

Admissions from Hospital – CDC Guidance

Hospitalized patients with SARS-CoV-2 infection are not required to have a negative test prior to discharge to a nursing home. Decisions about discharge from the hospital should be based on the patient's clinical status and the ability of an accepting facility to meet their care needs, adhering to recommended infection prevention and control practices.

For patients with suspected or confirmed SARS-CoV-2 infection, decisions about discontinuing Transmission-Based Precautions should be based on the symptom-based strategies. ***The test-based strategy is no longer recommended because, in the majority of cases, it results in prolonged isolation of patients who continue to shed detectable SARS-CoV-2 RNA but are no longer infectious.***

Symptom-Based Strategy for Discontinuing Transmission-Based Precautions

Patients with ***mild to moderate**** illness who are not severely immunocompromised:

- At least 10 days have passed *since symptoms first appeared and*
- At least 24 hours have passed *since last fever* without the use of fever-reducing medications ***and***
- Symptoms (i.e., cough, shortness of breath) have improved

***Mild Illness:** Individuals who have any of the various signs and symptoms of COVID-19 (i.e., fever, cough, sore throat malaise, headache, muscle pain) without shortness of breath, dyspnea, or abnormal chest imaging.

***Moderate Illness:** Individuals who have evidence of lower respiratory disease by clinical assessment or imaging and a saturation of oxygen (SpO₂) ≥94% on room air at sea level.

****Note:** For patients who are ***not severely immunocompromised*** and who were ***asymptomatic*** throughout their infection, Transmission-Based Precautions may be discontinued when at least 10 days have passed since the date of their first positive viral diagnostic test.

Patients with ***severe to critical**** illness or who are severely immunocompromised:

- At least 10 days and up to 20 days have passed *since symptoms first appeared and*
- At least 24 hours have passed *since last fever* without the use of fever-reducing medications ***and***
- Symptoms (i.e., cough, shortness of breath) have improved
- Consider consultation with infection control experts

***Severe Illness:** Individuals who have respiratory frequency >30 breaths per minute, 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 of >50%.

***Critical Illness:** Individuals who have respiratory failure, septic shock and/or multiple organ dysfunction.

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This policy and procedure is not intended to replace the informed judgment of individual physicians, nurses or other clinicians nor is it intended as a statement of prevailing community standards or minimum standards of practice. It is a suggested method and technique for achieving optimal health care, not a minimum standard below which residents necessarily would be placed at risk.

****Note:** For severely immunocompromised patients who were asymptomatic throughout their infection, Transmission-Based Precautions may be discontinued when at least 10 days and up to 20 days have passed since the date of their first positive viral diagnostic test.

If a patient with suspected or confirmed SARS-CoV-2 infection, decisions about discontinuing Transmission-Based Precautions should be based on the symptom-based strategies. The test-based strategy is recommended only for use in limited circumstances.

If a patient with suspected or confirmed SARS-CoV-2 infection has not met criteria for discontinuing Transmission-Based Precautions, they should be transferred to a facility with the ability to adhere to infection prevention and control recommendations for the care of residents with SARS-CoV-2 infection, including placement in a unit or area of the facility designated to care for residents with SARS-CoV-2 infection and provision of recommended personal protective equipment to healthcare personnel.

If the patient has met the criteria for discontinuing Transmission-Based Precautions, they do not require additional restrictions. A patient hospitalized for non-COVID-related illnesses who is not known to have SARS-CoV-2 infection can be transferred to a nursing home without testing. To Ensure a patient as not exposed and might subsequently develop SARS-CoV-2 infection, nursing homes should place the patient in Transmission-Based Precautions in a separate observation area or in a single-person room for 14 days after admission.

As part of universal source control measures, all residents (including those described above) should wear a cloth face covering or facemask (if tolerated) whenever they leave their room.

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html>

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