

## **Guidelines for Baseline Assessment and Criteria for Discharge and Ending Isolation of Patients with Confirmed COVID-19**

In the context of widespread community transmission of the SARS-CoV-2 virus and increased demand for hospital beds and resources to manage patients with moderate and severe symptoms of COVID-19, it is important that criteria for assessment and discharge/de-isolation of patients with no symptoms or mild symptoms be revised. The revised criteria are consistent with recent studies indicating that viral shedding and infectivity in patients with COVID-19 normally starts 1 to 2 days before onset of symptoms and remains up to 8 days in mild disease. These recommendations are also consistent with international guidance from the Center for Disease Control, the European Center for Disease Control and Public Health England. The recommendations are guidelines for all healthcare providers and should be applied in the context of the clinical judgement of physicians in the field.

In patients with confirmed COVID-19 who are **asymptomatic or mildly symptomatic without fever and have no chronic co-morbid conditions**, the following guidance applies:

1. Baseline assessment is focused on confirming absence of symptoms, especially respiratory symptoms, and documenting the patient's temperature. No routine laboratory work or imaging is required.
2. No hospital admission is indicated for asymptomatic patients with COVID-19, and patients should be referred to institutional non-hospital isolation facilities or, if appropriate, home isolation once approved and implemented by authorities. In the case of home isolation, the patient is advised to self-monitor for symptoms or fever and report back to a healthcare facility if they develop either.
3. No specific treatment is indicated.
4. For patients admitted to a hospital facility for other reasons, they can be discharged after two negative PCR tests for COVID-19 performed 24 hours apart after a minimum of 7 days in the hospital.
5. Upon discharge, no additional institutional or home isolation/quarantine will be required. Patients will be required to adhere to general precautionary measures in the community including social distancing and wearing masks when indicated.
6. For patients admitted to an institutional isolation facility, please refer to de-isolation guidelines for institutional facilities.

In patients with **mild symptoms and/or fever with chronic co-morbid conditions**, consider baseline investigations including complete blood count, serum creatinine, and a chest x-ray. If the chest x-ray is clear, the above guidance for asymptomatic and mildly symptomatic patients with no fever applies.

If chest x-ray findings are consistent with pneumonia, patient should be admitted to an appropriate hospital facility. In-hospital treatment should follow current national treatment guidelines. Patients can be discharged from the hospital after:

- a. clinical improvement
- b. resolution of fever in the absence of antipyretics for 3 days, and
- c. two negative PCR tests for COVID-19 performed 24 hours apart
- d. a minimum of 7 days from onset of symptoms

The discharging facility should arrange for post-discharge follow up, telephonically or in person, with follow up chest x-ray other diagnostic testing as indicated. Upon discharge, no additional institutional or home isolation/quarantine will be required. Patients will be required to adhere to general precautionary measures in the community including social distancing and wearing masks when indicated.

In patients with confirmed COVID-19 and **moderate or severe symptoms**, the following guidance is recommended:

1. Admission to an appropriate hospital facility
2. Baseline laboratory, imaging assessment, and treatment per national guidelines
3. Patients can be discharged from the hospital after:
  - a. clinical improvement
  - b. resolution of fever in the absence of antipyretics for 3 days, and
  - c. two negative PCR tests for COVID-19 performed 24 hours apart
  - d. a minimum of 14 days from onset of symptoms

The discharging facility should arrange for post-discharge follow up, telephonically or in person, with follow up chest x-ray and other diagnostic testing as indicated. Upon discharge, no additional institutional or home isolation/quarantine will be required. Patients will be required to adhere to general precautionary measures in the community including social distancing and wearing masks when indicated.