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DATE: October 15, 2026

TO: Hospitals, Nursing Homes, Diagnostic and Treatment Centers, Home Care, Hospice, And Local Health Departments

FROM: New York State Department of Health

Health Advisory:

Recommendations for the Management of Healthcare Personnel Exposed to or Infected with a Viral Respiratory Pathogen, Including Work Restrictions

Please distribute immediately to:
Occupational Health, Hospital Epidemiologists, Infection Preventionists, Administrators, Infectious Disease Providers, Medical Directors, Nursing Directors, Risk Managers

Please see updated guidance from the Centers for Disease Control and Prevention (CDC): Infection Control in Healthcare Personnel, Viral Respiratory Infections (https://www.cdc.gov/infection-control/hcp/healthcare-personnel-epidemiology-control/viral-respiratory-infections.html). The New York State Department of Health recommends that hospitals, nursing homes, and diagnostic and treatment centers regulated under Articles 28, 36, and 40 of the public health law follow the updated guidance from CDC regarding infection control recommendations, exclusion, and return to work criteria for healthcare personnel exposed to or infected with certain viral respiratory pathogens.

This recommendation is intended to apply to respiratory viruses such as severe acute respiratory syndrome coronavirus-2 (SARS-CoV-2), influenza, respiratory syncytial virus (RSV), parainfluenza, rhinovirus, human metapneumovirus, adenoviruses, endemic coronaviruses, enteroviruses, and others. This recommendation is NOT intended to apply to viral respiratory pathogens addressed in other CDC guidance (i.e., measles, mumps, rubella, varicella, cytomegalovirus, parvovirus B19, and viral conjunctivitis) or other interim guidance (e.g., Middle East respiratory syndrome coronavirus, novel influenza A viruses).

Healthcare facilities and agencies should balance these recommendations with the need to maintain safe staffing levels, which at times might require a shorter exclusion period than recommended in the CDC guidance. When developing written policies addressing shorter exclusions, consideration should be given to factors such as:

- Presence of fever or a more severe illness possibly associated with viruses having greater epidemiologic and/or clinical significance (e.g., SARS-CoV-2, influenza).
- Presence of symptoms that might increase infectiousness (e.g., copious nasal discharge, frequent cough).
- Results of laboratory testing for SARS-CoV-2, influenza, or other respiratory viruses.
- The patient population served by the healthcare worker and the feasibility of reassigning the worker.
- The ability of the healthcare worker to comply with required source control (e.g., a well-fitting face mask or respirator) during work shifts.

General questions or comments about this advisory can be sent to icp@health.ny.gov.