

BILH Guidance for Discontinuation of COVID-19 Isolation for Patients with COVID-19 who are IMMUNE COMPETENT

This document provides guidance on management of immunocompetent patients with COVID-19 in both the inpatient and outpatient setting. Outpatient visits include: ambulatory visits, surgeries, procedures, laboratory or imaging appointments. Note that this guidance does NOT apply to healthcare personnel (See BILH Return to Work criteria on institution-specific website.)

For guidance on immunocompromised patients, please see the guideline [BILH Guidance for Discontinuation of COVID-19 Isolation: Immunocompromised Patients](#).

Degree of illness		Criteria for Discontinuation of COVID-19 Isolation ³
Symptomatic (at any time)	Non-critical illness (not meeting definition of critical illness ¹ definition)	<ol style="list-style-type: none"> At least 10 days* after COVID-19 diagnosis (<i>positive PCR, home Ag test meeting acceptability criteria, or symptom onset</i>) AND Resolution of fever for at least 24 hours without the use of fever-reducing medications AND Improvement of signs and symptoms of illness
	Critical illness ¹	<ol style="list-style-type: none"> At least 20 days* after COVID-19 diagnosis (<i>positive PCR, home Ag test meeting acceptability criteria, or symptom onset</i>) AND Resolution of fever for at least 24 hours without the use of fever-reducing medications AND Improvement of signs and symptoms of illness <p><i>Consult Infection Control for discussion of possible exceptions for prolonged symptoms or use of fever-reducing medications</i></p>
Asymptomatic ² (throughout course)	Asymptomatic	At least 10 days* after COVID-19 diagnosis (<i>initial positive PCR</i>)

*Where Day 0 (zero) is the date of test or date of symptom onset (whichever comes first).

- Critical Illness:** Individuals who are in the ICU or equivalent inpatient unit due to COVID-19, such as those with respiratory failure (i.e., patients with new requirements for BiPAP or high-flow oxygen lasting >48 hours without improvement or, mechanical ventilation), septic shock, and/or multiple organ dysfunction.
- If at any time, an asymptomatic patient becomes symptomatic, follow strategy for symptomatic patients as outlined.
- If a patient experiences [rebound of COVID-19](#) symptoms after improvement (generally 2-8 days after initial recovery, with or without antiviral treatment), place the patient back on isolation and return to [COVID-19 Positive status](#). The start date for isolation should be reset to that of new symptom onset.