Provider Guidelines for Discontinuation of Severe Respiratory Precautions for COVID-19—3/12/2021 1300

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A COVID-19 test is ordered?  

Test result negative?  

Was the patient symptomatic at time of the test?  

Symptomatic patients with COVID-19 should remain in SRP until the following two are met plus the patient specific criteria (1, 2 or 3):  
1. Symptom-based strategy for immunocompetent patients:  
   - At least 10 days have passed since symptoms first appeared  
2. Symptom-based strategy for patients who are severely immunocompromised and/or require ICU admission at any time during admission:  
   - At least 20 days have passed since symptoms first appeared  
3. Test-based strategy is no longer a recommended strategy, except in certain situations:  
   - Negative COVID-19 test results from at least two (2) consecutive nasopharyngeal swab specimens collected ≥24 hours  

Asymptomatic patients with COVID-19 who have been asymptomatic throughout their infection should remain in SRP until the most appropriate Time-based strategy is met:  
1. Time-based strategy for patients who are not severely immunocompromised:  
   - 10 days have passed since the date of their first positive COVID-19 test, assuming they have not subsequently developed symptoms since their positive test.  
2. Time-based strategy for patients who are severely immunocompromised:  
   - 20 days have passed since the date of their first positive COVID-19 test, assuming they have not subsequently developed symptoms since their positive test.  

Key Points  
- Meeting criteria for discontinuation of SRP is not a prerequisite for discharge and should be based on clinical indication.  
- If isolation can be discontinued, RN to refer to the Test Result Notification Nursing Standard Work to remove isolation from Epic and remove the SRP sign from the patient door and alert the PPE Coach/Hot Zone Boss.  
- For additional guidance if there is a higher level of clinical suspicion for COVID-19, refer to the Inpatient Workflow.  
- For additional guidance to determine if a patient is severely immunocompromised, refer to the Severe Immunosuppressed Definitions.  
- All patients who have been in SRP > 20 days will be reviewed by Infection Prevention and Infection Prevention will contact the provider to consider removal from SRP.  
- COVID-19 antibody results are not used to determine discontinuation of isolation.  
- For Multisystem inflammatory syndrome in children (MIS-C), refer to the Guideline: MIS-C.  

1) If patient has previous COVID test results and additional guidance is needed to determine if retesting for COVID-19 should be considered, refer to the Retesting Criteria.  
2) If patient is retested after 90 days from an initial positive and subsequent test is positive, the decision to isolate should be evaluated by the provider based on clinical suspicion for reinfection of COVID-19. Consider consulting Infectious Disease if additional clinical guidance is needed.  
* If patient is retested during the same Spectrum Health encounter or within 90 days from an initial positive, there is no need to isolate unless there are new or worsening symptoms consistent with COVID-19 after recovery from the initial illness. Consider consulting Infection Disease if additional clinical guidance is needed.  
3) If no other recognized cause of fever.  
4) Antipyretics used for indications other than fever reduction are acceptable and do not need to be discontinued to show resolution of fever.  
5) If the patient’s start date of COVID related symptoms is uncertain, then the first positive COVID-19 test date should be used to determine when SRP can be discontinued.  
6) A test-based strategy is no longer recommended as it may result in prolonged isolation of patients who continue to shed detectable SARS-CoV-2 RNA but are no longer infectious. In some instances, a test-based strategy could be considered for discontinuing SRP earlier than if the symptom-based strategy were used. A test-based strategy could be considered for some patients (e.g., those who are severely immunocompromised) in consultation with Infectious Disease if concerns exist for the patient being infectious for more than 20 days.