



EUROPEAN COMMISSION
DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public health
Health security and Vaccination

EU health preparedness:

Recommendations for a common EU
approach regarding isolation of COVID-19
cases and quarantine of close contacts

Agreed by the Health Security Committee on 11
January 2021

A first update was agreed by the Health Security
Committee on 9 February 2022

Introduction

The COVID-19 pandemic continues to pose a major threat to public health, especially with the Omicron variant of concern (VOC) rapidly becoming the dominant variant across the EU/EEA. Targeted isolation and quarantine measures play an effective role in stopping the transmission of the virus if adequately designed, implemented, and followed. Member States have full responsibility to decide on their isolation and quarantine measures according to their socio-cultural, epidemiological and economic situation. They have gradually built a number of practices on COVID-19 related isolation and quarantine measures. However, the circumstances and duration of such measures vary greatly between countries. While in some Member States implementation is on a voluntary basis, in others it is mandatory. Moreover, the duration of isolation and quarantine for contacts varies from 5 to 14 days and there are different criteria in place for ending the isolation measures, which in some cases may be shortened by 3 to 5 days after a negative test¹.

On 07 January 2022, the European Centre for Disease Prevention and Control (ECDC) updated its guidance on quarantine of close contacts to COVID-19 cases and isolation of COVID-19 cases². Given that the Omicron variant of concern is rapidly becoming the dominant variant in the EU/EEA, the guidance aims to provide options for adapting quarantine and isolation, particularly when countries face high or extreme pressure on health systems and other functions in society, including essential services.

It is also important to have clear rules as to the quarantine of contacts and isolation of cases given their vaccination status, since COVID-19 vaccination has also become a variable in the equation. The ECDC updated guidance takes into account the vaccination status of individuals and adjusts the quarantine and isolation measures accordingly.

Additionally, given the pressure on healthcare systems caused by COVID-19 patients in hospitals and in intensive care units (ICU), the ECDC has provided three scenarios that can be used by Member States to consider the appropriate quarantine and/or isolation measures to be taken. The three scenarios are “standard”, “high pressure on healthcare systems and society” and “extreme pressure on healthcare systems and society”.

Aim of this document

The aim of this document is to achieve, via the Health Security Committee (HSC), an EU level agreement for a more coordinated approach to quarantine and isolation measures considering the relevant guidance issued by the ECDC as well as the World Health Organization (WHO), and also based on the current knowledge and evidence available on the Delta and Omicron SARS-CoV-2 VOCs, including transmission risks. The HSC agreed on these recommendations of quarantine and isolation measures on 11 January 2021, and an update of the document was agreed on 9 February 2022.

The focus is on isolation of COVID-19 cases and quarantine of persons that have had contact with a (suspected) COVID-19 case, identified by rigorous contact tracing, as well as international travellers.³ Having a more coordinated EU approach could lead to more targeted and effective measures contributing to the smooth functioning of the internal

¹ Either a negative result from a real time polymerase chain reaction (RT-PCR) test or a rapid antigen test (RAT)

² <https://www.ecdc.europa.eu/en/covid-19/prevention-and-control/quarantine-and-isolation>

³ As defined in recommendation 5 of the Council Recommendation 2020/912

market and cross border travel and increased compliance with respective isolation and quarantine provisions, in full respect of people’s fundamental rights and responsibility of Country Administration.

The content of this document is based on the epidemiologic situation in European countries mid-December 2021 and early January 2022 and the respective isolation and quarantine measures and objectives implemented at that moment. As more knowledge about SARS-CoV-2 and its variants becomes available, the guidance included may be adapted accordingly. The references to national approaches and measures merely function as examples that have been implemented by countries at the time and the content of this document should therefore not be considered exhaustive. A list of all national websites, with latest information on quarantine and isolation measures, can be found in the Annex. It also should be noted that a complete risk reduction cannot be achieved and quarantine and isolation measures should be carefully balanced in the risk management.

Overview of current measures regarding quarantine and isolation

The following table gives an overview of the current national measures regarding quarantine and isolation (as of mid-January 2022), and makes a distinction between the individual’s vaccination status. The information stems from the weekly Situation Report on Integrated Situation Awareness Analysis (ISAA), a survey launched with Member States within the Integrated Political Crisis Response (IPCR), the crisis mechanism for supporting the presidency of the Council of the European Union, and complemented with national web-sites. This document includes information from all EU Member States and EEA countries.

Duration of quarantine – N° of days										
Vaccinated contacts					Unvaccinated contacts					
0		5	7	10	0	5	7	10	14	
BE	SE	CZ	HR	AT ⁵	LIE	CZ	EE	AT	LT	MT
CY	SI	EL	IE ⁴	BG		DK	ES	BE	LV	
DE	SK	FI	LU	LT		EL	FR ⁷	BG	NL	
DK	LIE		PL	LV		FI	HU ⁸	CY ⁹	RO	
EE	CH		PT	MT		IT	IE	DE	IS	

⁴ IE: Based on the definition of vaccinated being those that have completed two doses of a two-dose regime, or one dose of a single dose regime (e.g. Janssen vaccine). For those that have received a booster dose more than 7 days previously or have received a primary vaccination and infection since 01 December 2021 the duration of the quarantine is 0 days

⁵ AT differentiates between vaccinated individuals, who have completed the primary series, and fully vaccinated individuals, who have received a booster dose. Fully vaccinated persons do not need to quarantine, if being a contact person

⁷ FR: Quarantine of unvaccinated contacts can be reduced to 7 days with a negative test result

⁸ HU: The length of quarantine and isolation can be shortened to 5 days with a negative RAT result

⁹ CY: The length of the quarantine can be shortened to 7 days with a negative PCR or RAT result

ES			NL ⁶		SE	LU	HR	NO	
FR			RO		SK	PL			
HU			IS		CH	PT			
IT						SI			

Duration of isolation – N° of days												
Vaccinated cases						Unvaccinated cases						
4	5	6	7	10	14	4	5	6	7	10	14	
NO	CZ	LU	BE	AT	BG	NO	CZ	LU	BE	AT	IE	BG
	EL	NO	DK	CY	LV		EL	NO	DK	CY	LT	LV
	SE		ES	DE			SE		ES	DE	PL	MT
	SK		FR ¹⁰	EE			SK		HU	EE	PT	
	LIE		HR	LT			LIE		IE	FI	RO	
	CH		HU	MT			CH		NL	FR	SI	
			IE ¹¹	PL					IS	HR		
			IT	PT								
			NL	RO								
			SI									
			IS									

Bearing in mind the updated recommendations from the ECDC¹², the different measures in place in the Member States and discussions at the group of national scientific advisors, the Health Security Committee adopts the considerations and recommendations outlined in this document.

- Overall, when revising their recommendations on isolation and/or quarantine, countries should consider various elements, including the local epidemiological situation and their testing capacity.

⁶ NL: Vaccinated people having received a booster dose and without symptoms do not have to quarantine

¹⁰ FR: Isolation can be shortened to 5 days with a negative test result and if the person has no symptoms

¹¹ IE: Duration is contingent on resolution of symptoms by day 7 (excluding dry cough and anosmia)

¹² <https://www.ecdc.europa.eu/en/publications-data/guidance-discharge-and-ending-isolation-people-covid-19> ; <https://www.ecdc.europa.eu/en/covid-19-contact-tracing-public-health-management>

- A more pragmatic approach may be required in cases of higher burden. The residual risk of transmission is naturally greater by shortening the isolation and/or quarantine period, but this must be balanced against the socio-economic effects of the pandemic.
- Countries should also consider tailoring their national recommendations according to an individual's vaccination status. The period of isolation may be reduced for those with an appropriate level of protection due to vaccination.
- For the purposes of guidance on isolation or quarantine, *vaccinated* should refer only to persons having received a full primary vaccination course within the last six months or having received a booster dose.

The following sections set out specific recommended actions for isolation measures, quarantine measures for contacts, and cross-border contact tracing. Moreover, a dedicated section sets out recommendations regarding communication approaches that could be taken to inform the public about isolation and/or quarantine measures.

1. Quarantine Measures for Contacts¹³

Quarantine applies to people who have had high-risk exposure contact with a COVID-19 case, and the quarantine time is different among the EU/EEA countries, ranging from 0 to 10 days, and is dependent upon the vaccination status of the contact. Most countries (13 / 30) reported having no quarantine for high-risk vaccinated contacts. Countries should continue to exercise flexibility regarding the quarantine period, according to national guidelines and the development of knowledge in this area. In some Member States, the quarantine period can be reduced after a negative test (PCR or RAT) or be replaced altogether by a test-based regime.

Recommended actions:

- Countries could test contacts (by RT-PCR or RAT) immediately after identification and ensure a **period of quarantine** (starting with the day after the last potentially infectious exposure) for high-risk contacts with a confirmed SARS-CoV-2 positive case, in accordance with national recommendations.
- The period of quarantine should be **at least 5 days** or, according to national preference, and testing should be performed 2-4 days after the negative test result. It should always be accompanied by self-monitoring of symptoms and appropriate precautions (wearing a mask, keeping distance from others, avoiding contact with vulnerable populations, etc.).
- Where countries decide to apply a longer quarantine period, this **could be shortened** in the absence of symptoms if a **test is negative** at a nationally defined point e.g. at 2, 5 or 7 day of quarantine, according to the original quarantine period set and the individual's vaccination status.
- However, countries may consider, for fully **vaccinated** high-risk contacts only that also have received a booster dose, an alternative to quarantine consisting of strict preventive measures (facial mask, keeping distance from others, no contact with vulnerable persons, etc.) for 10 days after the high-risk contact, combined with testing (where possible, preferentially on day 5) and rigorous self-monitoring of symptoms.

¹³ NO has removed the quarantine requirement and recommends a testing regimen instead

- At any point, persons developing symptoms during the quarantine period should be immediately isolated and tested for SARS-CoV-2.
- Early release from quarantine should be assessed on a case-by-case basis for contacts working in critical infrastructures, including with **vulnerable populations or contacts in high risk settings such as long-term care facilities or prisons** or, if nationally defined, after a negative test at the end of quarantine.

2. Isolation Measures

Isolation measures apply to confirmed, positive COVID-19 cases. The duration of isolation is different among the EU/EEA countries, ranging from five to fourteen days and is dependent upon the vaccination status of the confirmed, positive COVID-19 case. Currently, most countries (14 / 30) reported having an isolation period of ten days for vaccinated and unvaccinated confirmed COVID-19 cases. Additionally, most countries reported their isolation period as a baseline; the exact time depends on the severity of the symptoms experienced over this period, thus patients are encouraged to monitor their symptoms constantly. Countries should continue to exercise flexibility regarding the isolation period, according to national guidelines and the development of knowledge in this area. In some Member States, the isolation period can be shortened after a negative test (PCR or RAT), and after the resolution of symptoms.

Recommended actions

- In the case of vaccinated persons, countries should ensure that COVID-19 cases are isolated for a minimum of 5-7 days (or longer, according to the national epidemiological situation), together with clinical improvement (resolution of fever for at least 24h and improvement of symptoms). Testing may be required before ending isolation, or a minimum period without symptoms (two or three days). For unvaccinated persons, isolation should be extended to a minimum of 7-10 days.
- An alternative to ending isolation may be given, where the patient has two consecutive, negative SARS-CoV-2 tests with a minimum interval of 24 hours, together with resolution of fever for 24 hours and clinical improvement of symptoms. It should be noted that this option may not always be viable as persons can continue to tests positive without presenting a risk to others.
- Special provisions may be put in place for more severe cases, decided on a case-by-case, with a longer isolation period after clinical improvement.
- Countries may also apply special provisions for workers in essential services e.g. the medico-social sector if they are asymptomatic.
- Particular attention should be given to **immunocompromised** cases, for which longer isolation periods may be recommended (e.g. 14 days or more), but a case-by-case decision should be made and nationally set recommendations applied.
- Countries should continue to aim for a fast **turn-around-time of 24 hours** (from request to be tested to the result shared with the individual tested and public health officers), in order to ensure the effective implementation of mitigation measures as well as swift contact tracing¹⁴.

¹⁴ In-line with the recommendation for a common EU testing approach, agreed by the Health Security Committee

- Although self-testing is routinely used in some settings, testing by RAT for the purpose of isolation should be performed by a qualified professional. Self-testing by RAT should also not be allowed for releasing individuals from isolation.

3. Cross-Border Contact Tracing

As contact tracing is a key element for the COVID-19 response and is necessary for the rapid identification of contacts of cases, timely and efficient contact tracing procedures whether within borders or across borders should complement the recommendations for isolation and quarantine. The emergence of the Omicron variant of concern underlines the need for all Member States to put in place effective passenger locator forms to stem the spread of COVID-19 and facilitate cross-border contact tracing, in line with the Implementing Decisions 2021/858¹⁵ and 2021/1212¹⁶. ECDC has updated its guidance on contact tracing¹⁷.

Recommended actions

- Countries should ensure the use of existing means, such as the EU-passenger Locator Form Exchange Platform, and procedures in place, namely the **Early Warning and Response System (EWRS)** at EU/EEA level, and the International Health Regulations' (IHR) Focal Points for third countries.
- Countries may consider establishing **multilateral cross-border arrangements**, in particular with neighbouring countries, to ensure the effective exchange of information and data required for isolation and quarantine measures and contact tracing, in particular for border regions. Any data exchange should be fully in line with the **General Data Protection Regulation (GDPR)**.
- Countries may consider setting up contact tracing and warning applications, preferably using the EU-wide system to ensure **interoperability** of these **applications**, through the European Federation Gateway Service (EFGS) in a fully pseudonymised and encrypted way. This would ensure that applications work seamlessly across borders.
- Countries should consider requiring persons travelling to their territory by means of collective transport modes with pre-assigned seat or cabin to submit **Passenger Locator Forms (PLF)** in accordance with data protection requirements. For this purpose, Member States not having developed their own compatible and interoperable PLF, could make use of the common Digital Passenger Locator Form developed by the EU Healthy Gateways¹⁸. Member States should also consider joining the PLF Exchange Platform to enhance their cross-border contact tracing capabilities for all transport modes. The integration of PLF exchanged data on the EWRS selective exchange is under preparation to facilitate cross-border contact tracing.

¹⁵ http://data.europa.eu/eli/dec_impl/2021/858/oj

¹⁶ http://data.europa.eu/eli/dec_impl/2021/1212/oj

¹⁷ <https://www.ecdc.europa.eu/en/covid-19-contact-tracing-public-health-management>

¹⁹ <https://reopen.europa.eu>

4. Communication

Continuous and clear communication with the population is essential in order to ensure a maximum of compliance with isolation and quarantine measures, to avoid “corona-measures-fatigue” and to minimise the chances of misinformation and myth spreading. Continuous and clear communication should also be maintained on vaccines, vaccine effectiveness and vaccine safety. It is essential that populations are aware that vaccination helps control transmission and reduces severe outcomes from the Delta and Omicron variants, and that booster doses are necessary to increase protection against the Omicron variant.

Recommended actions:

- Countries should provide citizens with clear, up-to-date, transparent, accurate and consistent guidance and information about quarantine and testing measures. Close and continuous engagement with communities is essential for isolation and quarantine measures to be accepted by citizens. It is important to balance very detailed recommendations to make them easy to communicate in order to increase compliance.

Countries should communicate in good time any changes regarding the measures in place on Re-open EU¹⁹. The timely flow of information is crucial for Re-open EU to remain a central and up-to-date information portal about health and travel measures relevant for all EU citizens.

¹⁹ <https://reopen.europa.eu>

Annex – National guidelines on quarantine and isolation

Austria

[https://urldefense.com/v3/https://www.sozialministerium.at/Informationen-zum-Coronavirus/Coronavirus---Fachinformationen.html;!!DOxrgLBm!USKX3Fj4xNhC4-kWZiMcQqWaEmFJPhD4-ueZh0H6z5_JwXCcYzJ4L3kNoqOx66wgDLsm_SWR\\$](https://urldefense.com/v3/https://www.sozialministerium.at/Informationen-zum-Coronavirus/Coronavirus---Fachinformationen.html;!!DOxrgLBm!USKX3Fj4xNhC4-kWZiMcQqWaEmFJPhD4-ueZh0H6z5_JwXCcYzJ4L3kNoqOx66wgDLsm_SWR$)

Belgium

<https://www.info-coronavirus.be/en/contact-tracing/>

Bulgaria

<https://coronavirus.bg/bg/merki/ogranichitelni-merki>

Croatia

https://www.koronavirus.hr/uploads/Postupanje_s_oboljelima_bliskim_kontaktima_oboljelih_i_prekid_izolacije_i_karantene_ver19_b786a2416d.pdf

Cyprus

https://www.pio.gov.cy/coronavirus/uploads/31012022_instructionsforself-isolatingathome_closecontacts.pdf

<https://www.pio.gov.cy/coronavirus/uploads/Revised%20guidelines%20for%20confirmed%20COVID-19%20cases%2024012022.pdf>

Czech Republic

<https://covid.gov.cz/en/situations/infection-and-general-measures/quarantine>

<https://covid.gov.cz/en/situations/infection-and-general-measures/isolation>

Denmark

https://www.sst.dk/en/English/Corona-eng/Symptoms_tested-positive-or-a-close-contact

Estonia

<https://www.kriis.ee/en/crisis-management-qa/crisis-management/current-restrictions#close-contacts>

Finland

<https://thl.fi/en/web/infectious-diseases-and-vaccinations/what-s-new/coronavirus-covid-19-latest-updates/transmission-and-protection-coronavirus/quarantine-and-isolation>

France

[https://www.diplomatie.gouv.fr/en/coming-to-france/coming-to-france-your-covid-19-questions-answered/isolation-testing-attending-events-what-are-the-rules-in-france/#:~:text=You%20must%20isolate%20for%207%20\(full\)%20days%20as%20of%20the,are%20infected%20and%20must%20isolate](https://www.diplomatie.gouv.fr/en/coming-to-france/coming-to-france-your-covid-19-questions-answered/isolation-testing-attending-events-what-are-the-rules-in-france/#:~:text=You%20must%20isolate%20for%207%20(full)%20days%20as%20of%20the,are%20infected%20and%20must%20isolate)

Germany

https://www.rki.de/DE/Content/InfAZ/N/Neuartiges_Coronavirus/Kontaktperson/Grafik_Kontakt_allg.pdf?__blob=publicationFile

Greece

Hungary

<https://www.nnk.gov.hu/index.php/koronavirus-tajekoztato/567-eljarasrend-a-2020-evben-azonositott-uj-koronavirussal-kapcsolatban>

Ireland

<https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/guidance/contacttracingguidance/National%20Interim%20Guidance%20for%20contact%20tracing.pdf>

Italy

<https://www.salute.gov.it/portale/nuovocoronavirus/dettaglioFaqNuovoCoronavirus.jsp?lingua=english&id=230#11>

Latvia

<https://covid19.gov.lv/en/covid-19/safety-measures/self-isolation>

Lithuania

<https://koronastop.lrv.lt/en/news/self-isolation-requirement-reduce-to-seven-days-for-incoming-travellers>

Luxembourg

<https://legilux.public.lu/eli/etat/leg/loi/2020/07/17/a624/consolide/20220115>

<https://covid19.public.lu/fr/contact-tracing.html>

https://www.chd.lu/wps/portal/public/Accueil/TravailALaChambre/Recherche/RoleDesAffaires!/ut/p/z1/ldDBDoIwDAbgZ-EJVjoYchwgzCBo2LKBuxhOhETRg_H5NcSDekDtrcn3_2nKPOuYn_rbOPTX8Tz1x8e-9_-KAUDpXIKtEUFS7IxWgkMdsnYG8DYSMo0ZB6AdMv9_rXpt_wC8Mv1LfMzKbBwWkUIqzxFUNR_s6jyMgQz_BJQ0EWC1rhJrtpxS8QRLP_h2xeVkbQejGmQQ3AFRPgV6/#

Malta

<https://deputyprimeminister.gov.mt/en/health-promotion/covid-19/Pages/covid-case-data.aspx>

Netherlands

<https://www.government.nl/topics/coronavirus-covid-19/tackling-new-coronavirus-in-the-netherlands/self-quarantine/self-quarantaining-or-self-isolating-due-to-coronavirus>

Poland

<https://www.gov.pl/web/coronavirus/current-rules-and-restrictions>

Portugal

<https://www.sns24.gov.pt/tema/doencas-infecciosas/covid-19/isolamento/#sec-0>

Romania

Slovakia

<https://korona.gov.sk/en/>

https://www.uvzsr.sk/en/index.php?option=com_content&view=article&id=36&Itemid=13

Slovenia

<https://www.gov.si/en/topics/coronavirus-disease-covid-19/>

Spain

<https://www.sanidad.gob.es/profesionales/saludPublica/ccayes/alertasActual/nCov/ciudadania.htm>

Sweden

<https://www.folkhalsomyndigheten.se/the-public-health-agency-of-sweden/communicable-disease-control/covid-19/how-to-protect-yourself-and-others-from-being-infected-with-covid-19/how-long-should-i-stay-at-home/>

Liechtenstein**Iceland**

<https://www.covid.is/sub-categories/quarantine>

Norway

<https://www.helsenorge.no/en/coronavirus/quarantine-and-isolation/>

Switzerland

<https://www.bag.admin.ch/bag/en/home/krankheiten/ausbrueche-epidemien-pandemien/aktuelle-ausbrueche-epidemien/novel-cov/isolation-und-quarantaene.html>