

Isolation and Quarantine | Frequently Asked Questions

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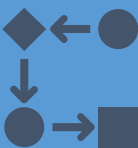
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What are the differences between social distancing, quarantine, and isolation?

	Social Distancing	Quarantine	Isolation
Who is it for? 	Everyone	People or groups who don't currently have symptoms but were exposed to the disease.	People who are already sick with the disease.
What is it? 	A day-to-day precautionary measure to help prevent the spread of a disease.	A prevention strategy used to monitor and separate well people who may have been exposed to a disease for a certain amount of time to see if they become ill. Helps prevent the spread of disease. Usually takes place in the home.	A prevention strategy used to separate people who are sick with an infectious disease from healthy people. Helps limit the spread of disease. Can take place in the home or hospital. Healthcare providers often send patients to home-isolation when they no longer require medical attention.
When do I use it? 	All the time until further direction by KDHE or the local health department.	<p>If you are unvaccinated and have recently traveled to a country or US state with widespread community transmission of COVID-19, or been on a cruise or river cruise, or if you have come into close contact with someone who has COVID-19.</p> <p>Consult the KDHE website or contact your local health department if you are unsure if you should self-quarantine.</p>	If you are waiting for COVID-19 test results, have tested positive for COVID-19, or have symptoms of the disease without a test. Contact your healthcare provider immediately if you are experiencing symptoms severe enough to seek healthcare. If symptoms are mild, stay at home and isolate away from others.

<p>How long is it for?</p> 	<p>Indefinite until otherwise directed.</p>	<p>7, 10 or 14 days after your last exposure depending on whether you have been tested for COVID-19 and preference of local health officer. See shortened quarantine guidance.</p> <p>Once your quarantine period has ended, if you do not have symptoms, you may return to your normal routine.</p>	<p>For most cases, 10 days from the beginning of symptoms OR 72 hours after fever is gone without the use of fever reducing medicine and other symptoms have significantly improved WHICHEVER IS LONGER</p>
<p>What does this mean for my daily life?</p> 	<p>Avoid large gatherings and groups of over 50 people. Try your best to stay 6-feet away from people. Call or video-chat with loved ones, particularly those that are elderly or have underlying health conditions that places them at high-risk.</p> <p>If possible, work from home.</p> <p>Practice good hygiene and avoid shaking hands or touching your face.</p> <p>If you are feeling sick, stay home and if needed, call a healthcare provider.</p>	<p>Stay at home and avoid close contact with others. Do not attend school, work or any other setting where you cannot maintain about a 6-foot distance from other people. However, you must remain asymptomatic and this allowance must be made by the county local health officer and is determined on a case by case basis. Call or video-chat loved ones.</p> <p>For food, medication, and other necessities. - have friends, family, or delivery services deliver supplies.</p> <p>Standard hygiene and precautionary measures like not sharing household items, washing your hands, and cleaning frequently touched surfaces often.</p> <p>If you are in home quarantine, monitor your symptoms and if you become ill and need medical attention call your healthcare provider.</p>	<p>Do not leave your home unless it is in an emergency. If you are in a home with others, stay in a room by yourself. Call or video-chat loved ones.</p> <p>For food, medication, and other necessities. - have friends, family, or delivery services deliver supplies. and try to stock up for the duration of the isolation.</p> <p>Standard hygiene and precautionary measures like not sharing household items, washing your hands, and cleaning frequently touched surfaces often.</p> <p>If you are in home isolation, monitor your symptoms and if you need medical attention, contact with your healthcare provider.</p>

I have traveled recently. How do I know if a travel-related quarantine is required?

Home quarantine for people in Kansas who have:

- Traveled between Aug. 27 and Sept. 23 to French Polynesia and Guadeloupe.
- Traveled on or after Sept. 23 to Grenada.
- Attendance at any out-of-state or in-state mass gatherings of 500 or more where individuals do not socially distance (6 feet) and wear a mask.
- Been on a cruise ship or river cruise on or after March 15, 2020.

Mass gatherings are defined as any event or convening that brings together 500 or more persons in a single room or space at the same time such as an auditorium, stadium, arena, large conference room, meeting hall, theater or any other confined indoor or outdoor space. This includes parades, fairs and festivals. Mass gatherings does not include normal operations of airports, bus and train stations, medical facilities, libraries, shopping malls and centers, or other spaces where 500 or more persons may be in transit. It also does not include typical office environments, schools, restaurants, factories or retail/grocery stores where large numbers of people are present, but it is unusual for them to be within 6 feet of one another for more than 10 minutes.

People who work in critical infrastructure sectors may be allowed a modified quarantine which allows them to continue working during their quarantine period while wearing appropriate Personal Protective Equipment (PPE) as long as they remain symptom free; the decision to allow a modified quarantine is made by the local health officer. Public health, hospitals, clinics, pharmaceutical and food supply, along with others, are defined as critical infrastructure sectors by the Department of Homeland Security <https://www.cisa.gov/critical-infrastructure-sectors>. Employees who were potentially exposed to COVID-19 due to travel should monitor for signs and symptoms of COVID-19, including checking for a fever of 100.4 (F) or higher at least twice per day and monitoring for lower respiratory symptoms including cough or shortness of breath. If symptoms develop during the quarantine period, employees should stop work immediately and notify their employer and public health.

How does KDHE determine which countries or states within the US are part of the list of areas for travel-related quarantine?

For countries outside of the United States, KDHE evaluates rates of diseases in those countries compared to the Kansas rate.

For locations within the United States, KDHE uses a number of sources of data including the number of cases each state has per population to determine whether the rate of disease is higher than the Kansas rate.

Currently, KDHE does not consider travel within Kansas as a criteria for travel-related quarantine except in the case of mass gatherings. However, a local health officer may choose to include this as a criteria so you should be aware of your local isolation and quarantine criteria.

Where is the list maintained and how often is it updated?

KDHE will continually update the list as more information is available. This information will be available on the KDHE COVID-19 website www.kdheks.gov/coronavirus.

What should I do if I am in quarantine for travel-related exposures?

Those who are under a home quarantine should not attend school, work or any other setting where they are not able to maintain about a 6-foot distance from other people. If they are able to attend settings where they can maintain a 6-foot distance from others, then they can attend as long as they remain asymptomatic. However, this allowance must be made by the county local health officer and is determined on a case by case basis.

While at home:

- Monitor your symptoms. Watch for fever, cough or trouble breathing. A symptoms log is included at the end of this document. If symptoms develop during the quarantine period, please notify your local health department.
- If you become ill and need to seek medical attention:
 - Before seeking care, call your healthcare provider and tell them that you have traveled recently or that you have been otherwise exposed to COVID-19.
 - Put on a facemask before you enter the healthcare facility to help prevent further spread to other people in your healthcare provider's office or waiting room.
- If you need to seek medical care for other reasons, such as dialysis, call ahead to your doctor and tell them about your recent travel to an area with widespread or ongoing community spread of COVID-19.
- People under quarantine should consider wearing a facemask while at home because both asymptomatic and symptomatic people can spread the virus and wearing a facemask may help protect the people you live with.
- If possible, separate yourself from other people in your home. Stay in a different room from others and use a separate bathroom, if available.
- Cough or sneeze into the fold of your elbow. Alternatively, cover your mouth and nose with a tissue when you cough or sneeze.
- Wash your hands often with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains 60-95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used if hands are visibly dirty.
- Clean all "high-touch" surfaces every day. High touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, according to the label instructions.

How long is a travel-related quarantine?

The length of a travel-related quarantine 7, 10 or 14 days after your last exposure depending on whether you have been tested for COVID-19 and preference of local health officer. Quarantine would start the day after you return to Kansas. See [shortened quarantine guidance](#). If you do not develop symptoms of COVID-19 during your quarantine period, then you are released from quarantine.

What happens if I develop symptoms consistent with COVID-19 while I am in quarantine?

Symptoms of COVID-19 include a measured fever of 100.4 (F) or higher and lower respiratory symptoms like coughing or shortness of breath.

If the symptoms you develop during your quarantine are **mild** and you normally would not seek healthcare, stay home for:

- 10 days from the onset of symptoms OR
- 72 hours after fever is gone without the use of fever reducing medication AND there has been a significant improvement in symptoms
- WHICHEVER IS LONGER.

If you have shortness of breath and need to call 911, notify the dispatch personnel that you may have been exposed to COVID-19 while traveling. If possible, put on a facemask before emergency medical services arrive.

If you have a question about getting tested for COVID-19, call your health care provider or your local health department.

If you have general questions, contact your local county health department, or KDHE at 877-427-7317.

If I am fully vaccinated, do I need to quarantine due to travel?

Vaccinated persons are not required to quarantine regarding travel if they meet all of the following criteria:

- Are fully vaccinated (i.e., ≥ 2 weeks following receipt of the second dose in a 2-dose series, or ≥ 2 weeks following receipt of one dose of a single-dose vaccine)
- Have remained asymptomatic since the travel

There is currently no time limit on how long fully vaccinated persons are considered immune. Persons who do not meet both of the above criteria should continue to follow current quarantine guidance for travel.

If I develop symptoms consistent with COVID-19 while I am in quarantine, and my test comes back negative, do I still need to finish out my quarantine?

Yes, you will need to finish your quarantine. A negative test result does not allow a patient to end quarantine early. See [shortened quarantine guidance](#).

For what situations are there quarantine recommendations for exposure to a case of COVID-19?

You are a "close contact" if any of the following situations happened while you spent time with a person with COVID-19, even if they didn't have symptoms:

- Were within 6 feet of the person for 10 consecutive minutes or more
- Had contact with the person's respiratory secretions (for example, coughed or sneezed on; kissed; contact with a dirty tissue; shared a drinking glass, food, towels, or other personal items).

- Live with the person or stayed overnight for at least one night in a house with the person.

The chance of spreading the virus is greater the longer an infected person or persons are close to someone. It also matters if the infected person is coughing, sneezing, singing, shouting, or doing anything else that produces more respiratory droplets that contain virus or if there are exposures to more than one infected person. Under these higher risk situations, you may want to consider a close contact someone who has been within 6 feet of an infectious person or persons for 10 cumulative minutes or more in a 24-hour period.

The final decision on what constitutes close contact is made at the discretion of public health.

People who work in healthcare, public health, and law enforcement may be allowed a modified quarantine which allows them to continue working during their quarantine period while wearing appropriate Personal Protective Equipment (PPE) as long as they remain symptom free; the decision to allow a modified quarantine is made by the local health officer. Additionally, people who work in the meat packing industry may be allowed a modified quarantine if the facility that they work for meets the [requirements for modified quarantine](#). Modified quarantine allows these groups to continue working during their quarantine period as long as they remain symptom free; the decision to allow a modified quarantine is made by the local health officer. Employees who were potentially exposed to COVID-19 due to exposure to a case should monitor for signs and symptoms of COVID-19. If symptoms develop during the quarantine period, employees should stop work immediately and notify their employer and public health.

Unvaccinated household contacts that do not have a history of natural infection within the last 6 months and non-household close contacts that do not have a history of natural infection within the last 6 months are recommended to quarantine for 7, 10 or 14 days after your last exposure to the case depending on whether you have been tested for COVID-19 and preference of local health officer.

Unvaccinated household contacts and unvaccinated non-household close contacts (with evidence of previous infection within 6 months of the current exposure supported by a positive PCR or antigen test):

- 1) do not have to quarantine if they have remained asymptomatic since their exposure,
- 2) are recommended to get tested via a PCR or antigen test 3-5 days after their exposure to the case while the case was infectious (3-5 days from initial exposure for household contacts), and again 7-10 days after their exposure (7-10 days from initial exposure for household contacts) and
- 3) they should mask in indoor public settings for 14 days after their last exposure.

This testing recommendation is aimed at identifying cases quickly. A case is considered infectious two days before the onset of the first symptom. If the case is asymptomatic, go back two days from when the positive sample was taken. However, the close contact with a history of natural disease does not have to isolate at home while waiting for results if they do not have symptoms.

Fully vaccinated household contacts and fully vaccinated non-household close contacts:

- 1) do not have to quarantine if they have remained asymptomatic since their exposure,

2) are recommended to get tested via a PCR or antigen test 3-5 days after their exposure to the case while the case was infectious (3-5 days from initial exposure for household contacts), and again 7-10 days after their exposure (7-10 days from initial exposure for household contacts) and

3) they should mask in indoor public settings for 14 days after their last exposure.

This testing recommendation is aimed at identifying cases quickly. A case is considered infectious two days before the onset of the first symptom. If the case is asymptomatic, go back two days from when the positive sample was taken. However, the fully vaccinated close contact does not have to isolate at home while waiting for results if they do not have symptoms.

What should I do if I am in quarantine for exposure to a case of COVID-19?

Those who are under a home quarantine should not attend school, work or any other setting where they are not able to maintain about a 6-foot distance from other people. If they are able to attend settings where they can maintain a 6-foot distance from others, then they can attend as long as they remain asymptomatic. However, this allowance must be made by the county local health officer and is determined on a case by case basis.

While at home:

- KDHE recommends that individuals in quarantine after exposure to a suspected or confirmed case of COVID-19 get tested via a PCR or antigen test 3-5 days after exposure and re-tested 7-10 days after exposure. A negative test result does not allow a patient to end quarantine early. See [shortened quarantine guidance](#). This testing recommendation is aimed at identifying cases quickly. If the person in quarantine tests positive, their quarantine period would end and their isolation period would begin.
 - Individuals that are a close household contact to a suspected or confirmed case of COVID-19 should get tested 3-5 days after their initial exposure to the case while the case was infectious, and again 7-10 days after their initial exposure. A case is considered infectious two days before the onset of the first symptom. If the case is asymptomatic, go back two days from when the positive sample was taken. A negative test result does not allow a close household contact to end quarantine early. See [shortened quarantine guidance](#). This testing recommendation is aimed at identifying cases quickly. If the person in quarantine tests positive, their quarantine period would end and their isolation period would begin.
- Monitor your symptoms. Watch for fever, cough or trouble breathing. A symptoms log is included at the end of this document. If symptoms develop during the quarantine period, please notify your local health department.
- If you become ill and need to seek medical attention:
 - Before seeking care, call your healthcare provider and tell them that you have recently traveled recently or that you have been otherwise exposed to COVID-19.
 - Put on a facemask before you enter the healthcare facility to help prevent further spread to other people in your healthcare provider's office or waiting room.

- If you need to seek medical care for other reasons, such as dialysis, call ahead to your doctor and tell them about your recent travel to an area with widespread or ongoing community spread of COVID-19.
- People under quarantine should consider wearing a facemask while at home because both asymptomatic and symptomatic people can spread the virus and wearing a facemask may help protect the people you live with.
- If possible, separate yourself from other people in your home. Stay in a different room from others and use a separate bathroom, if available.
- Cough or sneeze into the fold of your elbow. Alternatively, cover your mouth and nose with a tissue when you cough or sneeze.
- Wash your hands often with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains 60-95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used if hands are visibly dirty.
- Clean all “high-touch” surfaces every day. High touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, according to the label instructions.

How long is my quarantine if I’m exposed to a case of COVID-19?

An exposure to a case-related quarantine varies whether you have been tested, starting with the day after your last contact with the case. See [shortened quarantine guidance](#). If you do not develop symptoms of COVID-19 during your quarantine period, then you are released from quarantine.

What happens if I develop symptoms consistent with COVID-19 while I am in quarantine?

Symptoms of COVID-19 include a measured fever of 100.4 (F) or higher and lower respiratory symptoms like coughing or shortness of breath.

If the symptoms you develop during your quarantine are **mild** and you normally would not seek healthcare, stay home for:

- 10 days from the onset of symptoms OR
- 72 hours after fever is gone without the use of fever reducing medication AND there has been a significant improvement in symptoms
- WHICHEVER IS LONGER.

If you have shortness of breath and need to call 911, notify the dispatch personnel that you may have been exposed to COVID-19 while traveling. If possible, put on a facemask before emergency medical services arrive.

If you have a question about getting tested for COVID-19, call your health care provider or your local health department.

If you have general questions, contact your local county health department, or KDHE at 877-427-7317.

If I develop symptoms consistent with COVID-19 while I am in quarantine, and my test comes back negative, do I still need to finish out my quarantine?

Yes, you will need to finish your quarantine. A negative test result does not allow a patient to end quarantine early. See [shortened quarantine guidance](#).

Do I need to be in isolation if I am waiting for test results?

Yes, if you are considered a Person Under Investigation

- A Person Under Investigation (PUI) is someone who is suspected of having COVID-19 disease because of symptoms or exposure (travel-related or exposure to a known case). A person who is being tested for COVID-19 because they are suspected of having the disease is required to be in isolation until test results are received.

No, if you are being tested for another purpose, such as a test before surgery (i.e. pre-operative screening test) you are not required to isolate while waiting for results.

Possible outcomes of the test result include:

- If the test result is positive, then the person becomes a case or
- If the test result is negative and the person has a known exposure (travel-related or exposure to a known case), then the person must finish their quarantine period, or
- If the test result is negative and there was no known exposure, then the person is released from isolation.

How do doctors and healthcare professionals determine if I need to be in home-isolation?

If your symptoms are not severe enough to be hospitalized, it may be appropriate for you to isolate at home.








Hospitalized patients can be released to home isolation once their healthcare providers feel that their symptoms no longer need immediate medical attention. For patients not requiring hospitalization any longer, or for people whose symptoms are not severe enough to require hospitalization, public health will assess the suitability of the home environment for home care.

Home isolation may be appropriate for individuals who:

- Are stable enough to receive care at home
- There are appropriate caregivers that are available to monitor you
- There is a separate bedroom where you can recover without sharing immediate space with others
- There is access to gloves and facemask
- All household members including you are able to adhere to necessary precautions

If you live in a group setting or a home setting where the above criteria cannot be met, the local health department will identify where you can be housed until no longer infectious.

What should I do if I am in isolation because I am a lab-confirmed case?

Tips for Home Isolation	
	<p style="text-align: center;">Do not leave your home unless it is in an emergency.</p> <p>Avoid one-on-one interaction within 6-feet of another person. If possible, separate yourself from other people in your home. Stay in a different room from others and use a separate bathroom, if available.</p>
	<p style="text-align: center;">Monitor your symptoms. Watch for fever, cough or trouble breathing.</p> <p>If you become ill and need non-emergency medical attention for any reason, call your healthcare provider. Before you seek care and tell your healthcare provider that you have COVID-19. Use a facemask when you go the healthcare facility.</p> <p style="color: red;">If you are in a medical emergency and need to call 911, notify the dispatch personnel that you have COVID-19. If possible, put on a facemask before emergency medical services arrive.</p>
	<p style="text-align: center;">Make sure you have the supplies and support you need. Do not share household supplies.</p> <p>Arrange for an appropriate caregiver and make sure to avoid direct contact. If possible, try to stock up on necessities like food, medications, water, and other supplies or have it delivered by friends, family, or delivery services. Make sure to keep at least 6-feet apart when accepting deliveries.</p>
	<p style="text-align: center;">Cough or sneeze into the fold of your elbow.</p> <p style="text-align: center;">Alternatively, cover your mouth and nose with a tissue when you cough or sneeze.</p>
	<p style="text-align: center;">Keep your hands clean.</p> <p>Wash your hands often with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains 60-95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry.</p>
	<p style="text-align: center;">Clean all “high-touch” surfaces every day.</p> <p>High touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, according to the label instructions.</p>
	<p style="text-align: center;">Stay connected virtually.</p> <p>Keep in touch with loved ones online or through your phone. Virtual dates, video chats, and online games are great ways to prevent social isolation and keep friends and family updated.</p>

If you have questions, contact your local county health department, or KDHE at 877-427-7317.

What should I do if I am a lab-confirmed case and I am a healthcare/public health/law enforcement worker?

Lab-confirmed cases, including healthcare, public health, and law enforcement workers must be isolated in the same manner as any other lab-confirmed case. In some dire circumstances where there is a shortage of healthcare staff, asymptomatic healthcare staff who are positive may be allowed to continue working if they continue to be asymptomatic, are wearing appropriate PPE, are only working with COVID-19 positive patients and cannot expose other staff, and can ensure that no common spaces will be shared with non COVID-19 staff and patients. This exception must be allowed by the county's local health officer. If you have questions, contact your local county health department, or KDHE at 877-427-7317.

See above for determining if home isolation is recommended and tips for home isolation.

When can I get out of isolation if I am a lab confirmed case?

Most cases are considered no longer infectious and can be released from isolation using this criteria:

- 10 days from the onset of symptoms OR
- 72 hours after fever is gone without the use of fever reducing medication AND there has been a significant improvement in symptoms
- WHICHEVER IS LONGER.

However, severely ill cases who require care in the Intensive Care Unit (ICU) or cases who are severely immunocompromised (i.e. currently receiving chemotherapy or are on immune system suppressing medications) may be infectious longer and can be released from isolation using this criteria:

- 20 days from onset of symptoms OR
- 72 hours after fever is gone without the use of fever reducing medication AND there has been significant improvement in symptoms
- WHICHEVER IS LONGER.

If you have questions, contact your local county health department, or KDHE at 877-427-7317.

Who has the authority to issue and enforce isolation and quarantine orders?

Each county's Local Health Officer, as well as the State Health Officer Dr. Lee Norman, has the authority to issue isolation and quarantine orders. For the most part, people will isolate and quarantine themselves without written orders. However, if someone violates a mandatory isolation or quarantine, a written order may be needed. Local law enforcement may be enlisted to help enforce an isolation or quarantine order.

65-101. Health supervision; investigation of causes of disease, sickness and death; sanitation inspections; prevention of spread of disease; outreach services; rules and regulations; injunction. (a) The secretary of health and environment shall exercise general supervision of the health of the people of the state and may:

- (1) Where authorized by any other statute, require reports from appropriate persons relating to the health of the people of the state so a determination of the causes of sickness and death among the people of the state may be made through the use of these reports and other records;
 - (2) investigate the causes of disease, including especially, epidemics and endemics, the causes of mortality and effects of locality, employments, conditions, food, water supply, habits and other circumstances affecting the health of the people of this state and the causes of sickness and death;
 - (3) advise other offices and agencies of government concerning location, drainage, water supply, disposal of excreta and heating and ventilation of public buildings;
 - (4) make sanitary inspection and survey of such places and localities as the secretary deems advisable;
 - (5) take action to prevent the introduction of infectious or contagious disease into this state and to prevent the spread of infectious or contagious disease within this state;
 - (6) provide public health outreach services to the people of the state including educational and other activities designed to increase the individual's awareness and appropriate use of public and other preventive health services.
- (b) The secretary of health and environment may adopt rules and regulations necessary to carry out the provisions of paragraphs (1) through (6), inclusive, of subsection (a). In addition to other remedies provided by law, the secretary is authorized to apply to the district court, and such court shall have jurisdiction upon a hearing and for cause shown to grant a temporary or permanent injunction to compel compliance with such rules and regulations.

65-122. Schools and child care facilities; non-admissions and exclusions; readmissions, when. No person afflicted with an infectious or contagious disease dangerous to the public health shall be admitted into any public, parochial or private school or licensed child care facility. **It shall be the duty of the parent or guardian, and the principal or other person in charge of any public, parochial, private school or licensed child care facility to exclude therefrom any child or other person affected with a disease suspected of being infectious or contagious until the expiration of the prescribed period of isolation or quarantine for the particular infectious or contagious disease.** If the attending person licensed to practice medicine and surgery or local health officer finds upon

examination that the person affected with a disease, suspected of being infectious or contagious is not suffering from an infectious or contagious disease, he or she may submit a certificate to this effect to the person in charge of the public, parochial, private school or licensed child care facility and such person shall be readmitted to school or to the child care facility.

65-126. Quarantine of city, township or county. Whenever the county or joint board of health or the local health officer neglects to properly isolate and quarantine infectious or contagious diseases and persons afflicted with or exposed to such diseases as may be necessary to prevent the spread thereof, **the secretary of health and environment may quarantine any area in which any of these diseases may show a tendency to become epidemic.**

65-127. Penalty provision. Any person found guilty of violating any of the provisions of K.S.A. 65-118, 65-119, 65-122, 65-123 and 65-126, and any amendments thereto, or failing to comply with any requirements thereof shall be fined, upon conviction, not less than twenty-five dollars (\$25) nor more than one hundred dollars (\$100) for each offense.

65-119. Duties and powers of local health officers; contagious diseases; confidentiality of information; disclosure, when.

(a) Any county or joint board of health or local health officer having knowledge of any infectious or contagious disease, or of a death from such disease, within their jurisdiction, shall immediately exercise and maintain a supervision over such case or cases during their continuance, **seeing that all such cases are properly cared for and that the provisions of this act as to isolation, restriction of communication, quarantine and disinfection are duly enforced.** The county or joint board of health or local health officer shall communicate without delay all information as to existing conditions to the secretary of health and environment. The local health officer shall confer personally, if practicable, otherwise by letter, with the person in attendance upon the case, as to its future management and control. The county or joint board of health or local health officer is hereby empowered and authorized to prohibit public gatherings when necessary for the control of any and all infectious or contagious disease.

(b) Any disclosure or communication of information relating to infectious or contagious diseases required to be disclosed or communicated under subsection (a) of this section shall be confidential and shall not be disclosed or made public beyond the requirements of subsection (a) of this section or subsection (a) of K.S.A. 65-118, except as otherwise permitted by subsection (c) of K.S.A. 65-118.

65-129b. Infections or contagious diseases; authority of local health officer or secretary; evaluation or treatment orders, isolation or quarantine orders; enforcement. (a) Notwithstanding the provisions of K.S.A. [65-119](#), [65-122](#), [65-123](#), [65-126](#) and [65-128](#), and amendments thereto, and any rules or regulations adopted thereunder, in investigating actual or potential exposures to an infectious or contagious disease that is potentially life-threatening, the local health officer or the secretary:

(1) (A) May issue an order requiring an individual who the local health officer or the secretary has reason to believe has been exposed to an infectious or contagious disease to seek appropriate and necessary evaluation and treatment;

(B) when the local health officer or the secretary determines that it is medically necessary and reasonable to prevent or reduce the spread of the disease or outbreak believed to have been caused by the exposure to an infectious or contagious disease, may

order an individual or group of individuals to go to and remain in places of isolation or quarantine until the local health officer or the secretary determines that the individual no longer poses a substantial risk of transmitting the disease or condition to the public;

(C) if a competent individual of 18 years of age or older or an emancipated minor refuses vaccination, medical examination, treatment or testing under this section, may require the individual to go to and remain in a place of isolation or quarantine until the local health officer or the secretary determines that the individual no longer poses a substantial risk of transmitting the disease or condition to the public; and

(D) if, on behalf of a minor child or ward, a parent or guardian refuses vaccination, medical examination, treatment or testing under this section, may require the minor child or ward to go to and remain in a place of isolation or quarantine and must allow the parent or guardian to accompany the minor child or ward until the local health officer or the secretary determines that the minor child or ward no longer poses a substantial risk of transmitting the disease or condition to the public; and

(2) may order any sheriff, deputy sheriff or other law enforcement officer of the state or any subdivision to assist in the execution or enforcement of any order issued under this section.

Shortened Quarantine Guidance

Quarantine is for people who don't currently have symptoms but were exposed to the disease. KDHE continues to recommend a 14-day quarantine following exposure to COVID-19, as the incubation period for this disease is 14 days. CDC has released modified guidance allowing for shorter quarantine periods to increase better compliance with quarantine and increase people getting tested. Local Health Departments may choose to opt into this guidance. For information in your county, please contact your local health department.

[How the Shortened Time Period Works \(Please check in with your local health department for specific information in your community\).](#)

7 Day Quarantine (Includes Testing and No Symptoms)

- After exposure, you monitor yourself for symptoms daily or participate in monitoring by Public Health for 7 full days.
- If you have no symptoms during this time frame, on or after Day 6, you may get a PCR test (antigen and antibody tests are NOT allowed for this purpose).
- If the test is negative, and you remain symptom-free, you can be removed from quarantine on or after Day 8.
- If Testing Results are pending, you must wait until you receive results.

10 Day Quarantine (No Testing and No Symptoms)

- After exposure, you monitor yourself for symptoms daily or participate in Public Health monitoring for 10 full days.
- If you have no symptoms during the 10 days, you can be released from the quarantine without a test on Day 11.

KDHE recommends all exposed people should self-monitor for fourteen (14) days from exposure and contact healthcare provider if symptoms develop. Disease can still develop through day 14.

[Who is Not Eligible for Shortened Quarantine:](#)

- Residents of long-term care and assisted living facilities
- Offender populations in Department of Corrections prisons

[When is it preferable NOT to allow Shortened Quarantine:](#)

KDHE recommends that close contacts of cases infected with variants of the SARS-CoV-2 virus that are known to be more infectious observe the full 14-day quarantine.

How long am I considered immune if I had COVID-19 disease?

Close contacts with evidence of previous infection supported by a positive PCR or antigen test may be exempt from quarantine after re-exposure as long as they remain asymptomatic. This is to be determined by the local health officer based on a possible 6-month period of presumed immunity. If an investigation was done documenting the date that symptoms resolved, or the date isolation measures were discontinued for asymptomatic patients, then the 6-month period can start from that end date. If those dates are not available, then the period will start from the date of the positive laboratory test. A serology or antibody test may not be substituted for a laboratory report of a viral diagnostic test. If the close contact becomes symptomatic, testing via an antigen test is preferred. The sample for the antigen test should be taken within the first 5 to 7 days from symptom onset (depending on the EUA for the test being used).

How long am I considered immune if I had COVID-19 vaccine?

Vaccinated persons with an exposure to someone with suspected or confirmed COVID-19 are not required to quarantine if they meet all of the following criteria:

- Are fully vaccinated (i.e., ≥ 2 weeks following receipt of the second dose in a 2-dose series, or ≥ 2 weeks following receipt of one dose of a single-dose vaccine)
- Have remained asymptomatic since the current COVID-19 exposure

There is currently no time limit on how long fully vaccinated persons are considered immune. Persons who do not meet both of the above criteria should continue to follow current quarantine guidance after exposure to someone with suspected or confirmed COVID-19. Fully vaccinated individuals do not have to quarantine after exposure to COVID-19 as long as they remain without symptoms. It is recommended by the CDC that fully vaccinated individuals get tested via PCR or antigen test 3 to 5 days after exposure to a suspected or confirmed case of COVID-19 even if they do not have symptoms with an additional recommendation by KDHE to re-test 7-10 days after exposure. However, they do not have to isolate at home while waiting for results if they do not have symptoms. Fully vaccinated individuals that do not have symptoms do not need to quarantine but should mask while in public indoor settings for 14 days after exposure.

- Fully vaccinated individuals that are a close household contact to a suspected or confirmed case of COVID-19 should get tested 3-5 days after their initial exposure to the case while the case was infectious, and again 7-10 days after their initial exposure. A case is considered infectious two days before the onset of the first symptom. If the case is asymptomatic, go back two days from when the positive sample was taken. However, the close household contact does not have to isolate at home while waiting for results if they do not have symptoms.
- Fully vaccinated individuals that are close household contacts that do not have symptoms do not need to quarantine but should mask in public indoor settings for 14 days after their last exposure. Their last exposure is the day after when the case is no longer considered infectious.
 - Most cases are considered no longer infectious and can be released from isolation using this criteria:
 - 10 days from the onset of symptoms OR
 - 72 hours after fever is gone without the use of fever reducing medication AND there has been a significant improvement in symptoms

- WHICHEVER IS LONGER.

As an exception to the above guidance, **vaccinated inpatients and residents in healthcare settings should continue to quarantine following an exposure** to someone with suspected or confirmed COVID-19; outpatients should be cared for using appropriate transmission-based precautions. This exception is due to the unknown vaccine effectiveness in this population, the higher risk of severe disease and death, and challenges with social distancing in healthcare settings.

If the exposed person becomes symptomatic, they should be tested via PCR or antigen test. If they had natural disease recently, meaning they had COVID-19 disease in the last few months, an antigen test within the first 5 to 7 days from symptom onset (depending on the EUA for the test they are using) is preferred. Receiving the vaccine does not affect the results of a PCR or antigen test, only an antibody test.

