

STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

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Updated COVID-19 Guidance for Healthcare Providers (MDs, APRNs, PAs, & RNs) – February 12, 2021 Quarantine Post-Vaccination and Maximizing Fit for Medical Procedure Masks

On February 10, 2021, the Centers for Disease Control and Prevention (CDC) provided important updates to recommended public health measures in response to COVID-19. These updates include guidance for the general public and caveats for healthcare personnel.

This memo summarizes some of the important updates as they pertain to healthcare personnel (HCP).¹ The referenced CDC guidance are subject to change as we learn more about vaccine efficacy and effective infection control measures.

Quarantine Post-Vaccination

CDC's public health recommendations for vaccinated persons² now allows fully vaccinated individuals not in healthcare settings to waive quarantine after an exposure to someone with suspected or confirmed COVID-19. **At this time, the quarantine waiver only pertains in the timeframe between 2–12 weeks post-vaccination for asymptomatic individuals.**

Fully-vaccinated individuals should still watch for symptoms of COVID-19 for 14 days following an exposure and continue to wear a mask for source control, stay at least 6 feet away from others, avoid crowds and poorly ventilated spaces, cover coughs and sneezes, wash hands often, follow CDC travel guidance, and follow workplace guidance, including PPE use and/or SARS-CoV-2 testing guidance.

It is important to note that there are exceptions to the above guidance for vaccinated HCP, patients, and residents in healthcare settings, including long-term care. While HCP may waive quarantine outside of work, guidance for work restrictions for HCP with potential exposure to COVID-19 has not changed at this time.³ Fully vaccinated HCP should not work in healthcare settings for 14 days after a high-risk exposure unless they must work to mitigate staffing shortages as part of a contingency capacity staffing plan. HCP unable to

¹ CDC. Healthcare Personnel (HCP) definition: https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html#anchor_1604360694408

² CDC. Public health recommendations for vaccinated persons: <https://www.cdc.gov/vaccines/covid-19/info-by-product/clinical-considerations.html#phrecs>

³ CDC. Interim U.S. Guidance for Risk Assessment and Work Restrictions for Healthcare Personnel with Potential Exposure to COVID-19: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>



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quarantine should consider not working with patients who are immunocompromised. Patients and residents in healthcare settings, both inpatient and outpatient, should continue to be cared for using appropriate Transmission-Based Precautions.⁴

These exceptions are due to uncertainty of the risk of SARS-CoV-2 transmission from vaccination individuals, unknown vaccine effectiveness in patients seeking care, the need for close contact in healthcare delivery, and the higher risk of severe disease and death among patients and residents in healthcare settings.

Maximizing Fit for Medical Procedure Masks

CDC now recommends *well-fitting* source control, and has provided strategies for the general public to maximize the fit and filtration of masks to improve source control and protection.⁵

Universal source control options in healthcare settings include:⁶

- N95 respirators or equivalent or higher-level respirators, as part of an OSHA-compliant Respiratory Protection Program⁷
- A respirator approved under standards used in other countries that are similar to NIOSH-approved N95 filtering facepiece respirators⁸
- A well-fitting facemask (e.g., with a nose wire to help conform to the face; with ties rather than ear loops; use of a mask fitter; tying ear loops and tucking in side pleats; fastening ear loops behind the head; use of a cloth mask over the facemask to help conform to the face)⁹

Wearing two disposable medical procedure masks is *not* advisable, as disposable masks are not designed to fit tightly and wearing more than one will not improve fit. Also, only one KN95 mask should be used at a time, and do not combine KN95 masks with any other masks.

Reminder: Additional Respiratory and Eye Protection in Areas with Moderate to Substantial Community Transmission⁶

As HCP are more likely to encounter asymptomatic and pre-symptomatic patients with COVID-19, N95 respirators or equivalent or higher-level respirators are recommended for all aerosol-generating procedures and surgical procedures involving the respiratory tract.¹⁰

In addition, CDC recommends eye protection during all patient care encounters to ensure protection from exposure to respiratory secretions. HCP wearing eye protection do not need to quarantine after exposure to someone with COVID-19 who was not wearing a cloth face covering or facemask for source control.³

⁴ CDC. Recommended infection prevention and control (IPC) practices when caring for a patient with suspected or confirmed SARS-CoV-2 infection: https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html#anchor_1604360721943

⁵ CDC. Improve the Fit and Filtration of Your Mask to Reduce the Spread of COVID-19: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/mask-fit-and-filtration.html>

⁶ CDC. Interim Infection Prevention and Control Recommendations for Healthcare Personnel During the COVID-19 Pandemic: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control-recommendations.html#useppe>

⁷ OSHA. Respiratory Protection: <https://www.osha.gov/respiratory-protection>

⁸ CDC. NPPTL Respirator Assessments to Support the COVID-19 Response: <https://www.cdc.gov/niosh/npptl/respirators/testing/NonNIOSHresults.html>

⁹ CDC. Improve How Your Mask Protects You: <https://www.cdc.gov/coronavirus/2019-ncov/your-health/effective-masks.html>

¹⁰ CDC. Clinical Questions about COVID-19: Questions and Answers: "Which procedures are considered aerosol generating procedures in healthcare settings?" <https://www.cdc.gov/coronavirus/2019-ncov/hcp/faq.html#Infection-Control>