

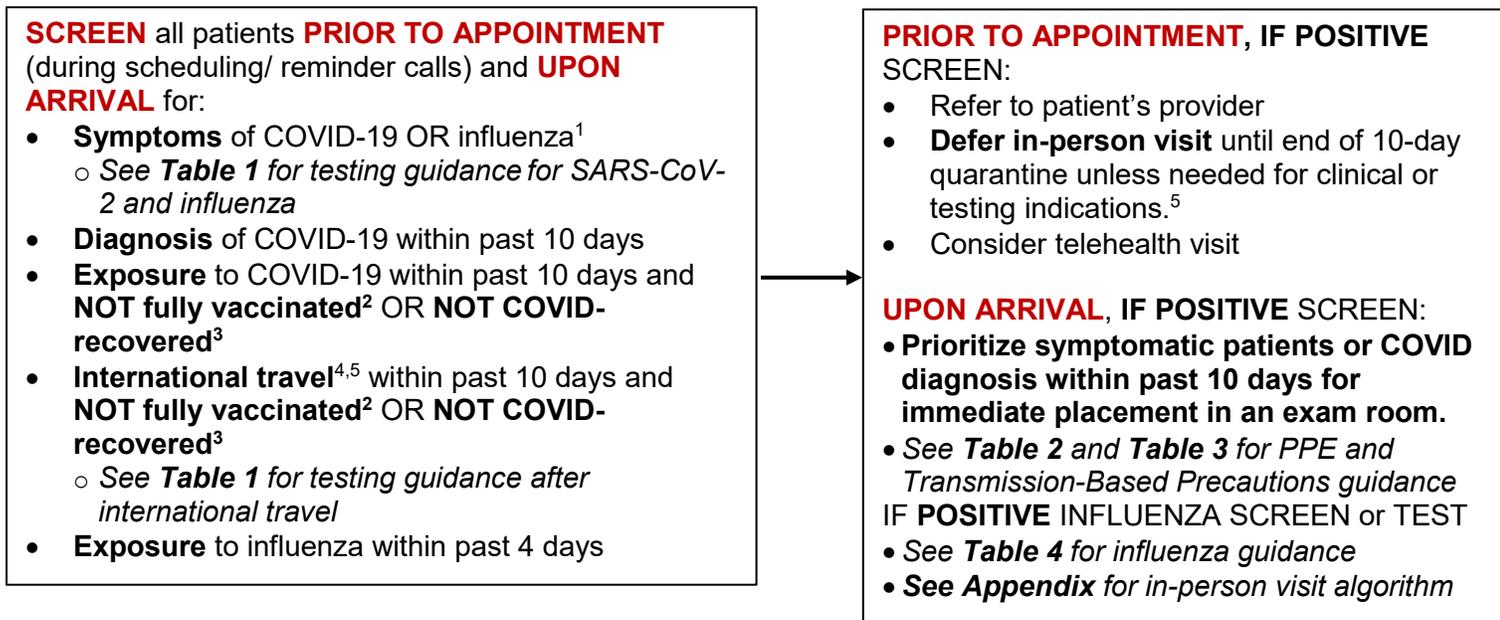
**Interim Guidance for Ambulatory Settings:  
 COVID-19 and INFLUENZA Screening, Testing, PPE and Transmission Precautions  
 April 19, 2021 (Replaces April 2, 2021 Guidance)**

This document provides guidance for screening, testing, personal protective equipment (PPE), and transmission precautions for SARS-CoV-2/ COVID-19 and influenza in ambulatory care settings.

**UPDATE: Effective April 2021, NYS Department of Health NO LONGER REQUIRES testing or quarantine for domestic travel (i.e., travel to any state or U.S. territory) for all patients. Additionally, quarantine is NOT required for international travelers who are FULLY VACCINATED or who have RECOVERED from COVID-19 infection within the past 3 months.**

- All patients and visitors must don a well-fitting surgical mask upon arrival. See [Use of Face Coverings and PPE by Patients and Visitors](#) for more details.
- For patient and visitor screening information see [Screening Tool for Patients and Visitors](#).
- For guidance on discontinuing COVID-19 isolation precautions, see [Discontinuing Transmission-Based Precautions for Patients with Confirmed COVID-19](#).

**Figure 1: COVID-19 and Influenza Screening Algorithm for Ambulatory Settings**



<sup>1</sup> **Symptoms of COVID-19** include fever (subjective or measured  $\geq 100^{\circ}\text{F}$  or  $37.8^{\circ}\text{C}$ ), cough, shortness of breath, sore throat, muscle aches, diarrhea, nasal congestion, headache, chills/rigors, new onset loss of smell, and altered sense of taste.

<sup>2</sup> **Fully vaccinated:**  $\geq 2$  weeks following receipt of the second dose in a 2-dose series, or  $\geq 2$  weeks following receipt of one dose of a single-dose vaccine regimen.

<sup>3</sup> **COVID-recovered:** history of prior COVID-19 infection within past 3 months.

<sup>4</sup> **International travelers** who are fully vaccinated or COVID-recovered are not required to quarantine, but travelers who are NOT fully vaccinated or NOT COVID-recovered must either quarantine for 7 days and have a negative test 3-5 days after travel or quarantine for 10 days without a test.

<sup>5</sup> **For NYS Department of Health travel-related advisory** see: <https://coronavirus.health.ny.gov/covid-19-travel-advisory>.

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**Table 1: TEST for SARS-CoV-2 +/- Influenza**

- **Test for BOTH SARS-CoV-2 AND influenza** if patient:
  - Has **symptoms of COVID-19 or influenza**
  - Was **exposed to COVID-19** within previous 10 days or to **influenza** within previous 4 days
- **Test for ONLY SARS-CoV-2** if patient is asymptomatic and:
  - Undergoing surgery or certain procedures ([Interim Guidance for Surgery and Procedures](#))
  - **Returning from international travel** and requests testing 3-5 days after return to U.S.<sup>1</sup>
- Patients who are COVID-recovered (history of COVID-19 within previous 3 months) generally do not require repeat testing for SARS-CoV-2. Exceptions may include:
  - **Severely immunocompromised patients** for whom testing is required to discontinue isolation; see: [Discontinuing Transmission-Based Precautions for Patients with Confirmed COVID-19](#).
  - Patients who develop **new symptoms** suggestive of COVID-19
- A single nasopharyngeal (NP) swab can be used to test for both SARS-CoV-2 and influenza
- If testing for respiratory pathogens other than SARS-CoV-2 and influenza is indicated, a paper requisition form should be used to request a **“respiratory pathogen panel.”**

<sup>1</sup> International travelers who are NOT fully vaccinated or NOT COVID-recovered must either quarantine for 7 days with a negative test 3-5 days after travel, or quarantine for 10 days without a test.



**Table 2: USE APPROPRIATE PPE**

- **Well-fitting surgical mask at ALL times<sup>1</sup>**
- **Eye protection<sup>1</sup> for ALL patient care**, regardless of COVID-19 status
- For **NP swab collection** in asymptomatic patient, wear surgical mask, eye protection, and gloves.
- **N95 respirator for ALL aerosol-generating procedures (AGP)** regardless of COVID-19 status.
- **See guidance for patient and visitor mask and PPE:**  
[https://infonyc.org/EPI/Documents/InterimGuidelines\\_SurgicalMaskUseatNYPbyPatientsVisitorsHCP.pdf](https://infonyc.org/EPI/Documents/InterimGuidelines_SurgicalMaskUseatNYPbyPatientsVisitorsHCP.pdf)

<sup>1</sup> See rationale for universal PPE: <https://infonyc.org/EPI/Covid19Documents/FAQsExpandingUniversalPPE.pdf>

**Table 3: Transmission-Based Precautions and PPE for Patients with Symptoms or Recent Diagnosis of COVID-19 or Influenza, regardless of SARS-CoV-2 or influenza exposure, international travel, or vaccination status**

Symptoms of COVID-19 or Influenza OR COVID-19 diagnosis within past 10 days	Precautions	PPE for HCP
Yes <sup>1</sup>	<b>Contact + Droplet</b> (terminally clean)	N95 recommended ( <i>surgical mask acceptable alternative</i> ) + Eye Protection + Gown + Gloves
No	Standard <sup>2</sup>	Surgical mask + eye protection

<sup>1</sup>Refer to clinician. Consider telehealth visit. See **Appendix**.

<sup>2</sup>Patients who report exposure or international travel but who are ASYMPTOMATIC do not require Contact and Droplet Precautions in the ambulatory setting, regardless of vaccination status. <sup>1</sup>The risk of SARS-CoV-2 transmission from contaminated surfaces is very low. Thus, in the ambulatory setting, standard precautions, hand hygiene, universal mask/eye protection, and routine environmental cleaning are sufficient when caring for asymptomatic patients, *regardless of their exposure, travel history, or vaccination status*. HCP should wear gown and gloves if contact with secretions or excretions is anticipated.

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**Table 4: Influenza Summary**

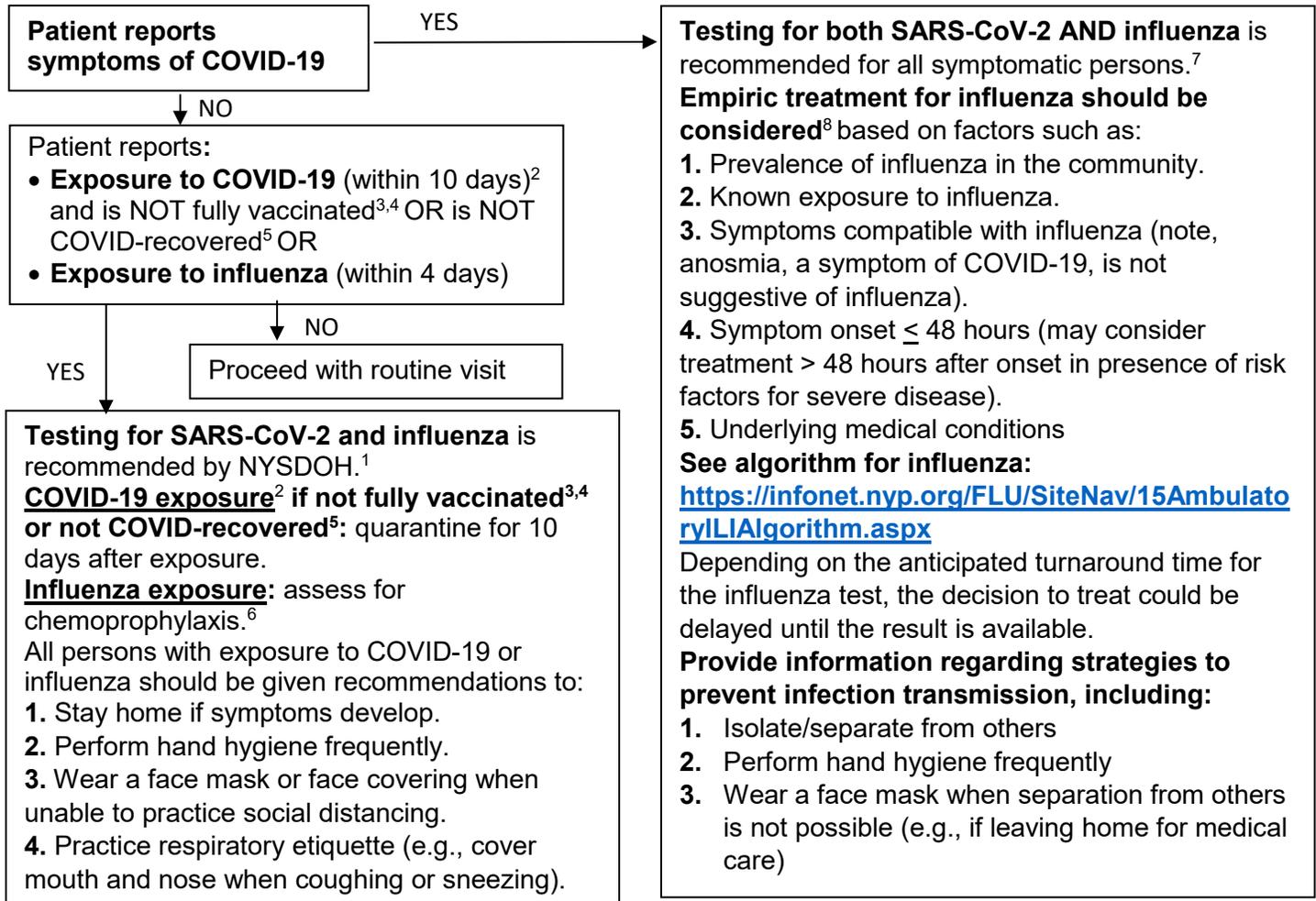
- **Vaccinate**
  - All eligible unvaccinated patients.
- **Chemoprophylaxis**
  - As per Clinical Practice Guidelines by Infectious Disease Society of America, consider following confirmed influenza exposure in specific situations: (<https://pubmed.ncbi.nlm.nih.gov/30834445/>)
  - Consider after an influenza exposure for HCPs with high-risk conditions or who reside with household members with certain high-risk conditions (see [Algorithm for Asymptomatic Healthcare Personnel \(HCP\) with Confirmed Exposure to Influenza](#)).
- **Empiric treatment prior to test results**
  - See [Algorithm for Ambulatory patients with Influenza-like Illness](#)
  - The decision to initiate empiric therapy should be guided by local epidemiology of influenza
- **Isolation**
  - Patients who **test positive for influenza** should be advised to stay at home and avoid contact with others until at least 24 hours without fever off antipyretics.
  - Asymptomatic patients with exposure to only influenza do not require transmission-based precautions, but Universal PPE as described above should be used.

**References**

1. Advisory Committee on Immunization Practices: Prevention and Control of Seasonal Influenza with Vaccines: Recommendations of the Advisory Committee on Immunization Practices — United States, 2020–21 Influenza Season. [https://www.cdc.gov/mmwr/volumes/69/rr/rr6908a1.htm?s\\_cid=rr6908a1\\_w](https://www.cdc.gov/mmwr/volumes/69/rr/rr6908a1.htm?s_cid=rr6908a1_w)
2. Clinical Practice Guidelines by the Infectious Diseases Society of America: 2018 Update on Diagnosis, Treatment, Chemoprophylaxis, and Institutional Outbreak Management of Seasonal Influenza <https://pubmed.ncbi.nlm.nih.gov/30834445/>

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**Appendix: In-Person<sup>1</sup> Visit: Algorithm for COVID-19 and Influenza Symptoms, Exposures, and Testing**



<sup>1</sup>Consider **telehealth visit** for exposed or symptomatic individuals if severity of illness does not warrant in-person evaluation.  
<sup>2</sup>**Exposed individuals** must continue daily symptom monitoring and all recommended interventions including use of face coverings and hand hygiene through Day 14.  
<sup>3</sup>**Fully vaccinated:** ≥2 weeks following receipt of the second dose in a 2-dose series, or ≥2 weeks following receipt of one dose of a single-dose vaccine.  
<sup>4</sup>**PLEASE NOTE:** while CDC and NYSDOH have relaxed certain quarantine restrictions in the community setting, anyone who has been exposed to someone with COVID-19 or who has traveled internationally is still required to strictly adhere to other interventions (e.g., hand hygiene, use of face coverings) through Day 14.  
<sup>5</sup>**COVID-recovered:** history of COVID-19 within past 3 months.  
<sup>6</sup>Routine use of **post-exposure chemoprophylaxis** with oseltamivir is generally not recommended, but can be considered in certain situations (<https://pubmed.ncbi.nlm.nih.gov/30834445/>).  
<sup>7</sup>**Testing** is recommended by NYS DOH, in setting of symptoms and COVID-19 or influenza exposure, and may provide important data for public health surveillance and inform additional public health measures for contacts of exposed individual.  
<sup>8</sup>**Treatment** of patients at increased risk of severe influenza or with contact with individuals at high risk of severe influenza is recommended (<https://pubmed.ncbi.nlm.nih.gov/30834445/>).