



Contact Risk Assessment Flowchart

(For community, non-healthcare settings)

All questions below pertain to interactions the case-patient had with potential contacts in a community, non-healthcare setting during their **Infectious Period**. This is the timeframe during which the case-patient is considered most infectious.

- **The infectious period for SYMPTOMATIC case-patients** starts two days before the case-patient first had any symptoms, including even mild symptoms (e.g. headache, sore throat, runny nose, fatigue) and ends the date the case-patient meets the criteria to end isolation (10 days since onset AND 3 days well).
- **The infectious period for ASYMPTOMATIC case-patients** starts 2 days prior to specimen collection date and ends 10 days after specimen collection date.

Are any of the following true of your interaction with the contact during your infectious period?

- Did you have direct physical contact with the person (e.g., hug, kiss, handshake)?
- Were you within 6 feet of the person for more than 15 minutes?
- Could the person have had contact with any of your respiratory secretions (e.g. coughed/sneezed on, contact with dirty tissue, sharing a drinking glass, food or towels or other personal items)
- Did you stay overnight for at least one night in a household with the person (i.e., household contact)?

Yes

No

Were you wearing a mask or a cloth face covering (e.g., cloth mask, bandana, scarf) during the interaction(s) with the contact?*

Not a Close Contact

Yes

No

Close Contact

WEDSS reminder:

All close contacts, regardless of what jurisdiction they live in, should be entered in WEDSS on the Intervention Tab as contacts of the Disease Incident (DI). Please be sure to select the appropriate Contact Type (e.g., household contact, close contact). A Contact Investigation (CI) should be created for all close contacts that are WI residents, with the appropriate WI jurisdiction assigned in the CI. Please follow the [Interstate Notifications Methods – LTHD alerting DHS](#) for instructions on how to report Non-WI close contacts.

CDC Close Contact Definition:

Data are limited to define close contact and prolonged exposure.

Factors to consider include proximity, the duration of exposure (e.g., longer exposure time likely increases exposure risk), whether the individual has symptoms (e.g., coughing likely increases exposure risk) and whether the individual was wearing a mask (which can efficiently block respiratory secretions from contaminating others and the environment). Recommendations vary on the length of time of exposure but 15 min of close exposure can be used as an operational definition. Brief interactions are less likely to result in transmission; however, symptoms and the type of interaction (e.g., did the person cough directly into the face of the individual) remain important.

*The use of a mask or cloth face covering by an infectious individual in a community, non-healthcare setting most likely reduces the risk of transmission of COVID-19, but it is unknown to what degree. In a community setting, risk assessment and quarantine guidance for a contact is not affected by the case-patient wearing a mask or cloth face covering. Only the use of all recommended PPE in a healthcare setting is sufficient to eliminate the need for quarantine of a close contact of an infectious individual.