If someone thinks they might have COVID-19 in your community -

**Confirmed COVID-19 Exposure**

**Unconfirmed**

**COVID-19 Exposure**

1. Quarantine **AND**

2. Monitor symptoms for 14 days from exposure

Symptoms: Fever, Cough, or Trouble Breathing

Each day monitor for: Any symptoms?

**Symptomatic-High Risk**

**Asymptomatic**

1. Isolate for at least **14 days from**

 **symptom onset** and

2. Obtain COVID-19 testing

Have 14 days passed since exposure?

**NO**

**Quarantine**

**COVID-19**

**Negative**

**COVID-19**

**Positive**

**Return to Work**

**YES**

IF: 14+ days past exposure

Have 7 days

passed from

symptom onset?

Have symptoms resolved for **AT LEAST 24** hours

(No fever without fever-reducing medications)

**If NEW symptoms arise during 14-day monitoring, return to isolation AND re-test for COVID-19**

**Return to Work**

**YES**

**NO**

IF: (1) 14+ day past exposure AND

 (2) 24+ hours symptom free

**Isolation**

**YES**

Has fever resolved for **AT LEAST 72** hours?

(No fever without fever-reducing medications)

**NO**

**Isolation**

**NO**

**Symptoms include:**

• Fever > 100.4 F

• Respiratory symptoms

**Isolation**

**YES**

**Return to Work**

IF: (1) 14+ days past illness onset AND

 (2) Fever resolved for 72+ hours AND

 (3) All symptoms resolved