



Isolation & Quarantine Facts

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To obtain a copy of this document in an alternate format, call (971) 673-1222
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Introduction

To contain the spread of a contagious illness, public health authorities rely on many strategies. Two of these strategies are isolation and quarantine. Both are common public health practices, and both aim to lessen the likelihood that persons with an infection will spread it to others. Both may be undertaken voluntarily or compelled by public health authorities. The two strategies differ in that isolation applies to persons who are known to have an illness, and quarantine applies to those who have been exposed to an illness but who may or may not become ill.

Isolation: for people who are ill

Isolation refers to the separation of persons who have a specific infectious illness from those who are healthy. Isolation allows for the treatment of ill persons, and it protects healthy people from getting sick. People in isolation may be cared for in their homes, in hospitals, or in designated healthcare facilities. In most cases, isolation is voluntary; however, federal, state and local health officials have authority to compel isolation of sick people to protect the public.

Quarantine: for people who have been exposed but are not ill

Quarantine refers to the separation and restriction of movement of persons who, while not yet ill, have been exposed to an infectious agent and therefore may become infectious. Quarantine may be used when:

- A person or a well-defined group of people has been exposed to a highly dangerous and highly contagious disease,
- Resources are available to care for quarantined people and
- Resources are available to implement and maintain the quarantine and deliver essential services.

Quarantine includes a range of disease control strategies that may be used individually or in combination, including:

- Short-term, voluntary home confinement.
- Restrictions on travel by those who may have been exposed.
- Restrictions on passage into and out of an area.

Other measures to control the spread of disease may include:

- Restrictions on the assembly of groups of people (for example, school events).
- Cancellation of public events.
- Suspension of public gatherings and closings of public places (such as theaters).
- Closure of mass transit systems or broad restrictions on travel by air, rail or water.

These measures are used in combination with other public health tools, such as:

- Enhanced disease surveillance and symptom monitoring.

- Rapid diagnosis and treatment for those who become ill.
- Preventive treatment for quarantined individuals, including vaccination or prophylactic treatment, depending on the disease.

Research suggests that quarantine does not have to be absolute to be effective. In some cases partial quarantine (that is, quarantine of many exposed persons but not all of them) can be effective in slowing the rate of the spread of a disease, especially when combined with vaccination.

Quarantine is more likely to involve limited numbers of exposed persons in small areas than to involve large numbers of persons in whole neighborhoods or cities. The small areas may be thought of as "rings" drawn around individual disease cases. Examples of "rings" include:

- People on an airplane or cruise ship on which a passenger is ill with a suspected contagious disease for which quarantine can serve to limit exposure to others.
- People in a stadium, theater or similar setting where an intentional release of a contagious disease has occurred.
- People who have contact with a infected person whose source of disease exposure is unknown—and therefore may be due to a covert release of a contagious disease.

In the event of a large-scale disease outbreak or "pandemic," there may be dozens of small "rings," each one including the people exposed to a single case of disease.

Oregon has the authority to declare and enforce quarantine within its borders. The Centers for Disease Control and Prevention (CDC), through its Division of Global Migration and Quarantine, also is empowered to detain, medically examine, or conditionally release persons suspected of carrying certain communicable diseases.

Implementing isolation and quarantine measures requires the trust and participation of the public, who must be informed about the dangers of contagious diseases subject to quarantine before an outbreak, as well as during an actual event.

Examples of the Use of Isolation & Quarantine

Isolation is a standard procedure used in hospitals today for patients with tuberculosis (TB) and certain other infectious diseases.

During the 2003 global SARS outbreak, patients in the United States were isolated until they were no longer infectious. This practice allowed patients to receive appropriate care, and it helped contain the spread of the illness. Seriously ill patients were cared for in hospitals. Persons with mild illness were cared for at home. Persons being cared for at home were asked to avoid contact with other people and to remain at home until 10 days after the resolution of fever, provided respiratory symptoms were absent or improving. The CDC advised persons who were exposed but not symptomatic to quarantine themselves (i.e. stay at home), monitor themselves for symptoms and seek medical evaluation if symptoms appeared. This was effective in controlling the spread of disease.