Follow-up for Positive COVID-19 Cases and their Close Contacts

Tools, Tips, and FAQs

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Topics Today

- COVID-19 Laboratory Results in MAVEN (Gillian Haney)
- COVID-19 Check In
- Tools for the Field
- COVID-19 Follow-Up
- MAVEN Tools & Tips
  - Communication Events for your town/city
  - First Responder Report
  - MAVEN Help Section
- Resources for Healthcare Associated Investigations
- Questions if we have time
Welcome to the Team!!

• COVID-19 Response and Guidelines are changing daily.
• Your skillset is needed to ensure we are getting the best data on COVID-19 and how it is affecting our MA population.
• Isolation of Cases and Quarantine of Contacts is the goal until that strategy changes/evolves.
  • Interview Cases
    • Data about the Case
    • Information on Contacts
  • Notify Contacts
Laboratory Confirmed COVID-19 Cases

- All Laboratory Confirmed COVID-19 Cases are considered “CONFIRMED” as of March 14, 2020.
  - Includes CDC, MA State Public Health Lab, and approved Commercial Labs.

- Previous Test Results (Prior to March 14):
  
  **“Presumptive Positive”**
  - Had tested positive by PCR at MDPH SPHL
  - Awaiting CDC confirmation
  - “Probable” case status in MAVEN.

  **“Confirmed Cases”**
  - Has tested positive by PCR at MDPH SPHL
  - Has tested positive by PCR at CDC
  - “Confirmed” case status in MAVEN.
Who Can Get Tested for COVID-19?

• Testing started out only through CDC. (Jan/Feb)
• Testing then expanded to State Laboratories. (Mar 4)
• Testing is currently being rolled out through commercial labs and also some larger medical providers. Expanding daily. (Mid March)
• Preliminarily patients had to meet very strict testing criteria and be preapproved.
  • March 13, 2020, MDPH published clinical advisory with expanded testing guidance outlining who should be tested and where to send those specimens (State Lab vs. elsewhere).
Who is considered a close contact?

- Close Contact is Defined as:
  - **Being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period of time;**
    - close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case
    - or -
  - **b) Having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on) while not wearing recommended personal protective equipment or PPE** (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection).
Isolation vs. Quarantine

**ISOLATION**
- For **symptomatic** people.
- For Confirmed COVID-19 Cases.
- Prevents people from infecting others
- **LASTS UNTIL THE PERSON IS NO LONGER CONTAGIOUS**

**QUARANTINE**
- For **asymptomatic** people who have had an exposure (i.e. travelers from high risk areas, close contacts of confirmed cases)
- Prevents people from infecting others in the event they develop symptoms
- **LASTS FOR 14 DAYS FROM LAST EXPOSURE. (If you don’t develop illness, you are then released.)**

**CASES**

**CONTACTS**
COVID-19 Response Involves Local Boards of Health (LBOHs)

- New positive labs create “Novel Coronavirus (SARS, MERS, etc)“ events in MAVEN.
- Local Boards of Health (LBOHs) can see events in their town/jurisdiction.
  - Conduct Index Case Interviews.
    - Make sure isolating.
  - Contact Identification, Notification, and follow-up.
    - Make sure quarantining.
  - Identify additional exposures of interest
    - Medical appointments (notify facility)
    - High Risk Settings (LTCF, nursing homes, schools, etc.) (notify facility)
    - Workplace (may identify specific contacts or notify facility – situation based)
    - Flights while infectious (notify CDC via the Quarantine Station)
- Share MAVEN events with other towns/jurisdictions as applicable
  - Follow-up in other jurisdictions is a shared partnership.
COVID-19 Response Involves Local Boards of Health (LBOHs)

• Assistance for local follow-up may be needed.
  • Not all have local capacity.
  • Not all have MAVEN access.
  • May eventually get too many cases to handle.
  • May also lose staff to illness/quarantine as outbreak progresses.
• Every new case going forward should have a State Epi assigned to provide guidance. (assigned 24 hours after you receive the positive).
  • Use your epi going forward when you have questions or need assistance.
  • Discuss if workload in your jurisdiction needs assistance.

Ask for help if you need it.
Key Documents for COVID-19 Follow-Up

1. COVID-19 Interview Tool for Confirmed Cases and Identifying Their Contacts (March 23, 2020)
   • Paper-based interviewing tool to guide your interview with confirmed cases.

2. Close Contact Identification Form (March 16, 2020)
   • Paper-based tool to assist in identifying and tracking close contacts.
     • Space for 5 contacts per page.

3. Isolation Guidance (For Cases)
   • MDPH Guidelines – give these to Confirmed Cases

4. Quarantine Guidance (For Contacts)
   • MDPH Guidelines – give these to quarantined contacts

5. COVID-19 Confirmed Case Follow-Up SOP for LBOHs
   • Outlines the process for following up on positive cases and their contacts.

6. MAVEN Tips Sheet
Follow-Up: Confirmed Cases

1. **Read Event Notes.** There may be preliminary information on the case from previous calls/follow-up. There might already be an indication if the case has been hospitalized or a clinical summary.
   1. Add your name to Admin QP Steps 2 & 3 so everyone knows who is working case.

2. **Provider Call:** You MAY need to contact the Ordering Provider to obtain some key clinical information if it looks like the patient might have been hospitalized (Look at the lab tab details).
   - Consult Facility Infection Prevention to obtain hospitalization details and other key clinical information.
     - Symptom Onset Date, symptoms, clinical complications, hospitalization dates, underlying conditions, race/ethnicity, occupation
   - Confirm contact information.
   - If patient is hospitalized and unable to be interviewed, obtain Emergency Contact Information for conducting Interview.
Follow-Up: Confirmed Cases

• Confirmed Cases
  • Interview Cases
    • Demographics
    • Clinical Information
    • Risk history (how they may have been exposed)
    • Identifying Close Contacts/Exposures of Concern
  • Answering Questions/Concerns
  • Ensuring Isolation is Followed
    • Use Isolation Guidelines Document

Use Interview Tool

Use Close Contact Form

Use Isolation Guidelines Document
Follow-Up: Contact Notification

• Create Contact Event in MAVEN
  • Share MAVEN Events with relevant jurisdictions.

• Contact Notification
  • Notify Contacts of Exposures
    • Determine Quarantine
    • Establish Follow-Up Plan

• Answering Questions/Concerns

• Ensuring Quarantine is Followed
  • Use Quarantine Guidelines Document

Use MAVEN Tip Sheet

Use Quarantine Guidelines Document
How is the case notified they are positive?

• Most providers receive the test results electronically and should call the patient upon receipt of results.
• Providers who are not set-up to receive electronic results will get a call from MDPH.
• Some providers are not calling out results right away, so you may be the first one to inform the case they are positive.
  • That is OK. Public Health is frequently the first to notify a patient.
  • Remember, these patients are waiting for these results. They want to know as soon as possible.
What should I tell the case?

- Inform them they are under isolation immediately (if not already).
- They should isolate away from others in the household.
- Provide *MDPH Isolation Guidelines*.
- They will be under isolation until they are cleared. *Guidance Issued 3/16*
- Should seek healthcare if symptoms worsen
  - Make Sure to call in advance if seeking medical care so sites can be prepared to receive the case.
- Use the Interview Tool.
  - The data you collect will help inform this outbreak and the epidemiology of this new pathogen. You may be the only person collecting data on this case’s risks, exposures, and clinical outcomes. We are relying on your investigation.
Use the Interview Tool to Guide You

- Page 1 Covers The Confirmed Case and their Clinical Symptoms, Complications, and possible source of exposure.

- We are trying to determine risk, severity of illness, and if there are certain affected populations.

THINK ABOUT THE CASE.
Use the Interview Tool to Guide You

- Page 2 helps describe what is considered “Close Contact” and helps you and the Case brainstorm different categories of interactions with people that might have led to exposures.

- We are trying to determine who should be notified. Where might this case have exposed others?

THINK ABOUT CONTACTS.
Use the Close Contact Identification Form to Make Notes on Individual Contacts

- This is just a tool to help you collect sufficient identifying information on Close Contacts (not a required form)

- Keep copies of this form (tracks 5 contacts per page).

You can add these named contacts to MAVEN.
When is isolation over?

• The **non-test-strategy*** is new and can be applied to anyone who does not work in [healthcare](#), who is not [hospitalized](#) and who is not [immunocompromised](#) (there is separate guidance for this group). It should be applied to people who test positive for [covid-19](#) **and** anyone who is clinically diagnosed with [covid-19](#) and not tested.

• **Symptomatic persons with covid-19** (lab-confirmed or clinically diagnosed) who are in home isolation may discontinue home isolation under the following conditions:
  • At least 3 days (72 hours) have passed since recovery (defined as resolution of fever without the use of fever-reducing medications **AND** improvement in respiratory symptoms – e.g., cough, shortness of breath) **AND**
  • At least seven days have passed since symptoms first appeared (illness onset). Onset date (of symptoms) would be considered “day zero.”

• Therefore, anyone with covid-19 should stay home for a minimum of seven days. They should only discontinue isolation if at least 72 hours have also passed since “recovery.”

*Guidance issued 3/16/2020*
When is isolation over?

- **Asymptomatic persons** with lab-confirmed covid-19 infection may discontinue home isolation when at least 7 days have passed since the date of their first positive covid-19 diagnostic test and they have had no subsequent illness.
MAVEN Updates & Answers to Your Questions

1. How do we document follow up on cases?
   - Use the Notes for overall follow-up and case management. Make sure individual questions in the different MAVEN packages are filled out with key data points.

2. Which MAVEN questions should I be filling out?
   - Try to complete as many MAVEN variables as possible. Data can only be analyzed if it is in the questions, not the notes. Use the interviewing tool to help guide you to different Question Packages for different variables.
MAVEN Updates & Answers to Your Questions

1. How do we document follow up on cases?
   - Use the Notes for overall follow-up and case management. Make sure individual questions in the different MAVEN packages are filled out with key data points.

2. When will I see test results?
   - Positive Labs will create new MAVEN events when MDPH receives them.
   - Positive or Negative Labs will append to an already existing suspect or contact event IF THE DATA IS AN EXACT MATCH.
     - This is why there could be some delays in matching lab results to existing events.
   - Negative Reports with NO MAVEN event matched will go into MAVEN as a COVID event with “Unclassified” as the status. These don’t appear in your workflows but you could SEARCH for the person if you need this information.
How do I conduct a contact tracing investigation?

• Ask the case to identify everyone they have had close contact with beginning with symptom onset
  • Inquire about air travel and high risk exposures
• **Close contact definition:** Being within 6 feet for 15 minutes or more
  • Medical settings may use a more conservative definition of “close contact.”
• They do not need to identify people they had contact with before symptom onset
• Collect name, phone number, address, and date of exposure.
  • Knowing TOWN helps to make sure the right LBOH can see the event and follow up.
What do I do about the contacts?

- Notify contacts they have been exposed to a confirmed case and need to enter quarantine for 14 days from day of exposure
- Send the contacts the *MDPH Quarantine letter*
- Actively monitor the contacts
  - Ideally daily check-ins (text message okay)
  - Check for symptoms and ensure they are quarantining
  - They should establish a plan for notifying their provider if they need medical assessment
- Input the contacts into MAVEN
  - Long List of Contacts – USE EXCEL.
    - Can utilize the contact tracing Excel spreadsheet and MDPH can upload into MAVEN
    - This will then create the Contact Events for you and other LBOHs – so be sure to add good notes in the Notes Field.
- Use the Contact Monitoring QP to keep track of monitoring status and temperature
- *Contacts will now appear in a new workflow! YAY!*
Quarantine FAQs

• If someone is in quarantine, is their family quarantined as well?
  • A. No. Their family members are not quarantined as long as the quarantined individual remains asymptomatic. If the quarantined individual develops symptoms, they must immediately isolate from their family and the family is now under quarantine from their last contact because they are close contacts.

• If someone in quarantine tests NEGATIVE, how long must they stay in quarantine?
  • A. They must stay in quarantine until the 14 day period has passed AND their symptoms have resolved.

• How long do household contacts have to quarantine?
  • A. Through 14 days after their LAST exposure to the case. If complete isolation isn’t possible for the case, then the 14 days starts when the confirmed case is finally cleared to exit isolation.
Sharing Cases

• If my case works in another town, what should I do?
  • SHARE the MAVEN event with the appropriate jurisdiction so you both can communicate on the follow-up.

• Who should I Share with?
  • Share with the full LBOH TOWN MAVEN users. It is easier than picking individual users.
  • Make sure your contact information is in the ADMIN QP so any other LBOHs can talk to you if needed.
FAQ

• What about the children of people in isolation?
  • Children should remain quarantined away from the case to prevent exposure
  • If this is not possible, then the quarantine period of child will restart every time the child is exposed to the case
• Do I need to notify the school of a case’s child?
  • If the child is asymptomatic last time in school, no notifications need to occur because there was no exposure
  • However, this child should begin quarantine ASAP
• What about the contacts of contacts?
  • You do not need to investigate the contacts of asymptomatic contacts
• What about contacts in another jurisdiction?
  • Will show up in the contact workflow for the town if the address is properly input
• What if a contact develops symptoms?
  • They would be eligible for testing and should isolate while awaiting results
• What if the test comes back negative?
  • If a person under quarantine tests negative, they still need to complete their quarantine in the event that COVID-19 infection occurs after the testing is done
Massachusetts Department of Public Health
Telephonic Interpreter Services
Available to Municipalities for Coronavirus Response
February 18, 2020

- Massachusetts has a contract (PRF63) for telephonic interpretation services.
- Eight vendors are shown on the next slide.
- Cities and towns should reach out to a vendor or vendors and set up an account with them, mentioning the state contract PRF63.
- Some vendors will bill DPH directly if they setup a group account for this purpose.
- When used for interpreters in response to coronavirus, monthly invoices from the vendors to cities and towns can be submitted to MDPH at the following e-mail address - sli.invoices@state.ma.us
- MDPH will pay the vendors directly for telephonic interpretation services utilized by municipalities for coronavirus follow-up through June 2020.
Massachusetts Department of Public Health Telephonic Interpreter Services
Available to Municipalities for Coronavirus Response February 18, 2020

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<td>Certified Languages International</td>
<td>Dickey McMath</td>
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<td>Shamus Sayed</td>
<td>858-866-1130</td>
<td><a href="mailto:shamus.sayed@iugroup.com">shamus.sayed@iugroup.com</a></td>
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<td>JRivera Associates, Inc.</td>
<td>Jose R. Rivera</td>
<td>209-405-0951</td>
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<tr>
<td>Language Line Services</td>
<td>Alisa Smith</td>
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<tr>
<td>Lionbridge Technologies, Inc.</td>
<td>John Drugan</td>
<td>978-964-9550</td>
<td><a href="mailto:John.Drugan@lionbridge.com">John.Drugan@lionbridge.com</a></td>
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<td>Telelanguage</td>
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<td><a href="mailto:mvilla@telelanguage.com">mvilla@telelanguage.com</a></td>
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<tr>
<td>TransPerfect Global</td>
<td>Michael Macrina</td>
<td>202-347-2300</td>
<td><a href="mailto:mmacrina@transperfect.com">mmacrina@transperfect.com</a></td>
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Contact us at:

• **MDPH Epidemiology Program**: 617-983-6800


• **How to Contact the Maven help desk in ISIS with questions**:
  - **MAVEN Help Desk** [isishelp@state.ma.us](mailto:isishelp@state.ma.us)
  - MAVEN Contact Telephone: 617-983-6801
MAVEN Questions

• What events in MAVEN can I see?
  • A. You can see all events in your jurisdiction, as well as events that have been shared with you. But not every event will be in your workflows. You may have to look for an event.
    • Use the SEARCH feature.
    • Pull up a case by MAVEN ID.
    • Look at SHARED cases (or share with yourself)
    • New Contact Events Workflow (Previously contact events weren’t in your workflows so you have to know to look for them.)
    • Look at Reports
MAVEN Questions

• What about MAVEN events with no lab results?
  • Sometimes events might not have an action item because they were created to document notes or consultations, and lab tests might be pending.
  • Check the notes for instructions or ask MDPH if unsure.
Lab Questions

• Do LBOHs see all lab tests done for COVID-19?
  • A. Not at this time. Positive lab tests will create MAVEN events (if there wasn’t one already) for new cases. Negative labs will only append to an existing MAVEN event.
    • So if “Joey” gets tested through a commercial lab and is negative, it does not currently create a MAVEN event.

• When will I see lab results on a MAVEN event?
  • Lab results will append to matching MAVEN events as soon as they are available. Check the Lab Tab.
    • Your town’s First Positive – you will receive a call.
    • Subsequent positives – you will receive a LBOH Group Task (via email) that will alert you to the positives.
    • New Cases should show up in your IMMEDIATE workflow.
Transmission of COVID-19

• **Mode of transmission:** Early reports suggest person-to-person transmission most commonly happens during close exposure to a person infected with COVID-19, primarily via respiratory droplets produced when the infected person coughs or sneezes.
  
  • Droplets can land in the mouths, noses, or eyes of people who are nearby or possibly be inhaled into the lungs of those within close proximity.
  
  • The contribution of small respirable particles, sometimes called aerosols or droplet nuclei, to close proximity transmission is currently uncertain. However, airborne transmission from person-to-person over long distances is unlikely.

https://www.cdc.gov/coronavirus/2019-nCoV/hcp/infection-control.html Updated March 10, 2020
What are the clinical features of COVID-19?

Mild symptoms to severe illness and death

- These symptoms may appear 2-14 days after exposure (based on the incubation period of MERS-CoV viruses).
- Fever
- Cough
- Shortness of breath
- Clinical Complications Include: Acute Respiratory Distress Syndrome (ARDS), Pneumonia, Septic Shock.
Incubation of COVID-19

• Existing literature regarding SARS-CoV-2 and other coronaviruses (e.g. MERS-CoV, SARS-CoV) suggest that the incubation period may range from 2–14 days.

• For the purposes of our work, **TWO WEEKS** is key.
Which body fluids can spread infection?

- Upper and Lower Respiratory Tract Specimens.
  - Coughing, sneezing, respiratory droplets.

- SARS-CoV has been isolated from respiratory, blood, urine, and stool specimens.

- It is not yet known whether other non-respiratory body fluids from an infected person including vomit, urine, breast milk, or semen can contain viable, infectious SARS-CoV-2.
Q: When is someone infectious?

- **The onset and duration of viral shedding and period of infectiousness for COVID-19 are not yet known.** It is possible that SARS-CoV-2 RNA may be detectable in the upper or lower respiratory tract for weeks after illness onset, similar to infection with MERS-CoV and SARS-CoV. However, detection of viral RNA does not necessarily mean that infectious virus is present.

- **Asymptomatic infection** with SARS-CoV-2 has been reported, but it is not yet known what role asymptomatic infection plays in transmission.

- **Infectious Prior to Symptoms?** Similarly, the role of pre-symptomatic transmission (infection detection during the incubation period prior to illness onset) is unknown. Existing literature regarding SARS-CoV-2 and other coronaviruses (e.g. MERS-CoV, SARS-CoV) suggest that the incubation period may range from 2–14 days.

Testing for COVID-19

- Nasopharyngeal Swab (NP swab) is the specimen of choice.

- Oropharyngeal Swabs were also being utilized earlier in the outbreak, but NP is now the standard.
Testing for COVID-19

- Nasopharyngeal Swab (NP swab) is the specimen of choice.
- PCR Testing – swab is utilized to detect virus DNA

FYI: As of 3/22/2020, there is NOT a blood test or a rapid test available in the field for COVID-19.
Can people who recover from COVID-19 be infected again?

• We don’t yet know the answer.

• The immune response to COVID-19 is not yet understood. Patients with MERS-CoV infection are unlikely to be re-infected shortly after they recover, but it is not yet known whether similar immune protection will be observed for patients with COVID-19.
Person Under Investigation (PUI)

• A Person Under Investigation for possible infection with COVID-19.
  • Early term in the outbreak related to patients who met investigation criteria (symptoms and epidemiological risk) and qualified for testing.
    • Typically referred to suspect cases waiting for testing results.
    • Lots of paperwork and data collection related to PUIs (PUI Forms, PUI Numbers, etc.)
    • Lots of CDC and public health resources still refer to PUIs.
  • With expanded testing opportunities, not every patient is investigated prior to testing, and fewer people receive comprehensive public health investigations prior to testing.
    • More Applicable Key Terms Today: Suspect Case, Confirmed Case, Contact, & Revoked.
What’s Needed in MAVEN for Contacts?

- At assignment, make sure your contact information is in the Admin QP.
  - Step 2 – Investigation Started = YES
  - Step 3 - Step 3 - LBOH/Agency Investigator:
    - Complete dropdown of your name and phone, etc.

- Enough Identifying Information to Contact Them.

- Contact Monitoring Question Package (QP#6)
  - Contact Monitoring Status
    - In Progress – we know you are monitoring this contact.
    - Left Blank – we wonder what’s going on
    - Completed – The quarantine is complete.
    - Transfer – needs to go to another jurisdiction (update the notes so we know).
  - Last Potential Exposure Date (helps establish quarantine period)
  - Last Day of Required Monitoring (14 days after exposure)
  - You can track daily temps, but this is not required.

- Once the 14 day quarantine/monitoring period is over and the contact is done, CRF Reviewed in the Admin Question Package will clear the contact from the CONTACT workflow.
  - Make sure all notes are updated.
  - Step 4 - Case Report Form Completed: Yes
  - Completed by: MDPH Epidemiologist.
  - Complete Assignment Task.
How do I put contacts in MAVEN?

**USE MAVEN TIP SHEET**

To create one MAVEN contact event at a time:
1. Open the MAVEN event you want to link the created contact to.
2. In the Basic Information section Click View next to Linked Events/Contacts.
3. Under Link Events choose Create Linked Event, the appropriate Link Type (Most will be “CONTACT”), and the Event.
4. Enter Demographic and Contact Information.
5. Click Save

To create MAVEN contacts events in bulk:
1. Open/Download and complete the attached Excel spreadsheet [Download]. Not all fields need to be completed, but please complete at least First Name, Last Name, Date of Birth, and City if possible. Please also make sure to include the event ID that you want the contacts linked to.
2. Attach the spreadsheet to the event you want to link the contacts to.
3. Email [ISIShelp@state.ma.us](mailto:ISIShelp@state.ma.us) with the event ID that the contact list is attached to.
How should I be utilizing MAVEN?

- Monitoring Task workflow to identify new Cases and Contacts
  - Tracking Contacts through their Quarantine Period.
  - Clinical QP and Contact Monitoring QP are key for available exposure info.
  - A summary of the person’s exposure (if available) would be populating the medical notes field in the clinical QP. Last exposure date should be in the Contact Monitoring QP for everyone (as long as everyone is creating contact events correctly).
- Sharing Events with other Jurisdictions
  - If your case or a contact works somewhere else, etc.
  - If you created a contact for another jurisdiction, you can share the index case that named the contact, etc.
- Monitoring New Positive Cases (Confirmed events)
  - Enter your interview data so we can track this outbreak and its effects.
  - Creating their new contacts to ensure quarantine.
Closing Confirmed Cases in MAVEN

- At assignment, make sure your contact information is in the Admin QP.
  - Step 2 – Investigation Started = YES
  - Step 3 - Step 3 - LBOH/Agency Investigator:
    - Complete dropdown of your name and phone, etc.
- As Confirmed Case is released from Isolation (per clinical criteria)
  - Make sure all notes are updated.
  - **Contact Monitoring QP 6**: Contact monitoring status: COMPLETED
  - Step 4 - Case Report Form Completed: Yes
  - Completed by: MDPH Epidemiologist.
  - Complete Assignment Task.
Managing Contact Events

- Prioritize household members/Close Contacts
  - Should be quarantining away from the case to prevent recurring exposure
- Partner with the Index Case to help in notifications.
- Prioritize high risk settings/settings of interest.
  - Follow-up LTCFs, nursing homes, doctors offices, and schools
- If you identify a setting where numerous exposures took place (i.e. work, conference, camp) then notify the organization
  - They should be able to send out a general notification so that you don’t have to contact all individuals
  - Large Gatherings: Remember most people would be considered at low risk and DPH/CDC have only rarely recommended public notifications in a setting like this
Managing Contact Events

- Try to get the events into MAVEN
- Try to check-in daily but less frequently is acceptable.
  - Once you establish contact and inform them of quarantine guidelines, they can text you to touch base.

Interviewing Tool Will Help
When is isolation over?

• Initial Guidance from CDC required two negative tests:
  • The **test-based strategy** is largely unchanged (two negative swabs at least 24 hours apart, resolution of fever without the use of fever-reducing medications, and improvement in respiratory symptoms).
  • Still an option (but not the best use of resources).
Who Can Get Tested for COVID-19?

- March 13, 2020, MDPH published clinical advisory with expanded testing guidance outlining additional categories for testing.
- Recommends specimens be submitted to the State Lab or commercial lab based upon different criteria.
- Public Health Pre-Approval for testing is **NO LONGER REQUIRED**.

FYI: EXPECT an update to this guidance document soon, too.
Background on Follow-Up

- February: Returning travelers (beginning with China) were identified for quarantine.
  - MDPH received CDC lists and created contact events for 14 Day quarantine period & monitoring.
- 1/25/2020: First Confirmed Case in MA (Travel related)
- End of February/Early March – follow-up volume expanded to include positive cases identified here in MA and their contacts.
- As of 3/17/2020: Returning travelers are still asked to quarantine for 14 days. CDC is still sending some lists (and we create MAVEN contact events when available).
- CDC also sends some notifications for Contacts (from planes, Index Cases in other states, etc.)