STATE OF NEW YORK COUNTY OF _____: DEPARTMENT OF HEALTH

In the Matter of

The Isolation of

[COMMISSIONER/PUBLIC HEALTH DIRECTOR'S] ORDER

Pursuant to Section 2100 of the Public Health Law [and the _____ County Sanitary Code, if applicable]

WHEREAS, 2019-Novel Coronavirus (COVID-19) is an infection associated with fever and signs and symptoms of pneumonia or other respiratory illness, appears to be transmitted from person-to-person predominantly through droplet transmission and, if spread in the population, could have significant public health consequences; and

WHEREAS, on January 30, 2020 the World Health Organization designated the COVID-19 outbreak as a Public Health Emergency of International Concern, advising that further cases may appear in any country; and

WHEREAS, on January 31, 2020, Health and Human Services Secretary Alex M. Azar II declared a public health emergency for the entire United States to aid the nation's healthcare community in responding to COVID-19; and

WHEREAS, on March 13, 2020, President Donald J. Trump declared a national emergency pursuant to Section 501(b) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act; and

WHEREAS, Section 2100 of the Public Health Law mandates that all local health officers, being Commissioners of Health and Public Health Directors, as the case may be, of County Health Departments, guard against the introduction of such communicable diseases as are designated in the State Sanitary Code, by the exercise of proper and vigilant medical inspection and control of all persons and things infected with or exposed to such diseases; and WHEREAS, 10 NYCRR Part 2 establishes requirements related to the isolation of cases and suspected cases of communicable disease, and for the quarantine of persons reasonably determined to have been exposed to a communicable disease; and

WHEREAS, on February 1, 2020, pursuant to 10 NYCRR Section 2.1(a), Dr. Howard A. Zucker, as Commissioner of Health of the State of New York, designated 2019-Novel Coronavirus (COVID-19) as a communicable disease under the State Sanitary Code; and

WHEREAS, on February 6, 2020, the New York State Public Health and Health Planning Council ratified the designation of 2019-Novel Coronavirus (COVID-19) as a communicable disease under the New York State Sanitary Code through the adoption of emergency regulations amending 10 NYCRR Section 2.1; and

WHEREAS, on March 7, 2020, Governor Andrew M. Cuomo, issued an Executive Order declaring a State disaster emergency and that COVID-19 poses a threat to the health and welfare of New York State residents and visitors, with subsequent Executive Orders being issued since aimed to further limit the spread of COVID-19 and/or mitigate the impact thereof; and

WHEREAS, on March 9, 2020, emergency regulations amending Part 2 to clarify, among other things, the authority local health departments have to control the spread of disease, including through isolation and quarantine orders, were adopted by the New York State Public Health and Health Planning Council; and

WHEREAS, the federal Centers for Disease Control (CDC) and New York State Department of Health (NYSDOH) have issued guidance for risk assessment and public health management of persons with potential or diagnosed COVID-19; and

WHEREAS, [Insert LHD Name] has identified you as a person who has, is or reasonably suspected of having, COVID-19, meaning a case or suspect case, as defined in 10 NYCRR Part 2, of COVID-19;

[select clauses as appropriate]

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NOW, THEREFORE, by virtue of the authority vested in me by section 2100 of the Public Health Law of the State of New York and 10 NYCRR 2.29 [and the _____ County Sanitary Code], as [Commissioner/Public Health Director of _____ County], I do hereby:

ORDER that, effective upon your receipt of this order, you are hereby directed to travel, pursuant to the direction of the [insert LHD Name], directly to, if not already located there, the following address or location where you will remain in isolation at [insert home address, or other location identified by the Local Department as suitable for isolation], because you have been identified as a person who has or reasonably suspected of having, COVID-19, meaning a case or suspect case, as defined in 10 NYCRR Part 2, of COVID-19, until [insert end date]. Further, you shall comply with all movement restrictions, conditions and other instructions attached hereto as **Attachment A**, and any additional modifications or additions thereto.

ORDER that upon your arrival at the location designated by this order, you will register with the [insert LHD name], and will comply with all site visits at such location.

ORDER that failure to comply with this health order will subject you to all civil and criminal penalties provided by law. For purposes of civil penalties, each day the order is violated shall constitute a separate violation.

FURTHER, I DO HEREBY give notice that [County may describe any administrative review process to be applied in the event that the person believes that they are not actually subject to the federal quarantine guidance, of for any other reason that may be applicable. Such administrative review is not required].

FURTHER, I DO HEREBY give notice that you have the right to seek judicial review of this Order in the State Supreme Court of the county in which this isolation order has been issued.

FURTHER, I DO HEREBY give notice that any such proceeding may be made by telephonic or video-conferencing means, so that you will not be required to violate this Order by appearing at an administrative hearing or in Court; and

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FURTHER, I DO HEREBY give notice that you have a right to be represented by legal counsel or to have counsel provided and that if you qualify to have counsel provided, such counsel will be made available. Moreover, you may submit to [Insert LHD Name] the addresses and/or telephone numbers of friends and/or relatives you wish to receive notification of your isolation. At your request, the [Insert LHD Name] shall provide notice to a reasonable number of such persons that you are being isolated pursuant to this order.

DATED: _____, NEW YORK , 2020

[Name of Commissioner / Heath Director] [COMMISSIONER OF HEALTH/PUBLIC HEALTH DIRECTOR] COUNTY OF _____

[Counties may wish to adapt the following language into an Order to Show Cause, to be brought before the Supreme Court for that County that directs isolation.]

Attachment A – Mandatory Instructions

County Health Department staff will evaluate whether you can be isolated or quarantined at home. If the County Health Department determines that you do not need to be hospitalized and can be isolated or quarantined at home, you will be monitored by County Health Department staff. You must follow the instructions listed below until the day listed in the order, or until County Health Department staff say that you can return to your normal activities.

Stay home except to get medical care

You must not participate in any activities outside your home, except for getting medical care that is preapproved by the County Health Department. Do not go to work, school, or public areas. If you are leaving your home for pre-approved medical care, seek County Health Department approval for transportation. A private vehicle is preferred, but if not available, follow instructions of the County Health Department.

Separate yourself from other people

Stay in a specific room, except for such reasonable accommodations, such as to use the bathroom or other areas that you can use without coming into contact with other persons in the home. You must remain at least 6 feet away from other people in your home. If the bathroom is shared with others, it must be cleaned after your use, and before a non-infected person uses the facility, in accordance with the instructions below concerning "high-touch" surfaces.

Call ahead before visiting your doctor

If you have a medical appointment, seek pre-approval from the County Health Department. If approved, call the healthcare provider and tell them that you have or may have COVID-19. This will help the healthcare provider's office take steps to keep other people from getting infected or exposed.

Wear a facemask

If at all possible, you must wear a facemask if/when you are required to be around other people (e.g., sharing a room or vehicle) and before you enter a healthcare provider's office. If you are not able to wear a facemask (for example, because it causes trouble breathing or because you cannot obtain one), people who live with you must wear a facemask if they enter your room, if possible.

Cover your coughs and sneezes

Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can; immediately wash your hands with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains at least 60 % alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Use soap and water if hands are visibly dirty.

Clean your hands often

Wash your hands often with soap and water for at least 20 seconds or clean your hands with an alcoholbased hand sanitizer that contains at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Use soap and water if hands are visibly dirty.

Do not touch your eyes, nose, and mouth with unwashed hands.

Do not share personal household items

You must not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people or pets in your home. After using these items, they must be washed thoroughly with soap and water.

Clean all "high-touch" surfaces everyday

Any high-touch surfaces, including counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables, must be disinfected frequently. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, and follow the label instructions.

Monitor your symptoms

Seek prompt medical attention if your illness is worsening (e.g., difficulty breathing). Before seeking care, call your healthcare provider and tell them that you have or may have COVID-19. If at all possible, put on a facemask before you enter the facility. If you are not able to wear a facemask (for example, because it causes trouble breathing or because you cannot obtain one), ask the healthcare facility for one as soon as you can. This will help the healthcare provider's office take steps to keep other people from getting infected or exposed. Before seeking care, notify the County Health Department that you are developing symptoms, and obtain approval for your method of travel.

If you have a medical emergency and need to call 911, notify the dispatch personnel that you have, or are being evaluated for COVID-19. If possible, put on a facemask before emergency medical services arrive.

Discontinuing home quarantine or isolation

The County Health Department will decide on a case-by-case basis whether you can discontinue home quarantine or isolation before the day listed on this order.

Instructions for household members

Give any other members of your household the following instructions:

- Make sure that you understand and can help the patient follow their healthcare provider's instructions for medication(s) and care. Help the patient with basic needs in the home and provide support for getting groceries, prescriptions, and other personal needs. If you are unable to do so, notify the County Health Department and they will assist you in providing these essential services.
- Monitor the patient's symptoms. If the patient gets sick or is getting sicker, call his or her healthcare provider and tell them that the patient has laboratory-confirmed or suspected COVID-19. This will help the healthcare provider's office take steps to keep other people in the office or waiting room from getting infected. Ask the healthcare provider to call the local or state health department for additional guidance. If the patient has a medical emergency and you need to call 911, notify the dispatch personnel that the patient has, or is being evaluated for, COVID-19. In both cases, you must also notify the County Health Department.
- Household members must be separated from the patient as much as possible, and in all cases, must not share a bedroom with the patient. Household members should use a separate bathroom, if available, and if not, must ensure it is disinfected prior to sharing.
- Prohibit visitors who do not have an essential need to be in the home.

- Household members should care for any pets in the home. Do not handle pets or other animals while sick.
- Make sure that shared spaces in the home have good air flow, such as by an air conditioner or an opened window, weather permitting.
- Perform hand hygiene frequently. Wash your hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer that contains at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used preferentially if hands are visibly dirty.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Wear a facemask if you are going to be in the same room as the person under quarantine.
- Wear a disposable facemask and gloves when you touch or have contact with the patient's blood, stool, or body fluids, such as saliva, sputum, nasal mucus, vomit, or urine.
 - Throw out disposable facemasks and gloves after using them. Do not reuse them.
 - When removing personal protective equipment, first remove and dispose of gloves. Then, immediately clean your hands with soap and water or alcohol-based hand sanitizer. Next, remove and dispose of facemask, and immediately clean your hands again with soap and water or alcohol-based hand sanitizer.
- Do not share household items with the patient such as dishes, drinking glasses, cups, eating utensils, towels, bedding, or other items. After the patient uses these items, you must wash them thoroughly.
- Clean all "high-touch" surfaces, such as counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables, every day. Also, clean any surfaces that may have blood, stool, or body fluids on them.
 - Use a household cleaning spray or wipe, according to the label instructions.
- Wash laundry thoroughly.
 - Immediately remove and wash clothes or bedding at high temperature that have blood, stool, or body fluids on them.
 - Wear disposable gloves, if available, while handling soiled items and keep soiled items away from your body. Clean your hands (with soap and water or an alcohol-based hand sanitizer) immediately after removing your gloves.
 - Dry thoroughly using the warmest temperatures recommended on the clothing label.
- Place all used disposable gloves, facemasks, and other contaminated items in a lined container before disposing of them with other household waste. Clean your hands (with soap and water or an alcohol-based hand sanitizer) immediately after handling these items. Use soap and water if hands are visibly dirty.
- Discuss any additional questions with your County Health Department or your healthcare provider.

• The County Health Department will make random visits to ensure the subject of the order is adhering to the quarantine, and to check on their health and well-being. You must cooperate and allow them access for this purpose.

Attachment B – Acknowledgment of Receipt

I hereby acknowledge that I have received and will follow the instructions in the attached order.

Print name:	
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Signed:

Date: _____

This order is effective upon individual delivery to the person who is subject to the order, regardless whether such individual acknowledges receipt and willingness to comply.

Attachment C – Persons Subject to this Order

[List names of persons subject to isolation or quarantine, as applicable, at said location. Delete for individualized orders.]