



Interim Definition of Close Contact October 26, 2020

This document provides an operational definition of 'close contact' for the purposes of contact tracing in all settings other than for healthcare personnel in healthcare settings.* This document is intended for local health department staff and others involved in administrative or clinical decision making regarding what constitutes close contact.

A close contact of someone with COVID-19 (or suspected of having COVID-19) includes, but is not necessarily limited to:

- Being within 6 feet of that person for a cumulative total of 15 minutes or more over a 24-hour period (e.g., three 5-minute exposures for a total of 15 minutes).

There are other situations where exposure might occur. Factors to consider when determining close contact include, but might not be limited to:

- Direct contact with the infected person or their respiratory secretions, such as
 - Being coughed or sneezed on
 - Being hugged or kissed
 - Caring for someone while he or she is sick or infectious
 - Using or sharing the same eating or drinking utensils that someone with COVID-19 just used prior to washing
- Whether the infected individual has symptoms (the period around onset of symptoms is associated with the highest levels of viral shedding)
- If the infected person was likely to generate respiratory aerosols (e.g., was coughing, singing, shouting)
- Other environmental factors (crowding, adequacy of ventilation, whether exposure was indoors or outdoors)

Although use of personal protective equipment (PPE) will decrease the risk for exposure, a person is considered exposed in the situations listed above whether masks or cloth face coverings were worn or not. MDH notes that the highest risk of exposure might occur with close contact when PPE is either not correctly worn or removed. Settings that may increase risk include dining, if social distancing or barriers are not present, because PPE is removed while eating or drinking.

Patients are considered infectious starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to test specimen collection) until the time the patient is released from isolation.

*Potential exposures to COVID-19 in healthcare personnel should be assessed using CDC's [Interim U.S. Guidance for Risk Assessment and Work Restrictions for Healthcare Personnel with Potential Exposure to COVID-19](#).

References

CDC. Interim Guidance on Developing a COVID-19 Case Investigation & Contact Tracing Plan: Overview, Appendix A – Glossary of Key Terms. Updated Oct. 21, 2020.

<https://www.cdc.gov/coronavirus/2019-ncov/php/contact-tracing/contact-tracing-plan/appendix.html#contact>

CDC. Public Health Guidance for Community-Related Exposure. Updated Oct. 21, 2020.

<https://www.cdc.gov/coronavirus/2019-ncov/php/public-health-recommendations.html>

CDC. When to Quarantine. Updated Oct. 27, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html>

CDC. Guidance for Risk Assessment and Work Restrictions for Healthcare Personnel with Potential Exposure to COVID-19. Updated Oct. 21, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>