



# Frequently Asked Questions about COVID-19 and the Omicron Variant

**Q** What is the difference between quarantine and isolation and what does it matter?

**A** **Isolation** is the restriction of movement of a person with a diagnosis or symptoms of particular disease. **Quarantine** is the restriction of movement of a person who does not have a diagnosis or symptoms of a particular disease. These terms have been used interchangeably in the media, however they are two separate disease control strategies. Because the [current guidance](#) from the Centers for Disease Control and Prevention (CDC) makes a distinction between quarantine and isolation, it is important that public health practitioners, providers, and the media use these terms correctly to avoid confusion.

**Q** If I was exposed to someone infected with COVID-19, do I need to stay home or quarantine?

**A** The United South and Eastern Tribes Tribal Epidemiology Center (USET TEC) has reviewed the current CDC guidance and feels that due to the high-risk nature of our population, CDC measures are not sufficient to protect Tribal communities from COVID-19. We are [recommending](#) Tribal Nations maintain a 10-day quarantine for **all** close-contact exposures, regardless of vaccination status due to the high rate of breakthrough infections in vaccinated individuals from the Omicron variant.

**Q** What is the point of getting vaccinated if you can still get sick?

**A** Current vaccines are expected to protect against severe illness, hospitalizations, and deaths due to infection with the Omicron variant. However, breakthrough infections in fully vaccinated people are still likely to occur. With other variants, like Delta, vaccines have remained effective at preventing severe illness, hospitalizations, and death. The recent emergence of Omicron further emphasizes the importance of vaccination and boosters.

Breakthrough infections occur for several reasons. Everyone does not reach the same level of protection from the vaccine and experiences varying levels of vaccine efficacy. Healthy adults over the age of 18, in most cases, will reach the maximum vaccine efficacy of the vaccine received. If the person is over the age of 65, immunocompromised, or has certain health conditions, the level of protection or vaccine efficacy decreases.

**Q** What do the terms 'up-to-date' and 'fully vaccinated' mean with regard to COVID-19 vaccination?

**A** The CDC's definition of 'fully vaccinated' currently remains as anyone who has received either a two-dose mRNA vaccine (Pfizer-BioNTech or Moderna) or the one-dose Johnson & Johnson vaccine. In addition, the CDC has announced it will now use the term 'up to date' for individuals who have received all COVID-19 doses that they are eligible for, however, this terminology fails to capture the necessity of booster shots due to the Omicron variant.

For this reason, the USET TEC recommends that member Tribal Nations strongly consider changing their definition of "fully vaccinated" to include a primary series plus booster doses, and taking necessary measures to prioritize the uptake of booster doses among their citizens.



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## **Q** When should I get tested, and what type of test do I need?

**A** Two types of tests can test for current COVID-19 infections, [nucleic acid amplification tests \(NAATs\)](#), which are a type of molecular test, and [antigen tests](#). NAAT and antigen tests can only tell you if you have a current infection. Additional tests would be needed to determine if Omicron caused your infection. Visit your [state](#), [Tribal](#), local, or health department's website to look for the latest local information on testing.

[Self-tests](#) can be used at home or anywhere, are easy to use, and produce rapid results. If your self-test has a positive result, stay home or isolate for 10 days, wear a mask if you have contact with others, and call your healthcare provider. Call your healthcare provider or state health department if you have any questions about your self-test result.

## **Q** Why do I still need to wear a mask if I'm vaccinated?

**A** Vaccines are a great way to prevent infection, but they do not provide 100% protection. Wearing a mask, combined with vaccination, increases the level of protection both for you and for those around you. Therefore, it is recommended to wear a mask in public indoor settings in substantial or high community transmission areas, even if vaccinated.

## **Q** What is the best mask to wear for protection against Omicron?

**A** Masks are designed to contain your respiratory droplets and particles. They also provide you with some protection from particles expelled by others. When selecting a mask remember, choose a mask that:

- Has two or more layers of washable, breathable fabric.
- Completely covers your nose and mouth.
- Fits snugly against the sides of your face and doesn't have gaps.
- Has a nose wire to prevent air from leaking out of the top of the mask.

When determining if children and people with certain disabilities should wear a mask, assess their ability to:

- Wear a mask correctly.
- Avoid frequent touching of the mask and their face.
- Limit sucking, drooling, or having excess saliva on the mask.
- Remove the mask without assistance.

## **References**

Self WH, Tenforde MW, Rhoads JP, et al. Comparative Effectiveness of Moderna, Pfizer-BioNTech, and Janssen (Johnson & Johnson) Vaccines in Preventing COVID-19 Hospitalizations Among Adults Without Immunocompromising Conditions – United States, March–August 2021. *MMWR Morb Mortal Wkly Rep* 2021;70:1337–1343. DOI: <http://dx.doi.org/10.15585/mmwr.mm7038e1external icon>.