



Date: June 30, 2021

COVID-19 Isolation and Quarantine

Individuals within Oregon who have been determined to be a presumptive or confirmed COVID-19 case, or a close contact, by their health care provider, or state or local public health officials must follow these quarantine and isolation requirements.

Failure to comply with this guidance could result in the state or local public health authority issuing an emergency isolation or quarantine order, or seeking a court order for isolation or quarantine under ORS 433.121 to 433.140.

Definitions: For purposes of this guidance, the following definitions apply:

- “Close Contact” means a susceptible individual who has had a substantial exposure to a confirmed COVID-19 case or a presumptive COVID-19 case.
- “Confirmed COVID-19 case” means an individual who has tested positive for COVID-19 by a nucleic acid amplification test or an antigen test, or another method considered reliable by a state or local public health authority.
- “Isolation” or “isolate” means the physical separation and confinement of an individual who is infected or reasonably believed to be infected with a communicable disease from non-isolated individuals to prevent or limit the transmission of the disease to non-isolated individuals.
- “Local public health administrator” has the meaning given that term in ORS 431.003.
- “Presumptive COVID-19 case” means a susceptible individual who has symptoms consistent with COVID-19 and who had close contact to a confirmed COVID-19 case 2 to 14 days before symptom onset.
- “Quarantine” means the physical separation and confinement of a susceptible individual who has had a substantial exposure to a communicable disease and who does not show signs or symptoms of that communicable disease, from individuals who have not been exposed to a communicable disease, to prevent or limit the transmission of the disease to other persons.
- “State health officer” is the Public Health Officer appointed under ORS 431.045.
- “Susceptible individual” means an individual who:
 - Has not had a confirmed case of COVID-19 in the previous 90 days; or

- Has not completed a series of COVID-19 vaccination as recommended by the federal Advisory Committee on Immunization Practices at least 14 days previously; or
- Is a resident or patient in any of the following settings:
 - ◆ Long-term care facilities
 - ◆ Adult foster homes
 - ◆ Residential healthcare settings (e.g., behavioral health residential treatment facilities, group homes for people with intellectual or developmental disabilities)
 - ◆ Inpatient healthcare settings (e.g., hospitals, inpatient hospice)
 - ◆ Corrections facilities (e.g., jails and prisons)
- “Substantial exposure” means having been:
 - Within six (6) feet of a confirmed COVID-19 case or presumptive COVID-19 case for 15 minutes or more within one day.
 - In contact with the infectious secretions or clinical specimens of a confirmed COVID-19 case or presumptive COVID-19 case.

Confirmed COVID-19 cases and presumptive COVID-19 cases are required to:

- Isolate for at least 10 days after illness onset and until 24 hours after fever is gone, without use of antipyretics, and COVID-19 symptoms (cough, shortness of breath, and diarrhea) are improving.
- Isolate for at least 10 days after the collection date of the specimen that tested positive if asymptomatic or only with symptoms other than fever, cough, shortness of breath and diarrhea.
- Isolate for at least 20 days if suffering from severe to critical illness related to COVID-19, if hospitalized for COVID-19, or if the individual has a severely compromised immune system.
- Stay in close communication with local or state public health authorities and cooperate with public health recommendations.

Close contacts are required to:

- Quarantine by staying home and at least six (6) feet away from everyone, including household members.
- A 14-day quarantine is the safest option to prevent the spread of COVID-19 to others.

- If the local public health administrator or designee recommends a shortened quarantine period that balances the risk of disease spread with the impacts on individuals from a longer quarantine, individuals may end quarantine:
 - 10 days after their last exposure to a person with COVID-19 if they remain asymptomatic

or

 - After 7 days, with a negative test result by an antigen or nucleic acid amplification test (NAAT) collected within 48 hours before ending quarantine in individuals who remain asymptomatic.
- There is a small but significant chance that a shortened quarantine period may result in post-quarantine transmission. Therefore, it is critical that close contacts continue to monitor themselves for symptoms daily for a full 14 days after their last exposure to a person with COVID-19. If symptoms develop, the individual should return to quarantine, notify their local public health authority, and call their healthcare provider to discuss testing.

Note:

Shortened quarantine is not an option for residents or patients in these settings:

- ◆ Long-term care facilities
 - ◆ Adult foster homes
 - ◆ Residential healthcare settings (e.g., behavioral health residential treatment facilities, group homes for people with intellectual or developmental disabilities)
 - ◆ Inpatient healthcare settings (e.g., hospitals, inpatient hospice)
 - ◆ Corrections facilities (e.g., jails and prisons)
- Monitor for symptoms daily.
 - Isolate according to this guidance upon becoming a confirmed or presumptive COVID-19 case during quarantine.
 - Stay in close communication with local or state public health authorities and cooperate with public health recommendations.

Individuals should, but are not required to:

- Quarantine or isolate if tribal, state or local public health authorities determine, based on a review of the specific facts, that such action is necessary to protect the public's health, even though the individual does not meet the definition of a close contact or presumptive or confirmed COVID-19 case.

Exemption from quarantine requirements to return to work

For individuals, except for health care workers, who meet the definition of a close contact **and are asymptomatic**, quarantine restrictions may be lifted in order for the individual to return to work if all the following requirements are met:

- The state health officer or designee, or the local public health administrator or designee, has determined that the individual's work is an essential service and there is a shortage of staff; ¹
- The individual's workplace provides adequate protections against disease transmission to others at the workplace;
- The individual's employer is aware of the individual's quarantine status and is willing to have the individual return to work;
- The individual agrees to wear a medical grade or N95 mask while at work and maintains at least six (6) feet of distance from others at all times; and
- Oregon's Occupational Health and Safety rules do not prohibit the individual's return to work.

An exemption from this quarantine guidance must be in writing and the individual must still observe the quarantine requirements when not at work.

Healthcare workers return to work

A decision by a state or local public health official to permit a healthcare worker that is a confirmed or presumptive COVID-19 case or a close contact to return to work during the period of quarantine or isolation will be governed by the Oregon Health Authority's Investigative Guidelines.

Additional Resources

- [Know the facts about COVID-19](#)
- [COVID-19 resources for communities](#) which includes resources for workers, employers, people with disabilities, and other communities.

Document accessibility: For individuals with disabilities or individuals who speak a language other than English, OHA can provide information in alternate formats such as translations, large print, or braille. Contact the Health Information Center at 1-971-673-2411, 711 TTY or COVID19.LanguageAccess@dhsosha.state.or.us

¹ A determination of what is an essential service would be made in coordination with state and local authorities with regulatory oversight of that sector.