



*In this document Patient refers to patient/resident/client

This guidance is intended to assist with the **assessment of risk** and consequent decisions on healthcare management for all **patients** within a healthcare setting that may have had prolonged (>15 minutes cumulative), close (within 2 metres) contact with a COVID **positive case** (e.g., health care workers (HCW), other patients, visitors).

If a patient had prolonged (>15 minutes cumulative) contact with a case, but was not within 2 metres (excluding patients who share a room), they would be considered a **non-close contact**.

Transient interactions, such as walking by someone with COVID-19 or being briefly in the same room, are not considered a contact.

Case (symptomatic ^{1,2})	Patient	Risk
Masked	Masked	No risk
Unmasked	Masked	Low risk
Masked	Unmasked	Low risk
Unmasked	Unmasked	High Risk
Case (asymptomatic)	Patient	
Masked	Masked	No risk
Unmasked	Masked	Low Risk
Masked	Unmasked	Low risk
Unmasked	Unmasked	High Risk

¹As listed in the [screening tools](#)

²For the 48 hours prior to symptom onset, default to the section marked asymptomatic case.

Mask = medical grade mask only. For purposes of this risk classification, anything other than a medical grade mask would be deemed as “unmasked”

Patient Management measures based on Risk Assessment:

No Risk: not a contact	Low: Non-close contact	High: Close contact
No further follow-up necessary	<ul style="list-style-type: none"> Monitor for 14 days If patient develops symptoms, place on Droplet/Contact Plus precautions and test if symptoms develop 	<ul style="list-style-type: none"> <u>Inpatient/Resident</u>: Place on Droplet/Contact Plus precautions for 14 days from last exposure to the case and test if symptoms develop <u>Outpatient (includes home care clients)</u>: Self isolation for 14 days from last day of exposure to the case. Refer to Public Health for follow up and testing. Place on Droplet/Contact Plus precautions for any subsequent health care visits during that timeframe



NOTE: The risk level for exposures can be elevated if:

- Other infection control practices were not met (i.e., hand hygiene – 4 moments)
- Patient had direct contact with the infectious body fluids of a case (e.g., shared eating utensils with case or was coughed/sneezed on when case wasn't masked)
- There was exposure to an environment where an AGMP was performed before particular settle time complete (up to 2 hours following the AGMP) without an N95
- There was a breach in PPE (i.e. N95 becomes unsealed, eye protection becomes dislodged)
- There was inconsistent use of mask by case

Examples of prolonged close contact:

- Patient is a roommate of a case
- Patient received care from a case who was symptomatic and was not masked (and up to 48 hours prior to onset of symptoms)
- Patient dined or otherwise interacted socially with a case (if 2 metres distance could not be consistently and reliably maintained)
- Patient shared a space (e.g., ER, waiting room area, activity room) with a positive case and was less than 2 metres away