

Frequently Asked Questions about COVID-19

- **What are the symptoms of COVID-19?**

Symptoms are quite variable, ranging from mild cough and cold to high fever, cough, shortness of breath and chest pain. Rarely children may have GI symptoms.

- **How is Novel Coronavirus transmitted?**

COVID-19 disease caused by SARS-CoV-2 virus is mainly transmitted through close person-to-person contact (within 6 feet) by large respiratory droplets. The virus is mostly spread through coughing & sneezing which can spread these large droplets and infect nearby people by entering their noses, mouths or lungs.

Although respiratory droplets are the main route of transmission, touching one's face, eyes or nose with contaminated hands increases one's chances of getting sick (as with many other viruses). Forceful and deep coughing may also produce smaller particles (aerosols) that can enter the lungs more efficiently and faster.

According to one study, aerosols can remain in the air for at least 3 hours. Viral particles were detected on cardboard for up to 8 hours, and on plastic and stainless steel for up to 72 hours.

<https://www.nejm.org/doi/full/10.1056/NEJMc2004973>

Although people are most contagious when they have symptoms (such as fever and cough), exposed asymptomatic people may also shed the virus and may be a source of infection to a lesser degree.

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/stop-the-spread-of-germs.pdf>

- **Is the drinking water safe?**

Novel Coronavirus has not been detected in the drinking water supply and it is safe to drink water.

<https://www.epa.gov/coronavirus/coronavirus-and-drinking-water-and-wastewater>

- **Is my pet at risk for Novel Coronavirus infection?**

There is no data that shows that any pets, including dogs and cats, are affected by SARS-CoV-2 virus. Given that animals can spread other diseases to people however, it is best to practice healthy habits around pets.

<https://www.cdc.gov/healthypets/publications/stay-healthy-pets.html>

- **What is the best way to clean or disinfect?**

-Hand hygiene: If your hands are visibly soiled, wash with soap and water for at least 20 seconds. Otherwise use hand sanitizers that contain 60-95% alcohol.

-Surfaces: If you are not able to wash a surface with water & soap, sanitizers containing 70-95% alcohol or a variety of disinfectants (such as diluted household bleach) may be used based on the type of surface (see CDC website below).

-Bleach: Be aware that bleach is an irritant and may damage some household objects such as electronics, driver's licenses, etc. It should not be mixed with other disinfectants such as ammonia. Always read the label's "Precautionary Statement", use gloves and eye protection, and keep bleach away from children.

-Wipes: Do not use disinfectant wipes to clean your hands nor as baby wipes.

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html>

<https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfection.html>

<http://npic.orst.edu/ingred/ptype/amicrob/covid19.html>

<https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2>

- **What are the criteria for testing?**

Testing availability for the SARS-CoV-2 virus continues to be limited with criteria for screening frequently updated by the Department of Health & CDC. The goal is for testing to be expanded to include more people but the current focus is on those who are symptomatic and at high risk.

Also taken into consideration when deciding if testing is necessary are the following challenges:

- A negative test may be false negative, especially in the early stage of infection.
- A positive test may not change the treatment plan in most healthy and young patients with mild to moderate symptoms.
- Testing must be done at special centers which poses a challenge for social distancing.

Testing priorities based on CDC recommendations include:

Priority 1:

- Hospitalized patients
- Healthcare facility workers with symptoms

Priority 2:

- Patients in long-term facilities with symptoms
- Patients 65 years of age and older with symptoms
- Patients with underlying conditions with symptoms
- First responders with symptoms

Priority 3:

- Critical Infrastructure workers with symptoms
- Individuals who do not meet any of the above categories with symptoms.
- Healthcare facility workers and first responders
- Individuals with mild symptoms in communities experiencing high numbers of COVID-19 hospitalization.

Non-Priority:

- Individuals without symptoms.

A person who is tested is called a Person Under Investigation (PUI). Such a person needs to self-isolate, consider social distancing, and decrease public attendance until their test result is final.

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/priority-testing-patients.pdf>

- **Do you recommend I cancel my travel plans for next few weeks?**

We need to help each other to socially distance. Avoiding nonessential travel is part of this effort. If your trip is necessary, then you need to check with your destination for quarantine protocols and try your best to minimize contact with others.

- **Can we go outside for a walk when a “stay at home” order is in place?**

The Department of Health & CDC recommends that you “stay home as much as you can”. If you go outside for a walk, avoid gathering in groups, stay 6 feet away from others, don’t shake hands and don’t touch your face or eyes. Remember to wash your hands frequently.

- **I am a first responder/Health care provider and I have been in contact with a COVID-19 patient. What should I do?**

There are different risk levels based on the type of contact:

- Close Contact:

- Being withing 6 feet of a person for a prolonged period of time (more than few minutes).
- OR
- Direct contact with infectious secretions (being coughed on or touching used tissues with bare hands)

- High-risk Exposure:

- Prolonged close contact with a patient who was not wearing a mask while you did not have protection covering your nose, mouth or eyes.

- Medium-risk Exposure:

- Prolonged close contact with a patient who was wearing a mask while you did not have appropriate protection covering your nose, mouth or eyes.
- * For example:
- Seeing a patient (while the patient wore a mask) but you were not wearing a mask
 - Performing an aerosol generating procedure on a patient (while the patient wore a face mask) while you wore a gown, gloves, eye protection and a face mask (not N95).

- Low-risk Exposure:

- Brief interaction with a patient *
 - Close contact with a patient while you wore appropriate protective personal equipment.
- * For example:
- Brief interaction with a patient while not wearing gown or gloves, or wearing all recommended PPE (except wearing facemask instead of N95).

- In any of these situations, elevate the risk category by one level if there has been close body contact (rolling the patient), or aerosol generating procedures.

- If you don't have any symptom:

- ✓ For low risk exposure: self-monitor for symptoms. There is no restriction on working.
- ✓ For medium to high risk exposure, you may need more active monitoring, testing and restrictions on work. These criteria are frequently changing. Contact your employee health department for further recommendations.

- If you have any respiratory symptom, fever, myalgia, headache, GI symptom, etc. immediately self-isolate and call your doctor and infection control or employee health team.

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-risk-assesment-hcp.html>

<https://www.cdc.gov/coronavirus/2019-nCoV/hcp/index.html>

• I am not working in health care, but I have been in contact with a COVID-19 patient, what should I do?

There are different risk levels based on the nature of contact:

- Close contact:

- Being withing 6 feet of a person for a prolonged period of time (more than a few minutes).
- OR
- Direct contact with infectious secretions (being coughed on or touching used tissues with bare hands)

- High-risk Exposure:

- Living in the same household, being an intimate partner, or providing care in a non-health care setting for a confirmed patient.
- AND
- Not using any recommended precaution for home care (face mask, separate room & bathroom, hand washing, etc).

- Medium-risk Exposure:

- Living in the same household, being an intimate partner, or providing care in a non-health care setting for a confirmed patient WHILE using recommended precautions consistently.
- Being on aircraft and within 6 feet of a traveler with symptomatic confirmed COVID-19.
- Close contact with a symptomatic confirmed COVID-19 patient.

- Low-risk Exposure:

- Being in the same environment (class room, hospital waiting room) as a person with a symptomatic confirmed COVID-19 patient for a prolonged period of time, but NOT meeting criteria for close contact.

- No Identifiable risk:

- Other interaction with symptomatic confirmed COVID-19 patient that doesn't meet any above criteria such as walking by the person or being briefly in the same room.

Risk Level	If Asymptomatic	If Symptomatic
High	Quarantine, No public activity Daily active monitoring for symptoms	Isolate and seek immediate medical advice
Medium	Remain at home, social distancing & Active monitoring for symptoms	Self- isolate and seek medical advice
Low	No isolation is needed	Self-isolate and seek medical advice
No risk	No isolation is needed	Self-isolate and seek medical advice

* Isolation should be continued until 14 days after the last potential exposure.

<https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html>

- **I have been in contact with an asymptomatic person who has been in contact with a confirmed COVID-19 patient. (Contact with an exposed person). What should I do?**

According to the CDC, no testing, symptom monitoring nor special management is needed. People in this category are not considered to have been exposed to SARS-CoV-2.

<https://www.cdc.gov/coronavirus/2019-ncov/php/risk-assessment.html>

- **I feel sick but have not been diagnosed with COVID-19. What should I do?**

- Follow general instructions: wash your hands, use a face mask, separate your room and bathroom (if possible) from others'
- Self-isolate yourself until it is safe (see below).
- Inform your healthcare provider but call ahead before visiting the office. Your provider will decide if you are a candidate for testing.

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/sick-with-2019-nCoV-fact-sheet.pdf>

- **I have been diagnosed with COVID-19. What should I do?**

- Most people will have only mild symptoms.
- Call your doctor, get advice.
- Isolate yourself until you are cleared (see below).
- Follow general hygienic instructions to prevent spreading germs.
- Use symptomatic treatments, including treating fever with acetaminophen (Tylenol), hydration, and appropriate nutrition.

<https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/index.html>

- **What should a nursing mother should do if she is exposed to or diagnosed with COVID-19?**

- Follow general precautions to avoid transmission including wearing a mask and washing hands.
- If a mother has confirmed COVID-19 or is a PUI (person under investigation), then a temporary separation from her newborn may be considered until the mother is cleared to discontinue isolation (see next question).

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/inpatient-obstetric-healthcare-guidance.html>

- It is unknown if SARS-CoV-2 is transmitted through breast milk, but based on studies on similar viruses, breast milk should be safe. The decision to continue nursing should be made by a mother, her family and a health care provider, taking into consideration that breast milk is the best source of nutrition for most infants.

https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/pregnancy-breastfeeding.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fprepare%2Fpregnancy-breastfeeding.html

- **When can a patient with confirmed or suspected COVID-19 discontinue self-isolation?**

People who are recommended to stay home can stop self-isolation under these conditions:

- If no test is done, they can leave the home if 3 things have happened:
 1. No fever for at least 72 hours without taking any medication.
AND
 2. Other symptoms (including cough and any other respiratory symptoms) have improved.
AND
 3. At least 7 days have passed since the symptoms first appeared.
- If a test is done and is positive, they can leave home after 3 things have happened:
 1. No fever, without taking any medication.
AND
 2. Other symptoms (including cough and any other respiratory symptoms) have improved.
AND
 3. They have two negative tests, at least 24 hours apart.

- **Is there any treatment for COVID-19?**

At this time there is no approved specific antiviral medication for use in children in outpatient settings. There are some experimental medications for very sick patients under close observation of infectious disease specialists.

We recommend conservative treatment including treating fever with acetaminophen (Tylenol), hydration, and appropriate nutrition.