

Return to School or Childcare Guidance After COVID-19 Illness or Exposure

November 5, 2020

The Georgia Department of Public Health (DPH) in conjunction with the Georgia Department of Education have released guidance to help schools plan for a safe return to in-person instruction in fall 2020: <https://www.georgiainsights.com/recovery.html>. DPH recommends schools use this guidance to make decisions regarding opening for in-person education.

CDC also provides guidance on preventing the spread of COVID-19 in school and childcare settings <https://www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/schools.html>

For schools opting to have in-person instruction and childcare facilities the following guidance should be used to make decisions for students, teachers, and staff:

- with laboratory-confirmed COVID-19;
- who have suspected COVID-19 (e.g., developed symptoms of a respiratory infection [e.g., cough, shortness of breath, fever] but did not get tested for COVID-19 **and** have been exposed to a person with COVID-19 or live in an area with local or widespread transmission;
- who have been exposed to COVID-19 without appropriate personal protective equipment (PPE).

Return to School or Childcare Strategy

DPH recommends a time-based return to school or childcare strategy that is determined based on a person's health status. Decisions about "return to school" or "return to childcare" for persons with confirmed or suspected COVID-19 should be made in the context of local circumstances (community transmission, resource needs, etc.).

Symptomatic persons with confirmed COVID-19 or suspected COVID-19 can return to school or childcare after:

- 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 (e.g., cough, shortness of breath) have improved

Asymptomatic persons with confirmed COVID-19 can return to school or childcare after:

- At least 10 days* have passed since the positive laboratory test and the person remains asymptomatic
- Note, asymptomatic persons who test positive and later develop symptoms should follow the guidance for symptomatic persons above.

**A limited number of persons with severe illness (those admitted to a hospital and needed oxygen) or persons with a weakened immune system (immunocompromised) due to a health condition or medication may produce replication-competent virus beyond 10 days that may warrant extending duration of isolation for up to 20 days after symptom onset. Consider consultation with a medical provider and/or infection control experts for these patients.*

Asymptomatic persons who have a known exposure to a person with COVID-19 can return to school or childcare after:

- They have completed all requirements in the DPH guidance for persons exposed to COVID-19 found at <https://dph.georgia.gov/contact>
- Of note, if this person is tested for COVID-19 during the 14-day quarantine period, a negative test result would not change or decrease the time a person is quarantined.

Both CDC and DPH **DO NOT** recommend using a test-based strategy for children or adults returning to school or childcare (2 negative tests at least 24 hours apart) after COVID-19 infection. ** CDC has reported prolonged PCR positive test results without evidence of infectiousness. In one study, individuals were reported to have positive COVID-19 tests for up to 12 weeks post initial positive.

More information about the science behind the symptom-based discontinuation of isolation and return to school can be found at: <https://www.cdc.gov/coronavirus/2019-ncov/community/strategy-discontinue-isolation.html>

***Completing a test-based strategy is contingent upon the availability of ample testing supplies, laboratory capacity, and convenient access to testing and requires two samples taken at least 24 hours apart. If a facility requires the test-based strategy for return (**which is discouraged by DPH**), this should be done by a private physician through a commercial lab. The test-based strategy is not fulfilled by a single test, nor should it be used for screening of all persons returning to work.*