Statement on Return to Work or School

TMA COVID-19 Task Force

AUG. 18, 2020

The Texas Medical Association COVID-19 Task Force supports not requiring a negative test result or a physician’s note for individuals to return to work or school who had mild to moderate illness and who self-isolated at home. This is based on recommendations by the Centers for Disease Control and Prevention (CDC).

Per the CDC interim guidance on Discontinuation of Isolation for Persons with COVID-19 Not in Healthcare Settings (07/20/2020):

A test-based strategy is no longer recommended to determine when to discontinue home isolation of a COVID-positive patient, except in specific circumstances. Some tests can yield false negatives if taken too soon, or alternatively, false positives can occur when individuals with confirmed COVID-19 continue to test positive even after the infectious period has passed. Also, during periods of high disease transmission, testing facilities may be experiencing higher than usual volumes, resulting in strained capacity, limited availability, and higher wait times both to get tested and to receive results.

Specific circumstances for using a test-based strategy are:

- For people who are severely immunocompromised,¹ in consultation with infectious disease experts, or
- To discontinue isolation or other precautions earlier than would occur under the symptom-based strategy.

If conducting a test-based strategy, discontinuation of isolation requires two consecutive negative U.S. Food and Drug Administration-emergency-use-authorized RT-PCR test results from respiratory specimens collected ≥ 24 hours apart. For more information, see Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons for Coronavirus Disease 2019 (COVID-19).

Individuals with COVID-19 who have symptoms and were directed to care for themselves at home may discontinue isolation under the following conditions:

- At least 10 days² have passed since symptom onset, and
- At least 24 hours have passed since resolution of fever without the use of fever-reducing medications, and
- Other symptoms have improved.

This is due to accumulating evidence that supports ending isolation and precautions for people with COVID-19 using a symptom-based strategy. Specifically, researchers have reported that people with mild to moderate COVID-19 remain infectious no longer than 10 days after their symptoms began, and those with more severe illness or those who are severely immunocompromised remain infectious no longer than 20 days after their symptoms began.

¹ For the purposes of this guidance, CDC used the following definition for “severely immunocompromised”:
- Some conditions, such as being on chemotherapy for cancer, untreated HIV infection with CD4 T lymphocyte count < 200, combined primary immunodeficiency disorder, and receipt of prednisone > 20mg/day for more than 14 days, may cause a higher degree of immunocompromise and inform decisions regarding the duration of isolation.
- Other factors, such as advanced age, diabetes mellitus, or end-stage renal disease, may pose a much lower degree of immunocompromise and not clearly affect decisions about duration of isolation.
- Ultimately, the degree of immunocompromise for the patient is determined by the treating provider, and preventive actions are tailored to each individual and situation.

² A limited number of individuals with severe illness may produce replication-competent virus beyond 10 days that may warrant extending duration of isolation for up to 20 days after symptom onset. Consider consultation with infection control experts. See Discontinuation of Transmission-Based Precautions and Disposition of Patients with COVID-19 in Healthcare Settings (Interim Guidance).
Individuals infected with SARS-CoV-2 who never develop COVID-19 symptoms may discontinue isolation and other precautions 10 days after the date of their first positive RT-PCR test for SARS-CoV-2 RNA.

Also, per CDC’s Interim Guidance for Businesses and Employers Responding to COVID-19 (05/06/2020):

Employers should not require a COVID-19 test result or a health care provider’s note for employees who are sick to validate their illness, qualify for sick leave, or to return to work.

Further, per the CDC’s Screening K-12 Students for Symptoms of COVID-19: Limitations and Considerations (07/23/2020):

A negative test or doctor’s note should not be required for return [to school].