

NEW MEXICO HEALTH ALERT NETWORK (HAN) ADVISORY

2025-2026 Interim Guidance for the Management of Healthcare Personnel with Acute Viral Respiratory Infections

09/29/2025

Background:

Prior to being disbanded this spring, the federal [Healthcare Infection Control Practices Advisory Committee \(HICPAC\)](#) drafted an updated guideline for healthcare personnel (HCP) with suspected or confirmed viral respiratory infection and submitted it to the CDC in November 2024 for posting to the federal register. While awaiting new federal guidelines, the New Mexico Department of Health (NMDOH) is providing interim guidance for the management of healthcare personnel with acute viral respiratory infections.

Existing Centers for Disease Control and Prevention (CDC) guidance for HCP with COVID-19, last updated in 2022, relies on diagnostic testing and includes up to 10 days of work exclusion depending on whether a subsequent negative test is obtained. While the health impacts of COVID-19 have decreased substantially since the beginning of the pandemic, other clinically significant respiratory viruses, such as influenza and respiratory syncytial virus (RSV), are circulating in addition to SARS-CoV-2. These respiratory viral infections are generally indistinguishable without testing; however, testing may not be available or routinely performed.

NMDOH 2025-2026 interim guidance applies to healthcare personnel (HCP) with respiratory illness due to suspected or confirmed SARS-CoV-2, seasonal influenza, or other common acute viral respiratory infections regardless of diagnostic confirmation. It does not apply to novel respiratory pathogens, including avian influenza, for which other public health guidance is available.

Recommendations for Healthcare:

HCP with suspected or confirmed viral respiratory infection should not return to work until:

- at least 3 days have passed from symptom onset or first positive test (if asymptomatic), AND
 - they have been fever-free for at least 24 hours without the use of antipyretics, AND
 - symptoms are improving, AND
 - they feel well enough to return to work
- **HCP should wear a facemask for source control** in all patient care and facility common areas through the end of day 7.
 - Testing is not required to return to work

HCP with exposure to confirmed viral respiratory infection should:

- return to work immediately wearing a facemask for source control in all patient care and facility common areas from the first day of exposure through the end of day 7 after last exposure, AND
- monitor for development of signs or symptoms of infection, AND
- report development of symptoms and follow return to work instructions for HCP with a respiratory infection.

Additional Considerations:

- Encourage HCP to stay up to date on vaccinations and follow healthcare facility policies for source control and use of personal protective equipment (PPE).
- HCP should practice good hand hygiene, respiratory etiquette, and follow standard precautions before and after each patient encounter.
- Taking antivirals for acute respiratory infection should not reduce the duration of work exclusion or use of source control.
- Moderately or severely immunocompromised HCP with respiratory disease might shed virus for prolonged periods. Consider consultation with occupational health prior to returning to work, occupational health may consider a test-based strategy to determine when these HCP may return to work and/or extended use of source control.
- Nursing homes should continue to follow [CDC guidance for managing HCP with SARS-CoV-2 infection or exposure](#).

Additional Resources:

- [NMDOH 2025-2026 Interim Work Exclusion Guidance for HCP With Acute Viral Respiratory Illness](#)
- [Infection Prevention and Control Strategies for Seasonal Influenza in Healthcare Settings | Influenza \(Flu\)](#)
- [Preventing Transmission of Viral Respiratory Pathogens in Healthcare Settings | Infection Control](#)
- [Management of Potentially Infectious Exposures and Illnesses](#)
- [Viral Respiratory Pathogens Toolkit for Nursing Homes | LTCFs | CDC](#)
- [Infection Control Guidance SARS-CoV-2](#)

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