information (or letter if available) in order to allow return to work.

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Isolation and Quarantine Guidance for COVID-19 Healthcare Personnel

Healthcare Personnel (HCP)	
Definition	<p>Healthcare personnel (HCP) Please visit the CDC's website at https://www.cdc.gov/coronavirus/2019-ncov/hcp/testing-healthcare-personnel.html and at https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assessment-hcp.html</p>
Case Status	HCPs
COVID-19 Case WITH Symptoms	<p><u>Symptom-based Strategy</u> (CDC preferred) Isolation can end after the following criteria are met:</p> <ol style="list-style-type: none"> 1) at least 10 days from onset of symptoms <u>and</u> 2) at least 1 day (24 hours) after <u>recovery</u>. <p>“Recovery” is defined as resolution of fever without the use of fever-reducing medications with progressive improvement or resolution of other symptoms.</p> <p>“Improvement” means that shortness of breath and cough have improved and noted as “mild” or “none”.</p> <p><u>Test-Based Strategy</u> (Not recommended. Use for certain high-risk exposures only) If testing is readily available and the test-based strategy is chosen, isolation can end after all of the following criteria are met:</p> <ol style="list-style-type: none"> 1) Resolution of fever without the use of fever-reducing medications, 2) Improvement in respiratory symptoms (e.g., cough, shortness of breath), <u>and</u> 3) Two (2) consecutive negative respiratory specimens tested using an FDA Emergency Use Authorized COVID-19 molecular assay collected ≥24 hours apart. <p>Note that this strategy is not recommended by CDC and should only be used for certain high-risk exposures. For example: HCPs working with immune compromised patients or who are immunocompromised themselves.</p>

