

Category	Description	Actions for the Case or Contact	Actions for health providers	
Healthcare workers who are cases or contacts should follow instructions from their employer and/or refer to Guidance for return to work for healthcare workers .				
Not a contact	General public and surveillance testing	<ul style="list-style-type: none"> Asymptomatic: self-monitor for symptoms Symptomatic: test with a rapid antigen test (RAT). Stay at home until 24 hours after symptoms resolve. If RAT is negative and symptoms persist/worsen, test again with a RAT 48 hours after the negative test. If symptoms resolve, no need for a further test 	<ul style="list-style-type: none"> None 	
Close contact	Household contacts: <ul style="list-style-type: none"> normally share a residence with case (either on a permanent or part time, or shared custody basis), and spent at least one night or day (more than 8 hours) in that residence while case was infectious includes shared houses and flats, travellers in shared holiday accommodation (e.g., hotel room or campervan) don't normally reside with the case but have spent a night together in the same room 	<ul style="list-style-type: none"> Test with a RAT each day for five (5) days, from the day that the first case in the household tests positive Wear a mask outside home for duration of testing particularly around vulnerable people (e.g., elderly or immunocompromised), on public transport or in crowded indoor places Continue with daily life provided no symptoms and a negative RAT result each day for 5 days If symptomatic, continue with daily tests up to 5 days and if all tests negative no need for further tests; stay at home until 24 hours after symptoms resolve If unable or unwilling to test, stay at home for 5 days Avoid or minimise contact with the case(s) in the household as much as possible whilst they are isolating If final daily test is negative, but newly symptomatic, recommend daily RATs continue until symptoms resolve or up to a maximum of a further 5 days. Stay at home until 24 hours after symptoms resolve If any RAT result is positive, commence 7 days self-isolation as a case (from date symptoms developed or date of test if asymptomatic, whichever comes first) If a positive case enters a household partway through the case's isolation period (e.g., student returning from hostel to home, or shared care situations), the new household contacts should test for 5 days from the date of entry of the case (5 days from exposure) Daily testing does not restart if additional members of the household are identified as cases within the initial case's 7-day isolation period If a new case is identified in the household: <ul style="list-style-type: none"> ≤10 days of the initial case being released from isolation: other household contacts do not need to test daily for 5 days. If symptoms develop, stay home and test. If test is negative, recommend RATs continue daily until symptoms resolve or up to a maximum of a further 5 days. Stay at home until 24 hours after symptoms resolve >10 days after the initial case was released from isolation: other household contacts (except those who became cases) do need to test daily for 5 days 	<ul style="list-style-type: none"> Facilitate access to antiviral therapeutics, including in advance where appropriate 	
	Cases with an onset of COVID-19 infection within the last 28 days , are not considered household contacts and are not recommended to test. If ≥29 days since the onset of COVID-19 infection and someone in household tests positive, then recommend testing daily for 5 days as a household contact.			
		All other close contacts: <ul style="list-style-type: none"> live in same group accommodation with case¹ had contact with case during their infectious period 	<ul style="list-style-type: none"> Known contacts notified directly by the case, their workplace or education settings; unknown contacts may be notified by Bluetooth Self-monitor for symptoms for 10 days If symptoms develop at any time during the 10 days, stay at home and test with a RAT immediately. If test is negative, recommend RATs continue daily until symptoms resolve or up to a maximum of 5 days. Stay at home until 24 hours after symptoms resolve 	<ul style="list-style-type: none"> None
Case	Confirmed case if PCR or Probable case if RAT	<ul style="list-style-type: none"> PCR or RAT positive; upload RAT result to My Covid Record (both positive and negative results must be recorded) Notified by text message; complete online contact tracing form if possible Day 0 is when symptoms developed or date of test if asymptomatic, whichever comes first Self-isolate at home for 7 days Avoid contact with other household members if possible during isolation; wear mask and physical distance in shared spaces Self-release after completing 7 days isolation; do not re-test prior to release If still have symptoms after 7 days, stay at home until 24hrs after symptoms resolve 	<ul style="list-style-type: none"> Phone interviews for priority populations/incomplete forms/those who are unable to complete online contact tracing form Manage complex case investigations and high-risk exposure events Consider alternative isolation accommodation (AIA) for case(s) in exceptional circumstances Facilitate access to antiviral therapeutics 	
	If ≤28 days following onset of infection, no further self-testing for COVID-19 is recommended. If ≥29 days since previous infection take a RAT if new COVID-19 like symptoms develop or if identified as a household contact . Reinfection is unlikely but possible with new variants. If RAT is positive, follow usual advice for cases. If RAT is negative but symptoms persist, repeat RAT 48 hours later. If RAT is negative, not a new case; stay at home until 24 hours after symptoms resolve.			

¹ e.g. halls of residences, boarding houses, hostels, backpackers, transitional housing or similar

Contact risk assessment

The following table should be used to guide assessment and management of contacts exposed during a case's infectious period. **The infectious period starts two days before their symptom onset or the date they were tested (if they have no symptoms) and finishes once they have completed their isolation.**

The following table is **NOT** for:

- household contacts - **are defined and managed as per page 1**
- contacts who work in healthcare - refer to [Guidance for return to work for healthcare workers](#)

NOTE: An individual public health risk assessment should be carried out for contacts in residential facilities including aged care, correctional centres or other settings where cases and contacts interact frequently with people at high risk of severe illness.

	Type of interaction	Examples	Face covering worn by case ²	
			Yes ³	No or unknown
Close range contact (within 1.5m of case)	Direct contact with respiratory secretions or saliva (indoors or outdoors) OR Face to face contact with a case who is forcefully expelling air/secretions FOR ANY DURATION OF TIME REGARDLESS OF FACE COVERING USE	Singing, shouting, coughing, sneezing Active play in close proximity (heavy breathing related to exertion) Kissing, spitting, hongi, sharing cigarettes or vapes	Close contact	Close contact
	Indoor face to face contact for more than 15 minutes	Having a conversation, sitting across a table from someone, eating together, playing together	Not a contact	Close contact
	Non-face to face contact for more than 1 hour in an indoor space	Sitting or playing near someone	Not a contact	Close contact
Higher risk indoor contact (more than 1.5m away from case and no close-range contact)	Indoor contact in a small space without good airflow/ventilation* for more than 15 minutes	Small offices, toilet blocks Close contact businesses such as hairdressers Buses, trains, taxis School classrooms, restaurants, cafes, bars	Not a contact	Close contact
	Indoor contact in a moderate sized space without good airflow/ventilation for more than 1 hour	Bars and pubs, Social gatherings, church sessions Indoor, high intensity sports, Gyms and indoor recreation settings	Not a contact	Close contact
Low risk contact (no close-range contact or higher risk indoor contact)	Large indoor settings (bigger than 300m ²) if none of the criteria above are present	School and community halls, exhibition centres, hardware stores, supermarkets	Not a contact	Not a contact
	Smaller indoor venues (less than 300m ²) with good air flow-ventilation for up to 2 hours	Well ventilated rooms/offices (e.g., windows open)	Not a contact	Not a contact
	Brief indoor contact regardless of distance from case	Conversations <15 mins Passing each other in the corridor, sharing an elevator Collecting takeaways, click & collect services	Not a contact	Not a contact
	Contact in outdoor spaces FOR ANY DURATION OF TIME	Most outdoor recreation activities, including outdoor dining Non-contact outdoor sports, petrol station forecourts	Not a contact	Not a contact

*Good air flow and ventilation is required to prevent virus particles accumulating in an indoor space. Good ventilation/airflow can be achieved by keeping windows open.

²For masks to be effective, it is important they are of sufficient quality (medical or multilayer cloth masks) are worn. Mask breaks are recommended to improve compliance over a workday. Masks should be changed if they become wet or dirty.

³Consistent use of a mask by a case will minimise the likelihood that other people are close contacts. Short time periods without wearing a mask (less than 15 minutes) will not change the categorisation of other contacts in the same space, unless the case was coughing, sneezing or shouting at the time.