

HEALTH ADVISORY: DEFINITION OF A CLOSE CONTACT Oct. 22, 2020

Background

The United States and Texas are experiencing ongoing community transmission of the novel coronavirus, SARS-CoV-2, which causes the disease COVID-19. This advisory provides guidance for healthcare providers on case investigation and disease reporting.

Definition of a Close Contact

On Oct. 21, 2020, the Centers for Disease Control & Prevention (CDC) updated its definition of a close contact, accessible here, to:

Someone who was within 6 feet of an infected person for a **cumulative** total of 15 minutes or more over a 24-hour period starting from 2 days before illness onset (or, for asymptomatic patients, 2 days prior to test specimen collection) until the time the patient is isolated.

Individual exposures added together over a 24-hour period (e.g., three 5-minute exposures for a total of 15 minutes). Data are limited, making it difficult to precisely define "close contact;" however, 15 cumulative minutes of exposure at a distance of 6 feet or less can be used as an operational definition for contact investigation. Factors to consider when defining close contact include proximity (closer distance likely increases exposure risk), the duration of exposure (longer exposure time likely increases exposure risk), 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), and other environmental factors (crowding, adequacy of ventilation, whether exposure was indoors or outdoors). CDC does not recommend differential determination of close contact for those using fabric face coverings. Metro Health takes into account type of mask, whether usage was consistent and correct, as well as the other factors above. For case-by-case quidance, contact the Epidemiology Program.

For questions or to report a suspected case, please contact:

San Antonio Metropolitan Health District Epidemiology Program

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