



Case Monitoring and Contact Tracing

When an individual tests positive for COVID-19, those results are reported to the Massachusetts Department of Public Health (MDPH). MDPH reports the results to the local health department in the city or town where the individual resides. If the individual lives in Boston, the results will be sent to the Infectious Disease Bureau (IDB) at the Boston Public Health Commission (BPHC). IDB will assign a public health professional to perform contact tracing and monitor the individual's symptoms.

What type of information is collected during case monitoring?

The public health professional will verify the case's address, gather clinical information and identify contacts. The case will be given information about COVID-19 and about home isolation. Isolation is a term for restrictions used to reduce the risk of spreading the virus to others. Additionally, the case will be asked to continue to monitor their symptoms and have a plan for getting care if symptoms worsen, including how to contact BPHC. The public health professional will need to check in with the case to release them from isolation when it is safe to do so.

What is contact tracing and why is it important?

People in close contact with someone who is infected with COVID-19 are at higher risk of getting infected themselves and infecting others. Close contacts are defined as someone who was within 6 feet of a case for at least 10-15 minutes, while they had symptoms or within the 48 hours before symptoms started. Contacts are monitored after exposure to an infected person in case they become infected. If contacts become infected, BPHC will help the contacts to get care and treatment and will prevent further spread of the virus. This monitoring is called contact tracing and follow-up, which can be broken down into three basic steps:

- **Contact identification:** Cases are asked about their activities and the activities and the roles of people around them when they were infectious. This helps identify contacts. Contacts can be anyone who has been in close contact with an infected person: family members, work colleagues, friends, or health care providers.
- **Contact listing:** All persons considered to have close contact with the infected person are listed as contacts. Efforts are made to identify every contact and to inform them that they have been in contact with a case and are at risk for infection. Close contacts are asked to quarantine themselves for 14 days after the last day they were in contact with the case and to monitor for symptoms. Quarantine is a term used for restrictions placed on someone who has been exposed to infection who may become infected, sick, and infectious, putting others at risk. Contacts should be tested for COVID-19 and are given information about preventing spread.
- **Contact follow-up:** Close contacts are called and given quarantine information and information about the need to check in once the quarantine period is over.
 - Contacts must monitor their health and should have a plan for seeking care if they develop symptoms, including calling BPHC.
 - Contacts also should be tested for COVID-19. Contacts will be given information about when and how to do so.

When can confirmed cases be released from isolation?

Confirmed cases of COVID-19 must remain under home isolation until they are no longer able to spread the infection. Cases can be released from isolation either through a test-based strategy or a non-test-based strategy.

1. *Test-based strategy.*

Except for certain situations, a test-based strategy is no longer recommended because, in the majority of cases, it results in excluding some people who continue to shed detectable SARS-CoV-2 RNA but are no longer infectious.

- No fever without the use of fever-reducing medications **and**
- Improvement in symptoms (e.g., cough, shortness of breath), **and**
- Two negative COVID-19 test results.
- A test-based strategy should be considered for individuals who are immunocompromised in consultation with local infectious diseases experts.

2. *Non-test-based strategy for general public*

- At least 24 hours *since resolution of fever* without the use of fever-reducing medications **and**
- Improvement in symptoms (e.g., cough, shortness of breath); **and**,
- At least 10 days have passed *since symptoms first appeared*.

3. *Non-test-based strategy for individuals with severe to critical illness or who are immunocompromised, including health care personnel*

- At least 24 hours have passed *since resolution of fever* without the use of fever-reducing medications **and**
- Symptoms (e.g., cough, shortness of breath) have improved **and**
- At least 20 days have passed *since symptoms first appeared*.

Health care personnel who are **severely immunocompromised**, but do not have symptoms may return to work when at least 20 days have passed since the date of their first positive test.

Persons with laboratory-confirmed COVID-19 who had no symptoms may discontinue isolation when at least 10 days have passed since the date of their first positive COVID-19 test and if they remained with no symptoms.

Does BPHC provide a letter to confirm that a case has been released from isolation?

Yes. If BPHC was monitoring the case, once the case is released from isolation, a public health nurse can provide a letter upon request that confirms that their isolation requirement is over and that there are now no public health restrictions on the case.

Can other medical professionals release a case from isolation?

Only the local board of health can release a person from isolation. Medical professionals should work closely with their local health department if they have questions about their patient's isolation status.

Does BPHC release cases to return to work?

BPHC does not provide letters for cases to return to work. Cases must speak with their employer to determine if they are able to go back to work.

No one from BPHC or my local board of health has contacted me. Why not?

As soon MDPH informs the local health departments of cases, the local health department tries to contact each case, but this may take time. If you have tested positive or were diagnosed with COVID-19, and more than two days have passed, you should contact the health department. The local health department may have had difficulty contacting you or may not have your correct contact information.

