



# ALEXANDRIA HEALTH DEPARTMENT

## Communicable Disease Division

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Health Director

## HEALTH UPDATE 18 – July 22, 2020

Dear Partners in Health,

Please find enclosed in this update:

1. New CDC Release from Isolation Guidance
2. Health Alert Network 434 (July 5, 2020): [Serious health events associated with Methanol-based Hand Sanitizers](#)

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### Updates to CDC Isolation Guidance

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>

Accumulating evidence supports using a **symptom-based strategy** for making discontinuation of home isolation determinations as follows:

- **For symptomatic persons with COVID-19**, isolation can be discontinued
  - 10 days\* after symptom onset **and**
  - Resolution of fever for at least 24 hours **and** (new)
  - Improvement of other symptoms.
- **For asymptomatic persons with COVID-19**, isolation can be discontinued 10 days after the date of their first positive RT-PCR test.

**Note:** Unless severely immunocompromised, **a test-based strategy is no longer recommended** except to *discontinue isolation earlier than would occur under the symptom-based strategy outlined above.*

*\* Persons with severe illness or immunocompromise may produce replication-competent virus beyond 10 days that may warrant extending duration of isolation and precautions for up to 20 days after symptom onset. A test-based strategy for discontinuing isolation (using RT-PCR) could be considered for persons who are severely immunocompromised.*

Additional counseling tips:

- Symptomatic patients who receive testing **should isolate at home until test results return.**
- Please advise patients not to go out to the grocery store, run errands, work, or attend social gatherings while awaiting testing results.
- Please also alert patients to expect a call from the health department for further guidance if their results return positive.

For a summary of the supporting evidence for the above changes, please visit:

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/duration-isolation.html>

For the latest guidance on healthcare provider exposure risk assessments, please visit:  
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

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**CDC HAN ALERT 0434:**  
**Serious Adverse Health Events Associated with Methanol-Based Hand Sanitizers**

FDA has seen a sharp increase in [hand sanitizer products](#) that are labeled to contain ethanol, but that have tested positive for methanol contamination.

**Signs and symptoms of Methanol poisoning:** headache, blurred vision or blindness, nausea, vomiting, abdominal pain, loss of coordination, decreased level of consciousness, and laboratory findings such as anion gap metabolic acidosis.

**Recommendations for Clinicians and Public Health Officials**

1. Advise patients to immediately seek medical treatment if they have been exposed to methanol-containing alcohol-based hand sanitizers (ABHSR) on the “FDA’s testing and manufacturer’s recalls” list (<https://www.fda.gov/drugs/drug-safety-and-availability/fda-updates-hand-sanitizers-methanolexternal>) and are experiencing symptoms.
2. Have a high index of suspicion for methanol poisoning when a patient presents with a history of ABHSR ingestion or repeated use of these products on the skin.
3. Contact the local poison center (1-800-222-1222) to report cases and to obtain specific medical management advice of methanol poisoning.
4. Clinicians, consumers and patients should report adverse events or quality problems experienced with the use of hand sanitizers to FDA’s [MedWatch Adverse Event Reporting](#) program (please provide the agency with as much information as possible to identify the product):
  - a. Complete and submit the report [online](#); or
  - b. Download and complete the [form](#), then submit it via fax at 1-800-FDA-0178.

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Thank you for your partnership in the City of Alexandria's response to COVID-19, and thank you for the care you give to our communities.

**For more information on COVID-19:**

[www.cdc.gov/coronavirus](http://www.cdc.gov/coronavirus)

<https://www.alexandriava.gov/Health>

<http://www.vdh.virginia.gov/surveillance-and-investigation/novel-coronavirus/>

Sincerely,



Anne Gaddy, MD, MPH  
Deputy Health Director  
Alexandria Health Department

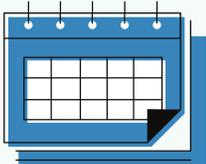


Kim Luk, MD, MPH  
Medical Director  
Alexandria Health Department

For persons with confirmed or suspected COVID-19 to know when they are likely no longer contagious:

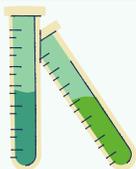


**Symptom-based  
strategy**

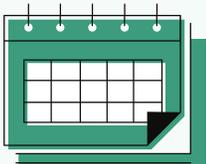


**If you had COVID-19 symptoms** and were directed to care for yourself at home, you can leave your "sick room" and home after these 3 things have happened:

- ✓ At least 10 days have passed since symptoms first appeared, **and**
- ✓ At least 24 hours with no fever without fever-reducing medication, **and**
- ✓ Other symptoms have improved.



**Time-based  
strategy**



**If you tested positive for COVID-19 and never had any symptoms** and were directed to care for yourself at home, you can leave your "sick room" and home if:

- ✓ At least 10 days have passed since the date of your first positive COVID-19 diagnostic test, **and**
- ✓ You continue to have no symptoms since the test.



Persons with COVID-19 who have [severe to critical illness](#) or who are [severely immunocompromised](#) might need to stay home longer than 10 days. These persons can consider using a test-based strategy to discontinue isolation, in consultation with an infectious disease expert.

# WHEN IT IS SAFE TO BE AROUND OTHERS: ENDING QUARANTINE AND RETURN TO WORK FOR EXPOSED PERSONS

People who have been in close contact with a person who has COVID-19 while they are contagious\* need to quarantine.

**Close contact includes:**

- Living with a person who has COVID-19, or
- Providing care for a person who has COVID-19, or
- Being within 6 feet of a person who has COVID-19 for at least 15 minutes, or
- Having exposure to respiratory secretions (e.g., being coughed or sneezed on; sharing a drinking glass or utensils; kissing) from a person who has COVID-19.

\*A person with COVID-19 is considered to be contagious starting from 2 days before they became sick (or 2 days before they tested positive if they never had symptoms) until they meet the criteria to discontinue isolation.



## HOUSEHOLD CONTACTS

**Self-quarantine (stay home) and monitor for symptoms** while the person is home and for 14 days after the person has been released from isolation (because exposure is considered ongoing within the house)\*\*.



\*\*If you are able to have **complete separation** from the person in your house with COVID-19 (this means no contact, no time together in the same room, no sharing of any spaces, such as same bathroom or bedroom), then follow timeframe for non-household contact



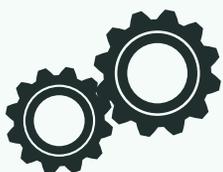
## NON-HOUSEHOLD CONTACTS

**Self-quarantine (stay home) and monitor for symptoms** until 14 days after the date of last close contact with the person infected with COVID-19.



## HEALTHCARE PERSONNEL

Asymptomatic healthcare personnel (HCP) with potential exposure to patients, visitors, or other HCP with COVID-19 may be [assessed for exposures and advised on work restrictions](#) for 14 days after their last exposure. Exposures include close contact when appropriate PPE is not used, especially for aerosol-generating procedures. If staffing shortages occur, it might not be possible to exclude exposed HCP from work; see [CDC strategies to mitigate HCP staffing shortages](#).



## CRITICAL INFRASTRUCTURE WORKERS

Personnel filling essential critical infrastructure roles (as defined in [CISA Framework](#)) should self-quarantine for 14 days after their last exposure, but may continue to work if they do not have any symptoms and additional precautions are taken to protect them and the community. Follow VDH recommendations for [critical infrastructure workers \(non-healthcare\) potentially exposed to COVID-19](#).