



Maine Department of Health and Human Services
Maine Center for Disease Control and Prevention
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-8016; Fax (207) 287-9058
TTY Users: Dial 711 (Maine Relay)

Maine Health Alert Network (HAN) System

PUBLIC HEALTH ADVISORY

To: Health Care
From: Dr. Isaac Benowitz, State Epidemiologist
Subject: Updated Respiratory Virus Guidelines
Date / Time: Thursday, March 14, 2024
Pages: 4
Priority: Normal
Message ID: 2024PHADV005

Updated Respiratory Virus Guidelines 2024

Summary

- On March 1, 2024, the U.S. Centers for Disease Control and Prevention (U.S. CDC) issued community guidance to help decrease the spread of several common respiratory illnesses, including COVID-19, influenza, and Respiratory Syncytial Virus (RSV).
- The recommendations include enhanced precautions to protect those most at risk for severe illness, including those **over 65 years old** and people with **weakened immune systems**, even if up to date on COVID-19 vaccine, and people who are **not up to date on COVID-19 vaccine**. U.S. CDC provides additional specific considerations for people with certain risk factors for severe illness: [older adults](#), [young children](#), [people with weakened immune systems](#), [people with disabilities](#), and [pregnant people](#).
- Public health guidance for all health care (including outpatient settings) and health care personnel (HCP) has not changed.

Background

Influenza, COVID-19, and RSV continue to be significant health burdens in the U.S., especially to people at higher risk for severe disease, including older adults, young children, people with compromised immune systems, people with disabilities, and pregnant people. The health impacts of COVID-19 are now increasingly similar to those of other respiratory viruses, like influenza. Reported deaths involving COVID-19 are several-fold greater than those reported to involve influenza and RSV. However, influenza and likely RSV are often underreported as causes of death.

We also have more tools than ever to combat influenza, COVID-19, and RSV, including vaccines for all three of these viruses. COVID-19 vaccination cuts the risk of symptomatic disease and hospitalization by about half compared to people not up to date on vaccination. COVID-19 treatment decreases risk of

hospitalization by 75% and death by 60% when used in persons at high risk of severe disease. More than 95% of people hospitalized with COVID-19 this last season were not up to date on COVID-19 vaccines and most had not received antiviral treatment. Influenza vaccines similarly cut the risk of severe disease by close to half, and antiviral treatment can help reduce some complications and can lessen symptoms and shorten the duration of illness.

Many respiratory infections present with similar or overlapping symptoms and people often don't know which virus they have. Testing is only widely available for COVID-19, and data indicate many people don't test. Symptoms are a simple indicator for determining when to act. As symptoms improve, especially fever, infectiousness tends to go down.

The guidance provided here emphasizes the importance of vaccination and treatment so that people can protect themselves, loved ones, and the community from these illnesses. This guidance is not meant to apply to specialized situations, like health care settings or certain disease outbreaks, where more specific guidance may be needed.

States and countries that implemented COVID-19 isolation guidance similar to these recommendations did not experience clear increases in community transmission or hospitalization rates. Two U.S. states that recently implemented similar isolation guidance did not see higher COVID-19 test positivity, emergency department visits, or hospitalizations.

Recommendations for General Audiences and Community Settings

The updated guidelines apply to community settings, including schools, non-healthcare portions of correctional and detention facilities, and non-healthcare portions of shelters for people experiencing homelessness.

U.S. CDC recommends that all people use core prevention strategies to protect themselves and others. These include:

- Staying up to date with immunizations
- Practicing good hygiene to improve cleanliness (e.g., covering your cough, handwashing)
- Taking steps for cleaner air (e.g., opening windows, increasing circulation of fresh air)
- Staying home and preventing the spread of infections to other people

Additional prevention strategies that all individuals may use include wearing well-fitting masks, using physical distancing, and testing when a person feels unwell.

All of the prevention strategies described in this guidance can be helpful to reduce the risk of respiratory infections from influenza, COVID-19, RSV, and other common respiratory viruses. They are especially helpful when respiratory viruses are causing a lot of illness in your community; when you or people around you were recently exposed to a respiratory virus, are sick, or are recovering; and when you or people around you have risk factors for severe illness.

When you have a respiratory infection, including COVID-19, influenza, or RSV, stay home and away from others, including those you live with.

- Symptoms of respiratory viruses can include, but are not limited to, fever or feeling feverish, chills, chest discomfort, cough, decreased appetite, diarrhea, fatigue, headache, muscle or body aches, new loss of taste or smell, runny or stuffy nose, sneezing, sore throat, vomiting, weakness, and wheezing.

- You can return to normal activities when, for at least 24 hours, both of the following are true:
 - Your symptoms are getting better **and**
 - You are fever-free without the use of fever-reducing medication (like Tylenol and ibuprofen)
- Even people who are feeling better may still be able to spread the virus. Therefore, for the first five (5) days after returning to normal activities, take added enhanced precautions, such as:
 - Take additional steps for cleaner air, such as using a HEPA air filtering unit,
 - Enhancing hygiene practices, particularly hand hygiene,
 - Wearing a well-fitting mask,
 - Physically distancing, and
 - Testing for respiratory viruses to inform actions to prevent spread and get treated
- These enhanced precautions are especially important to protect those most at risk for severe illness, including those **over 65 years old** and people with **weakened immune systems**, even if up to date on COVID-19 vaccine, and people who are **not up to date on COVID-19 vaccine**. U.S. CDC provides additional specific considerations for people with certain risk factors for severe illness: [older adults](#), [young children](#), [people with weakened immune systems](#), [people with disabilities](#), and [pregnant people](#).
- If you develop a fever or you start to feel worse again after you have gone back to normal activities, stay home and away from others again until, for at least 24 hours, both are true:
 - Your symptoms are getting better **and**
 - You are fever-free without the use of fever-reducing medication (like Tylenol and ibuprofen)

If you test positive for COVID, influenza, or RSV, but have no symptoms, or if you are exposed to a person with a respiratory infection, for the next five (5) days, take enhanced precautions, such as:

- Take additional steps for cleaner air, such as using a HEPA air filtering unit,
- Enhancing hygiene practices,
- Wearing a well-fitting mask,
- Physically distancing, and
- Testing for respiratory viruses to inform actions to prevent spread and get treated

Note that depending on the length of symptoms, the isolation period described here could be shorter than, the same as, or longer than the previous guidance for COVID-19.

Recommendations for Health Care Settings and Health Care Personnel

- Recommendations for managing and responding to respiratory infections in health care settings and for HCP remain unchanged.
- U.S. CDC offers additional separate, specific guidance for healthcare settings for [COVID-19](#), [influenza](#), and [general infection prevention and control](#).
- Further guidance for healthcare settings and HCP can be found in the “Additional Resources” section below.

Additional Resources

- *Community Settings*
 - U.S. CDC: Respiratory Virus Guidance (<https://www.cdc.gov/respiratory-viruses/guidance/respiratory-virus-guidance.html>)

- U.S. CDC: Respiratory Virus Guidance Update FAQs (<https://www.cdc.gov/respiratory-viruses/guidance/faq.html>)
- Maine CDC: 2019 Coronavirus (COVID-19) Frequently Asked Questions (updated 1/12/2024) (<https://www.maine.gov/dhhs/mecdc/infectious-disease/epi/airborne/coronavirus/FAQ.shtml>)
- *Healthcare Settings*
 - U.S. CDC: Interim Guidance for Managing Healthcare Personnel with SARS-COV-2 Infection or Exposure to SARS-CoV-2: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>
 - U.S. CDC: Prevention Strategies for Seasonal Influenza in Healthcare Settings: <https://www.cdc.gov/flu/professionals/infectioncontrol/healthcaresettings.htm>
 - U.S. CDC: Infection Control in Health Care Facilities: <https://www.cdc.gov/flu/professionals/infectioncontrol/index.htm>
 - U.S. CDC: Type and Duration of Precautions Recommended for Selected Infections and Conditions (<https://www.cdc.gov/infectioncontrol/guidelines/isolation/appendix/type-duration-precautions.html>)
 - U.S. CDC: Guideline for Isolation Precautions (PDF) (<https://www.cdc.gov/infectioncontrol/pdf/guidelines/isolation-guidelines-H.pdf>)
 - Maine CDC: HAI Resource page (<https://www.maine.gov/dhhs/mecdc/infectious-disease/hai/resources.shtml>)
 - U.S. CDC: Preventing Transmission of Viral Respiratory Pathogens in Healthcare Settings: <https://www.cdc.gov/infectioncontrol/guidelines/viral/prevent-viral.html>
 - U.S. CDC: Respiratory Viral Toolkit for Nursing Homes: <https://www.cdc.gov/longtermcare/prevention/viral-respiratory-toolkit.html>
 - U.S. CDC: RSV For Healthcare Providers (<https://www.cdc.gov/rsv/clinical/index.html>)