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சுகாதார அமைச்சு

Ministry of Health

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எனது இல) DGHS/COVID-19/347- 2021
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திகதி) 05/01/2021
Date)

Heads of Institutions of dedicated COVID-19 treatment facilities

Discharge criteria for COVID-19 patients (Version 4 - 25th January 2021)

When deciding on criteria for discharge of COVID-19 patients from treatment facilities, factors such as the existing capacity of the healthcare system, laboratory diagnostic resources and the current epidemiological situation are important considerations.

Based on growing evidence and global expert recommendations, **criteria for discharge of COVID-19 confirmed cases** are revised as below:

A. Discharge of asymptomatic cases from isolation facility

Asymptomatic people who have had a positive SARS-COV-2 (COVID-19) PCR test can be discharge based on following:

Category 1. Admission/initial PCR Ct value available;

If COVID-19 diagnostic PCR Ct value is >30*, send sample of blood for serology on the following day after admission (using either ELISA or immune chemiluminescence method standardised and locally validated for Sri Lanka).

- If COVID-19 **antibodies (IgG) are positive**, patient can be discharged. No further isolation is necessary.
- If COVID-19 **antibodies (IgG) are negative** (might be pre-symptomatic), patient should be discharged at day 10 after initial PCR test date. This individual will spend 4 additional days in isolation at home. If home isolation is not possible (e.g. elderly homes, hostels, prisons), such individual should spend additional 4 days in treatment centre.

If diagnostic PCR CT value is ≤30*, individual should be discharged at day 10 after PCR test date. This individual will spend 4 additional days in isolation at home. If home isolation is not possible (e.g. elderly homes, hostels, prisons), such individual should spend additional 4 days in treatment centre.

***Interpretation of Ct values:** When there are two or more targets in the COVID-19 positive RT-PCR assay, consider the lowest Ct value out of all Cts for the evaluation (when the result is interpreted as positive).

Category 2. Admission/initial PCR Ct value not available;

Such cases can be **discharged 10 days after the initial diagnostic PCR test date**. This individual will **spend 4 additional days in isolation at home**. If home isolation is not possible (e.g. elderly homes, hostels, prisons), such individual must be kept additional 4 days in treatment centre.

B. Discharge of Symptomatic COVID-19 + patients who are not immunosuppressed**

Category 1. Patients with mild symptoms

If **patient is clinically fit** to be discharged, can be **discharged 10 days after the onset of symptoms**. This individual will **spend 4 additional days in isolation at home**. If home isolation is not possible (e.g. elderly homes, hostels, prisons), such individual must be kept additional 4 days in treatment centre. No further isolation is necessary after 14 days.

Category 2. Patients with moderate/severe symptoms.

- moderate illness → presence of fever $> 38^{\circ}\text{C}$, but no evidence of pneumonia/ respiratory distress
- severe illness → persistent fever > 5 days/ evidence of pneumonia/ respiratory distress present

If the **patient is clinically fit** to be discharged, can be **discharged 21 days after the onset of symptoms**. No further isolation is necessary.

OR

When the patient is clinically fit to be **discharged 14 days after** the onset of symptoms, **two consecutive PCR tests** performed 24 hours apart, the first of which is taken at least 11 days after onset of symptoms, **are negative OR** if the **COVID-19 antibody test (IgG) is positive** using ELISA / immune chemiluminescence tests standardized and locally validated for Sri Lanka. This individual will spend 7 additional days in isolation at home. If home isolation is not possible (e.g. elderly homes, hostels, prisons), such individual should spend additional 7 days in treatment centre.

C. Symptomatic COVID-19 + patients who are significantly immunosuppressed**

If the patient is **clinically fit to be discharged**, can be discharged when;

- (i) 21 days after the onset of symptoms if two consecutive PCR tests done 24 hours (or more) apart are negative.

OR

- (ii) 21 days after the onset of symptoms and repeat PCR done any time after 14 days with a Ct value of >30 and positive serology.

No further home isolation is necessary.

****Significantly immunocompromised patients include:**

- Organ transplant recipients on immunosuppressive therapy
- Bone marrow transplant recipients (if performed within the past 2 years)
- Cancer patients undergoing treatment (active malignancies)
- Those on long-term immunosuppressants/corticosteroids for any cause

- HIV-infected patients with CD4 T lymphocyte count below 200 cells/mm³
- Patients with primary immune deficiency
- Any other condition as decided by the treating consultant

For asymptomatic significantly immunocompromized cases follow Criteria B, Category 2 indicated for patients with moderate/severe symptoms given above.

Any significantly immunocompromised patient with a positive RT-PCT test with low Ct value after 21 days, consider discharging after discussing with clinical expert panel. Further, in such patients sending respiratory sample to a dedicated reference laboratory for genetic sequencing is important.

Summary table for discharge of COVID-19 patients is given as Annexure.

All COVID-19 RT-PCR testing laboratories (state and private sector) are expected to issue the Ct values of viral targets for smooth implementation of this circular instructions.

Once discharged, COVID-19 positive patients **should not be** subjected to further PCR testing or rapid Ag testing (RAT) even when hospitalized for any condition subsequently (PCR positivity or RAT positivity at this point is due to the presence of viral particles and does not mean that the individual is infectious). This recommendation is applicable for a period of 3 months after initial diagnosis.

Upon discharge COVID-19 patients who have been advised home isolation should contact the MOH/PHI of the area for them to be informed of the status of patient during that period.

All heads of institutions of designated COVID-19 treatment facilities and technical heads of designated laboratories should make necessary arrangements according to this circular.

Please note that this circular may be updated according to the condition of the country and will be informed accordingly.


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- Chief Epidemiologist
- Directors – MSD, MTS, MRI, Private Health Sector Development
- Relevant PDHS/RDHS
- Medical Directors of Tri Forces and Police
- Technical heads of designated laboratories

Annexure:1 Summary of Discharge criteria for COVID-19 infected individuals

Category	Admission/Initial PCR Ct value	Steps to be taken prior to discharge	Isolation and Testing	Total days of isolation
A	Asymptomatic patients	>30	Serology to be done Next day – If IgG Antibody Positive	Can discharge immediately
		>30	Serology to be done Next day – If IgG Antibody Negative	Institutional isolation-until day 10 from PCR test date. Home isolation -Until Day 14. No further PCR testing
		<30	Institutional isolation-until day 10 from PCR test date. Home isolation -Until Day 14	No further PCR testing
		Ct value- Not Available	Institutional isolation-until day 10 from PCR test date. Home isolation -Until Day 14	No further PCR testing
B	Mild symptomatic-Non immunosuppressed	-	If clinically fit, can be discharged 10 days after the onset of symptoms Home isolation -Until Day 14	No further PCR testing
		-	If clinically fit, can be discharged 21 days after the onset of symptoms	No further PCR testing
		-	OR if clinically fit, can be discharged 14 days after the onset of symptoms	if 2 consecutive PCR done 24 hours apart are negative (first sample after day 11 of symptoms) OR If COVID-19 IgG Antibody Positive. Home isolation Until day 21
C	Symptomatic +Immunosuppressed	-	If clinically fit, can be discharged 21 days after the onset of symptoms	if 2 consecutive PCR done 24 hours apart negative OR PCR -positive-Ct value>30 (tests done after 14 days of symptoms) and COVID-19 IgG Antibody Positive
		-		


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