Montana Health Alert Network

DPHHS HAN *UPDATE*

Cover Sheet

DATE

February 12, 2021

SUBJECT

Updated quarantine recommendations for vaccinated persons and reinfection guidance.

INSTRUCTIONS

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Epidemiology Section 1-406-444-0273

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Categories of Health Alert Messages:

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Updated quarantine recommendations for vaccinated persons and reinfection guidance.

BACKGROUND

Although the risk of SARS-CoV-2 transmission from vaccinated persons to others is still uncertain, vaccination has been demonstrated to prevent symptomatic COVID-19; symptomatic and pre-symptomatic transmission is thought to have a greater role in transmission than purely asymptomatic transmission. Additionally, individual and societal benefits of avoiding unnecessary quarantine may outweigh the potential but unknown risk of transmission and facilitate the direction of public health resources to persons at highest risk for transmitting SARS-CoV-2 to others.

- To date, over 46,000 Montanans have been fully vaccinated for COVID-19.
- An additional 120,000 persons have received their first dose of the vaccine.

INFORMATION

On February 10, 2021, CDC updated the guidance entitled, "Interim Clinical Considerations for Use of mRNA COVID-19 Vaccines Currently Authorized in the United States". Complete guidance can be viewed on the CDC website: https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html

Fully vaccinated persons* who meet criteria will no longer be required to quarantine following an exposure to someone with COVID-19. Additional considerations for patients and residents in healthcare settings are provided. Information regarding re-infections has been updated as well.

*Persons who received the complete series of mRNA COVID-19 vaccine currently authorized in the United States.

RECOMMENDATIONS

Reduced Quarantine for Fully Vaccinated Persons in Community Settings

Vaccinated persons with an exposure to someone with suspected or confirmed COVID-19 are not required to quarantine if they meet all the following criteria:

- 1. Are fully vaccinated (i.e., ≥2 weeks following receipt of the second dose in a 2-dose series, or ≥2 weeks following receipt of one dose of a single-dose vaccine)
- 2. Are within 3 months following receipt of the last dose in the series
- 3. Have remained asymptomatic since the current COVID-19 exposure

Persons who do not meet all 3 of the above criteria should continue to follow current quarantine guidance¹ after exposure to someone with suspected or confirmed COVID-19.





Fully vaccinated persons who do not quarantine should still watch for symptoms of COVID-19² for 14 days following an exposure. If they experience symptoms, they should be clinically evaluated for COVID-19, including SARS-CoV-2 testing, if indicated.

This recommendation to waive quarantine for people with vaccine-derived immunity aligns with quarantine recommendations for those with natural immunity³, which eases implementation.

- ¹ https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html
- ² https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html
- 3 https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html

Vaccinated healthcare personnel, patients, and residents in healthcare settings

These criteria could also be applied when considering work quarantine for fully vaccinated healthcare personnel with higher-risk exposures, as a strategy to alleviate staffing shortages. If work quarantine is allowed or necessary, health care workers must follow quarantine guidance at work. Of note, exposed healthcare personnel would not be required to quarantine outside of work.

As an exception to the above guidance no longer requiring quarantine for fully vaccinated persons, vaccinated inpatients and residents in healthcare settings should continue to quarantine⁴ following an exposure to someone with suspected or confirmed COVID-19; outpatients should be cared for using appropriate Transmission-Based Precautions⁵. This exception is due to the unknown vaccine effectiveness in this population, the higher risk of severe disease and death, and challenges with social distancing in healthcare settings. Although not preferred, healthcare facilities could consider waiving quarantine for vaccinated patients and residents as a strategy to mitigate critical issues (e.g., lack of space, staff, or PPE to safely care for exposed patients or residents) when other options are unsuccessful or unavailable. These decisions could be made in consultation with public health officials and infection control experts.

- 4 https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html
- 5 https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html

The complete updated guidance is available at CDC's website: https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html

At this time recommendations for Long-Term Care and Assisted Living Facilities remain unchanged

Vaccinated staff and residents in Long-Term Care and Assisted Living Facility settings should continue to quarantine following an exposure to someone with suspected or confirmed COVID-19.

Guidance for Local Health Jurisdictions and Healthcare Providers about COVID-19 Reinfections

As a reminder, CDC recommends that persons being evaluated for reinfection with SARS-CoV-2 should be isolated under recommended precautions while undergoing evaluation. If reinfection is confirmed or remains suspected they should remain under the recommended SARS-CoV-2 isolation until they meet the criteria for discontinuation of precautions – for most persons, this would be 10 days after symptom onset and resolution of fever for at least 24 hours, without the use of fever-reducing medications, and with improvement of other symptoms.

Pending additional guidance from CDC, Montana DPHHS will consider a case a reinfection if the case meets the following criteria:

1. Patient develops new symptoms consistent with COVID-19 > 3 months after the date of initial symptom onset (use the date of first positive viral diagnostic test for persons who never developed symptoms).



- 2. Patient has a positive molecular amplification detection test (i.e., PCR+) > 3 months after the date of initial symptom onset (use the date of first positive viral diagnostic test for persons who never developed symptoms). If patient only has a positive antigen test, please collect another specimen to confirm diagnosis with a PCR test.
- 3. An alternative etiology cannot be identified by a provider (e.g., influenza and RSV are ruled out).

Healthcare providers may assist public health by providing information on any prior COVID infections, especially if the infection occurred in another state. If a case does not meet all criteria above, but you still suspect this person has been reinfected, please reach out to CDEpi for a consult (444-0273). For local health jurisdictions: cases of reinfection should have a new investigation created in MIDIS, and the reinfected case will be counted on the state of Montana COVID map.

References

Interim Clinical Considerations for Use of mRNA COVID-19 Vaccines Currently Authorized in the United States: https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html

