

Coronavirus Disease 2019 (COVID-19)



Public Health Guidance for Community-Related Exposure

Updated Nov. 16, 2020

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COVID-19 Partner Call: Vaccination Planning – What You Should Know

Dr. Brooks shared updates on CDC's COVID-19 response, including the latest scientific information and what everyone should know about protecting themselves and others. In addition, Dr. Messonnier reviewed CDC COVID-19 Vaccination Planning and shared What You Should Know.

Summary of Changes

On November 16, 2020

- Updated language to clarify what precautions exposed healthcare personnel should take when in the community setting.

On October 21, 2020

- Added links to the updated close contact definition.
- Updated language to align with updated definition.

On June 4, 2020

- Added exposure to people with confirmed COVID-19 who have not had any symptoms to this Guidance.

The following guidance is provided for definitions and management of contacts of people with COVID-19. Separate guidance is available for [international travelers](#). Healthcare personnel (HCP) should follow CDC's [Interim U.S. Guidance for Risk Assessment and Work Restrictions for Healthcare Personnel with Potential Exposure to COVID-19](#) regarding work restrictions if they have potential exposure to people with COVID-19. HCPs who are [excluded from work due to an exposure](#) should stay away from others in the community setting per this community guidance. While some HCPs might [continue to work in the healthcare setting](#) after an exposure, these individuals should stay away from others when in the community setting per this community guidance. See also CDC's guidance for [Implementing Safety Practices for Critical Infrastructure Workers Who May Have Had Exposure to a Person with Suspected or Confirmed COVID-19](#). Individuals should always follow guidance of the state and local authorities.

Public health recommendations have been updated to accommodate new scientific evidence, evolving epidemiology, and the need to simplify risk assessment. New recommendations are based on:

- Growing evidence of transmission risk from infected people without symptoms (asymptomatic) or before the onset of recognized symptoms (presymptomatic);
- Increased community transmission in many parts of the country;
- A need to communicate effectively to the general public;
- Continued focus on reducing transmission through social distancing and other [personal prevention strategies](#).

Current guidance based on community exposure, for people exposed to people with known or suspected COVID-19 or possible COVID-19

Individual who has had close contact (within 6 feet for a total of 15 minutes or more)

Exposure to

- Person with COVID-19 who has [symptoms](#) (in the period from 2 days before symptom onset until they meet criteria for [discontinuing home isolation](#); can be laboratory-confirmed or a clinically compatible illness)
- Person who has tested positive for COVID-19 (laboratory confirmed) but has not had any [symptoms](#) (in the 2 days before the date of specimen collection until they meet criteria for [discontinuing home isolation](#)).

Note: This is irrespective of whether the person with COVID-19 or the contact was wearing a mask or whether the contact was wearing respiratory personal protective equipment (PPE)

Recommended Precautions for the Public

- Stay home until 14 days after last exposure and maintain social distance (at least 6 feet) from others at all times
- Self-monitor for symptoms
 - Check temperature twice a day
 - Watch for fever ^[1], cough, or shortness of breath, or other [symptoms](#) of COVID-19
- Avoid contact with [people at higher risk for severe illness](#) from COVID-19
- Follow [CDC guidance](#) if symptoms develop

All U.S. residents, other than those with a known risk exposure


Exposure to

- Possible unrecognized COVID-19 exposures in U.S. communities

Recommended Precautions for the Public

- [Practice social distancing](#) and other [personal prevention strategies](#)
- Be alert for symptoms
 - Watch for fever ^[1], cough, or shortness of breath, or other [symptoms](#) of COVID-19
 - Check temperature if symptoms develop
- Follow [CDC guidance](#) if symptoms develop

¹ For the purpose of this guidance, fever is defined as subjective fever (feeling feverish) or a measured temperature of 100.4°F (38°C) or higher. Note that fever may be intermittent or may not be present in some people, such as those who are elderly, immunocompromised, or taking certain fever-reducing medications (e.g., nonsteroidal anti-inflammatory drugs [NSAIDs]).

Integration of these definitions and actions into communications and actions of public health authorities can be guided by CDC's "[Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission](#)  [PDF – 62 pages]".

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Content source: [National Center for Immunization and Respiratory Diseases \(NCIRD\), Division of Viral Diseases](#)