



ALLEN COUNTY PUBLIC HEALTH

Allen County Combined Health District

SELF-ISOLATION FOR COVID-19

Name: _____ Isolation address: _____

[name] _____ affirms that he/she has tested positive for COVID-19. As a result, they pose a substantial threat to the health of the public. To prevent transmission of this contagious disease, isolation is recommended and they have agreed to self-isolate. The location where they should isolate is their home or other suitable place. The Health Commissioner considers this the least restrictive clinically appropriate place of isolation given the nature of the disease.

Isolation is in effect from (date) _____ **to** (date) _____

The ESTIMATED release date from isolation is (date) _____

If you have had symptoms, you will need to be in self-isolation until at least:

- 24 hours have passed since your fever has ended without the use of fever-reducing medications; **and**
- your symptoms associated with COVID-19 have improved; **and,**
- at least **5 days** have passed since symptoms first appeared. The day symptoms first appeared is day 0. Continue to wear a mask for 5 additional days.

If you have NOT had symptoms or were not able to determine when your symptoms started, you need to self-isolate until at least **5 days** have passed since you were tested for COVID-19. Continue to wear a mask for 5 additional days.

The end day of your isolation is subject to change based on the duration of symptoms. Symptom monitoring is highly recommended for completion of your isolation. If you have not met the criteria for release and it has been longer than 10 days, you should follow up with your doctor or primary care provider for further medical recommendations.

This document includes guidance from the Ohio Department of Health and the Centers for Disease Control and Prevention. Any questions regarding this notice may be directed to 419-228-4457.

This isolation period is recommended effective immediately upon the date of a positive test or the date symptoms started for above named individual.

I affirm that I have tested positive for COVID-19 and must isolate at home: _____



Brandon Fischer, MA, REHS
Health Commissioner

It is recommended that a copy of a valid positive test result accompany this form.

This form may be used for isolation release or for paid leave claims as if it was an individual Self-Isolation letter issued by the Allen County Combined Health District.

Revised 2-2022



Public Health
Prevent. Promote. Protect.

219 E. Market Street, P.O. Box 1503, Lima, Ohio 45802-1503 | Phone: 419-228-4457 |

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GUIDANCE FOR ACTIVE MONITORING – SELF-ISOLATION

COVID-19 is a significant potential threat to the health of Ohioans. Staying home and separated from others is the best way to protect yourself, your family, your community, and the rest of the public. The steps you are taking can be an inconvenience, but are important.

Based on this, you should adhere to the following CDC guidelines:

- Remain at home.
- Practice Social Distancing.
- Postpone long-distance travel on commercial conveyances.

In addition, you should do the following:

- **Face Covering:** Wear a face mask if you must be in the same room with other people, minimize contact with other people even if you are wearing a face mask.
- **Distance:** You should separate yourself from other household members and animals as much as possible.
- **Travel:** You are not to leave your home while you are in isolation.
- **Temperature and active symptom monitoring:** In order to monitor your health and to ensure you can receive timely medical care (if necessary), you are asked to take your temperature twice daily, in the morning and evening. If your temperature is 100.4° or greater, **or** if you develop a cough, difficulty breathing, or shortness of breath, you should call your health care provider.
- **Visitors:** No visitors are to be allowed in your home. You may have family/friends drop off food and other supplies; do not invite them into your home. Limit visitors to those who have an essential need to be in your home.
- **Medical appointments:** Please let your provider know of your positive test result. All scheduled medical appointments will require calling in advance.
- **Symptoms:** If your symptoms worsen or you develop new symptoms, immediately contact your healthcare provider. If you experience severe trouble breathing, persistent pain in the chest, new confusion, inability to waken or stay awake or bluish lips or face, seek emergency medical help/call 911.
- **Notification of Medical Personnel** – If it is necessary for you to contact police, fire or emergency medical services, **you must notify the dispatcher and any first responder that you have tested positive for COVID-19 and tell them the monitoring steps you are taking.**
- **Testing:** Any new COVID-19 testing after being placed in isolation may change the duration of your SELF-ISOLATION time period.

If you have any questions regarding these instructions, contact Allen County Public Health at 419-228-4457.

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