

## PEDIATRICS

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## **Primary vs Secondary vs Tertiary Exposure Triage Chart**

PRIMARY	PRIMARY EXPOSURE	SECONDARY EXPOSURE	TERTIARY EXPOSURE
Person is diagnosed with COVID-19 or is considered a presumptive case (symptoms).	Person has direct contact with someone who has tested positive for COVID-19 or is considered a presumptive case.	Person is in direct contact with a Primary Exposure person.	Person is in direct contact with a Secondary Exposure.
ISOLATE FROM OTHERS	QUARANTINE	NO QUARANTINE	NO ACTION
<ul> <li>Follow health professional recommendations.</li> <li>ISOLATE UNTIL 10 days from onset of symptoms (or when tested positive) AND no fever for 24 hours and symptoms improving.</li> </ul>	<ul> <li>Begin quarantine immediately for 14 days.</li> <li>Self-monitor for symptoms or fever.</li> <li>Contact your physician regarding getting tested.</li> <li>If you test positive, then follow PRIMARY Protocol.</li> </ul>	Self-monitor for fever or symptoms. If <b>PRIMARY CONTACT</b> tests positive or diagnosed as presumptive case, follow <b>PRIMARY EXPOSURE Protocol</b> .	No action needed unless you move to <u>SECONDARY</u> <u>EXPOSURE</u> Protocol.
IDENTIFY/NOTIFY	IDENTIFY/NOTIFY	IDENTIFY/NOTIFY	IDENTIFY/NOTIFY
Notify all persons you have been in contact with for 48 hours prior to onset of symptoms or positive test.	No need to notify others unless you develop symptoms, in which case follow instructions in left most "PRIMARY" column.	Keep communication open, practice social distancing, wear a mask and use frequent and thorough hand hygiene.	Keep communication open, practice social distancing, wear a mask and use frequent and thorough hand hygiene.

**Direct Contact: 1.** Within 6 feet of someone who has tested positive for COVID-19 for a cumulative of 15 minutes over a 24-hour period or longer, from 2 days prior to onset of symptoms until the end of home isolation. **2.** You provided care at home to someone who tested positive for COVID-19. **3.** You had direct physical contact with someone who is COVID-19 positive or suspected positive. **4.** You shared eating or drinking utensils. **5.** They sneezed, coughed, or somehow got respiratory droplets on you.