



## **Monitoring and Movement Guidance for Managing Returning Travelers and/or Contacts of Confirmed Cases of Novel Coronavirus (COVID-19)**

**Updated March 10, 2020**

The New Jersey Department of Health has provided separate guidance for healthcare settings: [https://www.nj.gov/health/cd/topics/covid2019\\_healthcare.shtml](https://www.nj.gov/health/cd/topics/covid2019_healthcare.shtml)

### **Background**

COVID-19 is caused by a novel coronavirus (SARS-CoV-2) that was first detected in Wuhan, Hubei Province, China. Cases of COVID-19 are also being reported in a growing number of international locations, several of which are experiencing sustained community-level or widespread person-to-person transmission. Cases of COVID-19 without direct links to travel have been reported in the United States and sustained transmission is occurring in some US communities.

The virus is thought to spread mainly from person-to-person between people who are in close contact with one another (within about 6 feet); and through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the eyes, mouth or nose of people who are nearby or possibly be inhaled into the lungs. People are thought to be most contagious when they are most symptomatic. Although transmission might be possible before people show symptoms, it is not thought to be the main way the virus spreads. It may also be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

### **Purpose**

The recommendations in this guidance applies to US-bound travelers who may have been exposed to COVID-19 and people identified through contact investigations of laboratory-confirmed cases. This guidance is designed as a “containment” approach in the absence of sustained community-wide COVID-19 transmission in order to limit the spread of COVID-19 in New Jersey.

Current information on COVID-19 risk by country is available at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>

## Determination of Risk and Public Health Action

Based on current CDC guidance<sup>1</sup>, NJDOH has established exposure risk categories to guide optimal public health management of people following potential COVID-19 exposure. These categories may not cover all potential exposure scenarios and should not replace an individual assessment of risk for the purpose of clinical decision making or individualized public health management.

These risk categories are for persons exposed through international travel and who are identified as contacts of laboratory-confirmed COVID-19 cases.

Exposure risk identification and management for healthcare settings is available at [https://www.nj.gov/health/cd/topics/covid2019\\_professionals.shtml](https://www.nj.gov/health/cd/topics/covid2019_professionals.shtml)

All exposures apply to the 14 days prior to assessment and management recommendations apply until 14 days after the last COVID-19 exposure.

Guidance is provided to help local health departments manage persons in each risk category if asymptomatic (type of symptom monitoring, movement restrictions, travel restrictions), and to recommend actions should symptoms develop. People who are being managed as asymptomatic in a particular risk level who develop signs or symptoms compatible with COVID-19 should be moved immediately into the symptomatic category in the same risk level and be managed accordingly. The risk level does not change if symptoms develop. Local health departments should notify NJDOH/CDS immediately if asymptomatic contacts under monitoring develop symptoms compatible with COVID-19 and following [NJDOH COVID-19 testing guidance](#).

Testing, symptom monitoring or special management for people exposed to asymptomatic people with potential exposures to COVID-19 (such as in a household), i.e., “contacts of contacts” is not recommended; these people are not considered exposed to COVID-19.

---

<sup>1</sup> Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential Coronavirus Disease 2019 (COVID-19) Exposures: Geographic Risk and Contacts of Laboratory-Confirmed Cases (March 5, 2020): <https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html>



## COVID-19 Exposure Risk Categories and Management Associated with International Travel or Contacts of Laboratory-Confirmed Cases

- People who are being managed as asymptomatic in a particular risk level who develop signs or symptoms compatible with COVID-19 should be moved immediately into the symptomatic category in the same risk level and be managed accordingly. The risk level does not change if symptoms develop.
- CDC/NJDOH do not recommend testing, symptom monitoring or special management for people exposed to asymptomatic people with potential exposures to COVID-19 (such as in a household), i.e., “contacts of contacts;” these people are not considered exposed to COVID-19.
- Refer to [Key Definitions](#) at the end of the document for additional information.

Exposure Level	Risk Category	Type of Contact (in past 14 days)	Management if Asymptomatic (for 14 days after last exposure)	Management if Symptomatic
High Risk	A	<p><b>Household contact of a symptomatic laboratory-confirmed case</b></p> <p><i>without using recommended precautions for home care and home isolation<sup>i</sup></i></p>	<p>Self-quarantine at home or as otherwise determined. <i>Legal quarantine may be considered if non-compliant with voluntary quarantine</i></p> <p>Daily active monitoring, if local resources allow; otherwise self-monitoring with public health supervision</p> <p>No public activities</p> <p>Controlled travel</p>	<p>Immediate isolation with consideration of public health orders if non-compliant.</p> <p>Persons should seek health advice (by telephone when possible) if they need medical evaluation.</p> <p>If medical evaluation is needed, it should occur with pre-notification to the receiving HCF and EMS, if EMS transport indicated, and with all recommended infection control precautions in place.</p> <p>Controlled travel: Air travel only via air medical transport. Local travel is only allowed by medical transport (e.g., ambulance) or private vehicle while symptomatic person is wearing a face mask.</p>
	B	<p><b>Travel from Hubei Province in China</b></p>	<p>Legal (enforced) quarantine at home or as otherwise determined</p> <p>Daily active monitoring</p> <p>No public activities</p> <p>Controlled travel</p>	

<p><b>Medium Risk</b></p> <p><i>(assumes no exposures in high-risk category)</i></p>	<p><b>A</b></p> <p><b>Close contact of a symptomatic laboratory-confirmed case</b></p> <p><b>OR</b></p> <p><b>Household contact of a symptomatic laboratory-confirmed case</b></p> <p><i>while consistently using recommended precautions for home care and home isolation<sup>ii</sup></i></p> <p><b>OR</b></p> <p><b>On aircraft seated within 6 feet of traveler with symptomatic laboratory-confirmed case</b> <i>(roughly 2 seats in any direction)</i></p>	<p>No quarantine but recommend that the individual stays home and practices social distancing</p> <p>Daily active monitoring, if local resources allow; otherwise self-monitoring with public health supervision</p> <p>Recommend that long-distance travel on commercial conveyances be postponed</p>	<p>Self-isolation</p> <p>Persons should seek health advice (by telephone when possible) if they need medical evaluation.</p> <p>If medical evaluation is needed, it should occur with pre-notification to the receiving HCF and EMS, if EMS transport indicated, and with all recommended infection control precautions in place.</p> <p>Controlled travel: Air travel only via air medical transport. Local travel is only allowed by medical transport (e.g., ambulance) or private vehicle while symptomatic person is wearing a face mask.</p>
	<p><b>B</b></p> <p><b>Travel from mainland China (outside Hubei Province) or Iran</b></p> <p><i>Does not apply to travelers who only transit through airport – see No Risk</i></p>	<p>No quarantine but recommend that the individual stays home and practices social distancing</p> <p>Self-monitoring with public health supervision</p> <p>Recommend that additional long-distance travel on commercial conveyances be postponed after destination is reached</p>	
	<p><b>C</b></p> <p><b>Travel from a country with widespread sustained transmission, (other than China or Iran)<sup>iii</sup></b></p>	<p>No quarantine but recommend that the individual stays home and practices social distancing</p> <p>Self-monitoring</p> <p>Recommend that additional long-distance travel on commercial conveyances be postponed after destination is reached</p>	
	<p><b>D</b></p> <p><b>Travel from a country with sustained community transmission</b></p>	<p>Practice social distancing</p> <p>Self-observation</p>	

<p><b>Low Risk</b></p> <p><i>(assumes no exposures in high-risk category)</i></p>	<p><b>A</b></p>	<p><b>Being in the same indoor environment (e.g., classroom, lobby, waiting room) with a symptomatic laboratory-confirmed case for a prolonged period of time</b></p> <p><i>and not meeting definition of close contact</i></p>	<p>No restriction on movement</p> <p>Advise traveler to self-observe for symptoms</p>	<p>Self-isolation, social distancing</p> <p>Persons should seek health advice (by telephone when possible) if they need medical evaluation.</p>
<p><b>No identifiable Risk</b></p>	<p><b>A</b></p>	<p><b>Interactions with a symptomatic laboratory-confirmed case that do not meet any high, medium, or low risk categories</b></p> <p><i>Examples: walking by a person, being briefly in the same room, airport layovers</i></p>	<p>No action needed</p>	<p>If sought, medical evaluation and care should be guided by clinical presentation.</p> <p>Travel on commercial conveyances should be postponed until no longer symptomatic.</p>

## Definitions

- **Active monitoring** means that the local health department checks in daily to assess for fever and compatible respiratory symptoms. Check-ins are through daily phone calls, interactive voice response, internet reporting, or via Skype or other video conferencing, with possible follow-up home visits as needed.
- **Close contact** is defined as: a) being within approximately 6 feet of a COVID-19 case for a prolonged period of time; close contact can occur while caring for, living with, visiting, or sharing a healthcare waiting area or room with a COVID-19 case; OR b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on).
- **Controlled travel** involves exclusion from long-distance commercial conveyances (e.g., aircraft, ship, train, bus).
- **Household contact** is defined as living in the same household as, being an intimate partner of, or providing care in a nonhealthcare setting (home) for a person with symptomatic laboratory—confirmed COVID-19 infection
- **Isolation** means the separation of a person or group of people known or reasonably believed to be infected with a communicable disease and potentially infectious from those who are not infected to prevent spread of the communicable disease.
- **Quarantine** means the separation of a person or group of people reasonably believed to have been exposed to a communicable disease but not yet symptomatic, from others who have not been so exposed, to prevent the possible spread of the communicable disease.
- **Self-monitoring** means people should monitor themselves for fever by taking their temperatures twice a day and remain alert for cough or difficulty breathing. If they feel feverish or develop measured fever, cough, or difficulty breathing during the self-monitoring period, they should self-isolate, limit contact with others, and seek advice by telephone from a healthcare provider or their local health department to determine whether medical evaluation is needed.

- **Self-monitoring with public health supervision** means that the local health department should establish initial contact with the individual, instruct the person to measure their temperature and assess themselves for respiratory symptoms daily, and provide instructions for notifying the health department if they develop fever, cough, or difficulty breathing. Health departments should contact the individual at the beginning, middle (between days 5 and 7), and at the end of the 14-day monitoring period.
- **Self-observation** means people should remain alert for subjective fever, cough, or difficulty breathing. If they develop these symptoms, they should take their temperature, self-isolate, limit contact with others, and seek advice by telephone from a healthcare provider or their local health department to determine whether medical evaluation is needed.
- **Social distancing** means remaining out of public places where close contact with others may occur (e.g., shopping centers, movie theaters, stadiums), workplaces (unless the person works in an office space that allows distancing from others), schools and other classroom settings; avoiding public transportation (e.g., bus, subway, taxi, ride share); and maintaining distance (approximately 6 feet) from others.
- **Symptomatic** is defined as subjective or measured fever, cough, or difficulty breathing.

### **Airline Crew Members**

- US-based crew members and crew members who are based in other countries not known to have sustained transmission who are on layovers in countries with sustained (community or widespread) transmission should limit their activities in public and their interactions with local populations and practice social distancing while in those countries. Crew members who follow these recommendations, and who have no known exposure to persons with COVID-19, are assessed as low risk. These crew members should self-monitor for 14 days after their layovers under the supervision of the air carrier's occupational health program. These crew members have no movement restrictions while in the United States and may continue to work on passenger or cargo flights as long as they remain asymptomatic.
- Crew members who are based in countries with sustained community transmission and who are in the United States for layovers are assessed as medium risk but may continue to work on passenger or cargo flights to and within the United States as long as they remain asymptomatic. The crew members should self-monitor under the supervision of the air carrier's occupational health program. These crew members are also recommended to practice social distancing while in the United States.
- Crew members who are based in countries with widespread sustained transmission and who are in the United States for layovers are assessed as medium risk but may continue to work on passenger or cargo flights to and within the United States as long as they remain asymptomatic. These crew members should self-monitor under the supervision of the air carrier's occupational health program. These crew members are also recommended to remain in their hotel rooms, limit activities in public, and practice social distancing while in the United States.

This guidance has been adapted from the Centers for Disease Control and Prevention (CDC) Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential Coronavirus **Disease 2019 (COVID-19)** Exposures: **Geographic Risk and Contacts of Laboratory-Confirmed Cases (March 5, 2020)**:  
<https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html>

## **Resources**

- NJDOH – General Information Page
  - <https://www.nj.gov/health/cd/topics/ncov.shtml>
- NJDOH – Local Health Department Directory
  - [www.localhealth.nj.gov](http://www.localhealth.nj.gov)
- CDC – General Information Page
  - <https://www.cdc.gov/coronavirus/2019-ncov/index.html>
- CDC - Interim US Guidance for Risk Assessment and Public Health Management of Persons with Potential Coronavirus 2019 (COVID-19) Exposures
  - <https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html>
- CDC – Guidance for Providing Home Care
  - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html>
- CDC – Guidance for Preventing Spread in Homes and Residential Communities
  - [https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fguidance-prevent-spread.html](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fguidance-prevent-spread.html)
- CDC – Interim 2019-nCoV Infection Control Guidance
  - <https://www.cdc.gov/coronavirus/2019-ncov/hcp/infection-control.html>

---

<sup>i</sup> Guidance for home care: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html>. Guidance for home isolation: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html>

<sup>iii</sup> Coronavirus Disease 2019 Information for Travel: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>