



How to identify your close contacts

Introduction

- The [Ministry of Health](#) asks that **people who test positive for COVID-19** (PCR, molecular, or rapid antigen test) **inform their close contacts** (also called high-risk contacts) that they could have been exposed to COVID-19. This also applies to people with **symptoms of COVID-19** who are not/cannot be tested. The steps below provide general information to help people determine who their close contacts in the community are and thus who they should notify.
- When considering who to notify, keep in mind that you may not know if someone is at risk for severe disease or if they have someone in their circle who is at risk for severe disease. By notifying your close contacts, you are sharing information about potential exposure to COVID-19 that can help others make decisions about their own health or take additional precautions depending on their health and the health of those around them.
- A variety of factors can increase the risk of serious illness from COVID-19, and general guidance may not always apply well to individual situations. Every individual—whether a member of the public, volunteer, employee, or employer—must take into account their personal risk factors when deciding whether it is safe for them to visit, attend, or work at a particular place. We recommend the [CDC website](#) to all persons wishing to better understand their personal risks from COVID-19 infection.

Note: The following information is not meant as advice on how to avoid close contact or what personal protective equipment should be worn in specific settings. If you have been informed that you are a close contact by Ottawa Public Health as part of case and contact management activities or as part of an outbreak investigation in a highest-risk setting, please follow those instructions.

Steps to determine who close contacts may be

Step 1: Determine the time when someone could have been contagious:

- The contagious period is the time where the infected person could have passed on the virus to another person.
- That period starts 48 hours before their first symptom started, or 48 hours before their positive test date (if they have no symptoms) until they have finished their self-isolation.
 - For example:
 - 1) An individual started to **have symptoms** on January 18 and tested positive on January 20. The contagious period starts on January 16, until the self-isolation period ends.
 - 2) An individual **did not have symptoms** and tested positive on January 5. The contagious period starts on January 3, until the self-isolation period ends.
 - 3) An individual starts to develop symptoms on January 30 and was not tested. The contagious period starts on January 28 until the self-isolation period ends.

Step 2: Determine where the person who had symptoms of COVID-19 or tested positive for COVID-19 went during the contagious period and who they could have had contact with that can be notified:

- Consider home, work, volunteer activities, social activities, social gatherings, extracurricular activities, etc.
- Consider household contacts (people they live with), family, friends, colleagues, teammates, etc.
- It is not always possible to identify everyone who may have been exposed, for example, at a grocery store.

Step 3: Determine if the identified people would be considered “close contacts” of the person who had symptoms of COVID-19 or tested positive for COVID-19 during their contagious period:

- A **close contact** is someone who was within two meters (six feet) of a person who tested positive for COVID-19 during the time they could transmit the virus to others for more than a brief encounter or who had multiple close encounters without adequate protection (see below).
- **Assess the 3 major factors** that together determine if someone is a close contact:
 1. **Was the interaction close?**
 - a) Was **physical distance** (over two metres [six feet]) maintained at **all** times? If not, the interaction was “close”.
 - b) Was there **physical contact** (such as a hug)? If so, the interaction was “close”.
 - c) Was there contact with **bodily fluids** (such as helping a child blow their nose)? If so, the interaction was “close”.
 2. **If the interaction was close, was it more than a brief encounter?**
 - a) The longer an interaction, the more opportunity there is for transmission.
 - b) Was there more than just a brief encounter, such as just passing by someone in a hallway?
 - c) Were there multiple encounters within 24 hours?
 3. **If there was close contact, was there adequate protection to decrease the chance of transmission?**
 - a) It is important to consider what protection was in place during the interaction by thinking about what personal protective equipment was worn by the person who had symptoms or tested positive for COVID-19 and the person they interacted with. If the protection was adequate throughout the interaction(s), there was no close contact.
 - b) **Adequate protection** is when a well fitted and well-constructed mask (medical or 3-layer non-medical mask) is worn properly over the mouth and nose of both the person who had symptoms of COVID-19 or tested positive for COVID-19 **and** the person they interacted with.
 - c) If the person who had symptoms of COVID-19 or who tested positive for COVID-19 was **not** wearing a mask, there is more chance of transmission, including droplets falling in the eyes of the person they interacted with. In this situation, the person they interacted with would need to be properly wearing a well-fitted medical mask and eye protection to be considered adequately protected.
 - d) Properly wearing a mask means that there were no issues with the mask or with the way it was worn. For example, if a mask slips underneath the nose or mouth, there is a tear or rip in a mask, or a mask does not fit properly, it would not provide adequate protection.

Step 4: Notify close contacts

- Once you have determined who is a close contact, provide them with the [High risk contact letter](#) for more information on testing and self-isolation. Contacts can also visit: [What to do if you've been exposed to COVID-19](#).

Note: Given robust public health measures and layering of controls in place, children and staff who may have been exposed to COVID-19 in a school or childcare setting are generally not considered close contacts who require isolation. However, depending on the nature and frequency of the interactions, specific individuals could be considered a close contact. If you are not sure if there may be close contacts to notify in a school or childcare setting or if you have questions about the measures and processes in your school or childcare, please reach out to them for more information.