

August 10, 2020

## **Guidance for Assessing COVID-19 Exposures and Defining Close-Contacts In a School Setting**

The following guidance is based on the current recommendations from the Centers for Disease Control and Prevention (CDC). Links to the CDC guidance documents used as references are available in the references section noted below. It is important to note that data to inform the definition of close contact are limited and are insufficient to precisely define the duration and time that constitutes a prolonged exposure. In addition, there will be situations where the possible exposures do not fit clearly into an obvious risk category. The final determination of close contact is up to the discretion of the Local Public Health Agency (LPHA) based on the findings of the case investigation and contact tracing conducted in collaboration with the school.

### **Defining Close Contacts:**

The CDC defines a close contact to COVID-19 as an individual who has had close contact (< 6 feet) for ≥15 minutes. Brief interactions are less likely to result in transmission; however, symptoms and the type of interaction remain important. Factors to consider when defining close contacts may include, but are not limited to, the following:

- The proximity of the case to possible contacts
- The duration of exposure (e.g., longer exposure time likely increases exposure risk)
- The symptoms of the case at time of exposure (e.g., coughing likely increases exposure risk).
- Type of interaction and/or activities (e.g., infected person coughs or sneezes directly into the face of an individual, direct physical contact (hugging or through sports/recess, etc.), shared eating or drinking utensils,

Research indicates that wearing masks may help those who are infected from spreading the infection to others. However, there is less information regarding whether masks offer protection for a contact exposed to a symptomatic or asymptomatic patient. Therefore, the determination of close contact should be made primarily on the basis of the CDC guidance (see above, which does not provide an exception for two individuals wearing masks) with consideration of other case specific clinical factors in mind.

### **Isolation:**

Students, teachers, and staff who test positive or are symptomatic close contacts to a case should self-isolate and not return to school until the following criteria are met:

- 10 days since symptoms first appeared **and**
- 24 hours with no fever without the use of fever-reducing medications **and**
- COVID-19 symptoms have improved (for example, cough, shortness of breath)

Note that these recommendations **do not** apply to persons with severe COVID-19, who usually would be hospitalized, or with severely weakened immune systems (immunocompromised), because those persons are too sick to attend school. For those symptomatic exposed contacts, we may suggest a consult with the LPHA, if alternative diagnosis was established. For additional information see “CDC. When You Can be Around Others After You Had or Likely Had COVID-19 document included in the references”.

### **Quarantine:**

Students, teachers, and staff identified as close contacts to a COVID -19 case should not come to school and take the following steps:

- Stay home for 14 days after the last contact with a person who has COVID-19
- Watch for fever (100.4°F), cough, shortness of breath, or other symptoms of COVID-19
- If possible, stay away from others, especially people who are at higher risk for getting very sick from COVID-19

It is important to note that students, teachers, and staff who have previously tested positive for COVID-19 and have met the criteria to be released from isolation do not need to quarantine or get tested again for up to 3 months as long as they do not develop symptoms again. People who develop symptoms again within 3 months of their first bout of COVID-19 may need to be tested again if there is no other cause identified for their symptoms.

The information provided is based on current CDC guidance and is intended to assist in the defining close contacts as part of the contact tracing efforts following the identification of a COVID-19 case in a school. Links to the references used to develop this guidance are provided. For additional guidance on COVID-19 and schools, please visit the “Missouri School Reopening Guidance Frequently Asked Health-Related COVID-19 Questions document available at <https://dese.mo.gov/sites/default/files/COVID-MO-K12-Reopening-Guidance.pdf>

### **References:**

- CDC. Public Health Guidance for Community-Related Exposure: <https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html>
- CDC. Considerations for Wearing Masks: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover-guidance.html#recent-studies>
- CDC. When You Can be Around Others After You Had or Likely Had COVID-19. [https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/end-home-isolation.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fprevent-getting-sick%2Fwhen-its-safe.html](https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/end-home-isolation.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fprevent-getting-sick%2Fwhen-its-safe.html)
- CDC. When to Quarantine: <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>