

Contact Tracing and Affiliate Notification Program

As the COVID-19 landscape has evolved, we have updated our contact tracing process for the spring 2022 semester. Here is a summary of our recent changes, which will impact all members of the community.

- Individuals who test positive and/or submit a Self-Report form indicating that they have had a campus presence will **receive an email to their AU email account from the Affiliate Notification Team** as soon as a case is generated for them. This process is automated to ensure that every person with a campus presence who tests positive for COVID-19 will receive timely information on self-isolation and relevant campus resources.
- Individuals who test positive **must report** AU community close contacts via the Self-Report form.
- Close contacts will be notified of their potential exposure via email. They will receive information on their potential exposure date, testing and self-monitoring requirements, and additional campus resources.
- Contact tracing notifications will be made **to close contacts only**. (We will no longer be sending proximity notifications, as the data shows that classroom transmission is low.)

Overview

A key tool in mitigating the spread of COVID-19 in our community is rapid case identification and contact tracing. In coordination with DC Health, American University has implemented an Affiliate Notification Program. The goal of this program is to ensure the timely identification of community member contacts when there is a confirmed case within the AU community so that these contacts can test and self-monitor symptoms in accordance with [DC Health guidelines](#). AU community members with a physical presence on the university premises and have potential contact with other AU students, faculty, or staff will be part of this program. These efforts do not replace the contact tracing program administered by DC health officials (DC Health), who remain responsible for complete contact tracing efforts throughout the DC community at-large.

Process

If you test positive for COVID-19 and are an AU faculty, staff, or student with a physical presence on campus, you will receive a communication from the Affiliate Notification Team. Here is a brief overview of what to expect during each phase of the process:

1. Case Identified

We will be notified of your positive test result when you submit the [Self-Report form](#). If you take a test through AU's testing program, we will automatically be notified if you test positive.

2. Case Opened

If you have had a physical presence on campus, you will receive an email to your AU email account from covidnotification@american.edu with information and resources on self-isolation and instructions on how to report your close contacts to us, if you have not already.

3. Tracing

A case coordinator will review your self-reported close contacts and will contact you via phone if they have any questions.

4. Notification to affiliate contacts

A case coordinator will email any close contacts identified during the tracing phase and provide them with written guidelines for self-monitoring symptoms and post-exposure testing. Your close contacts will be notified of their date of potential exposure but identifying information about you will not be shared.

5. Coordination with DC Health

Select information gathered by your case coordinator will be shared with DC Health to assist their contact tracing efforts. You should expect DC Health to contact you to identify additional contacts and to provide guidance on when you may end isolation.

Questions regarding the Affiliate Notification Program can be sent to covidnotification@american.edu, or a member of the team can be reached at 202-885-7950.

Definitions

Close contact: Someone who was within six feet of an infected person for at least 15 minutes over a 24-hour period, starting from two days before illness onset (or for asymptomatic infected people, two days prior to positive test collection) until the time the infected person is isolated.

Exception to close contact definition in schools (Pre-K-12th Grade and Adult Education): In the indoor classroom setting, the close contact definition excludes students who were three to six feet away from an infected fellow student where both students were engaged in consistent and correct use of well-fitting face masks AND other layered prevention strategies were in place (such as universal mask wearing regardless of vaccination status, physical distancing, and increased ventilation).

Continuous Close Contact (Ongoing Exposure): An individual who has repeated or continuous close contact with someone who has tested positive for COVID-19. This is often due to a shared household setting or caregiver arrangement where separation from the positive individual is not feasible.

Proximity Contact: An individual who does not meet the definition of a close contact but is known to have shared a physical setting for a prolonged period of time with someone during the time they may have been infectious.

Note: Individuals in this category are at very low risk of contracting COVID-19, and do not need to quarantine but are recommended to get tested out of an abundance of caution and as part of the university's surveillance testing strategy.

Fully Vaccinated: An individual is considered fully vaccinated at day 14 after completion of a COVID-19 vaccination series (after the second dose of a two-dose series, or after one dose of a single-dose vaccine).

PCR/NAAT Test: PCR (or NAAT) tests look for pieces of genetic material of SARS-CoV-2, the virus that causes COVID-19, in the nose, throat, or other areas in the respiratory tract to determine if the person has an active (current) infection. In communities where transmission rates are low and mitigation efforts are effective, PCR testing is more reliable at detecting active infection.

Antigen Test: Antigen tests look for pieces of proteins that make up the SARSCoV-2 virus, the virus that causes COVID-19, to determine if the person has an active (current) infection. For someone with symptoms, it can be used as a point-of-care test to quickly determine who has an active infection. With the current evidence, DC Health does not recommend that antigen tests be used for screening people with no symptoms or known exposures because they have lower sensitivity than PCR tests.

Infectious Period/Contact Tracing Window: The period of time when an infected person can spread COVID-19, starting from 48 hours (or two days) before the person has any symptoms or tests positive for COVID-19.

Incubation Period: The time period between when someone is exposed to an infectious agent and when the first symptoms appear. The incubation period is different for every pathogen. The incubation period for COVID-19 can be as little as two days and as long as 14 days. This is the reason why 14 days has been used as the recommended length of quarantine time for someone who has been exposed to COVID-19.

Isolation: Isolation separates sick people who have tested positive for COVID-19 from people who are not sick to minimize the spread of the virus.

Quarantine: Quarantine is used to separate someone who might have been exposed to COVID-19 and may develop illness away from other people. Quarantine helps prevent spread of disease that can occur before a person knows they have the virus.