

- Testing is recommended immediately (but not earlier than 24 hours after the exposure) and, if negative, again 48 hours after the first negative test and, if negative, again 48 hours after the second negative test. This will typically be at day 1 (where day of exposure is day 0), day 3, and day 5.
- Source control should be worn by all individuals being tested.
- Empiric use of Transmission-Based Precautions for residents and work restriction for HCW are not generally necessary unless residents meet the criteria described in Section 2 or HCW meet criteria in the Interim Guidance for Managing Healthcare Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2, respectively.

Due to challenges in interpreting the result, testing is generally not recommended for asymptomatic people who have recovered from SARS-CoV-2 infection in the prior 30 days. Testing should be considered for those who have recovered in the prior 31-90 days; however, an antigen test instead of a nucleic acid amplification test (NAAT) is recommended. This is because some people may remain NAAT positive but not be infectious during this period.

If no additional cases are identified during contact tracing or the broad-based testing, no further testing is indicated.

 Empiric use of Transmission-Based Precautions for residents and work restriction for HCP are not generally necessary unless residents meet the criteria described in Section 2 or HCW meet criteria in the <a href="Interim Guidance for Managing Healthcare">Interim Guidance for Managing Healthcare</a>
Personnel with SARS-CoV-2 Infection or Exposure to SARS-CoV-2, respectively. **If additional cases are identified,** strong consideration should be given to shifting to the broad-based approach if not already being performed and implementing quarantine for residents in affected areas of the facility.

- As part of the broad-based approach, testing should continue on affected unit(s) or facility-wide every 3-7 days until there are no new cases for 14 days.
  - ♦ If <u>antigen testing</u> is used, more frequent testing (every 3 days), should be considered.

Ongoing transmission within a facility that is not controlled with initial interventions, strong consideration should be given to use of Empiric use of Transmission-Based Precautions for residents and work restriction of HCW with higher-risk exposures.