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COVID-19 Comprehensive Frequently Asked Questions

Updated 7/1/2020

Overview

COVID-19 continues to be a concern throughout the world. It is likely COVID-19 will remain a public health issue until a vaccine is available. The following are questions and answers frequently received with responses cited throughout.

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What is COVID-19?

COVID-19 is a novel coronavirus. Coronaviruses are the second most common cause of a cold, though COVID-19 is a serious and new form of the virus. Because the virus is new to humans, no one has immunity allowing the virus to spread quickly and easily from person to person. Coronaviruses are respiratory pathogens affecting how a person breathes, and can cause many symptoms including serious illness or death.

How is COVID-19 spread?

- COVID-19 is mainly spread person to person. The virus moves through the air when an infected person breathes, speaks, laughs, coughs, sneezes, sings, or shouts.
- An infected person does not always know when he or she is infected.
- People with COVID-19 often have NO symptoms three days before feeling sick.
- People with COVID-19 are most contagious 2-3 days before and several days after feeling sick.
- You can get sick by touching a surface or object after someone with COVID-19 touched the same surface or object, but that is not a common way to get the virus.
- A person with COVID-19 may never feel sick, but can spread the virus. This is not common, but is possible.
- A "close contact" of a case is someone who spent at least 15 minutes within six feet of an infectious case.

What are the symptoms of COVID-19?

- ✓ Fever or chills
- ✓ Cough
- ✓ Shortness of breath or difficulty breathing
- ✓ Fatigue
- ✓ Muscle or body aches
- ✓ Headache
- ✓ New loss of taste or smell
- ✓ Sore throat
- ✓ Congestion or runny nose
- ✓ Nausea or vomiting
- ✓ Diarrhea

Younger people may only have one or a few of these symptoms and are likely to have mild illness.

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How do I access COVID-19 testing?

Call your healthcare provider. All healthcare systems have protocols for testing, which may differ by provider. Call ahead for instructions on how to be tested. **If you are tested, you must stay isolated from family, friends, work, school, and sports while your test results are pending.**

What if your test is positive?
Public health officials will likely contact you and ask for information about who the you may have exposed, and how you were exposed. You should also receive guidance as to when it is safe for you to return to normal activities.

What if my test is positive, but I have no symptoms?
You need to wait **10 days** before you can return to regular activities. You should remain in isolation from family, friends, work, school and sport for 10 days after a positive test with no symptoms. Even without symptoms, you may still spread the virus and make others sick.

What if my test is negative?
As long as you feel well, you may resume normal activities.

Who is high-risk for serious COVID-19 illness?

Risk for Severe Illness Increases with Age
As you get older, your risk for severe illness from COVID-19 increases. For example, people in their 50s are at higher risk for severe illness than people in their 40s. Similarly, people in their 60s or 70s are, in general, at higher risk for severe illness than people in their 50s. The greatest risk for severe illness from COVID-19 is among those aged 85 or older.
People of any age with the following conditions **are at increased risk** of severe illness from COVID-19:

- Chronic kidney disease
- COPD (chronic obstructive pulmonary disease)
- Immunocompromised state (weakened immune system) from solid organ transplant
- Obesity (body mass index [BMI] of 30 or higher)
- Serious heart conditions, such as heart failure, coronary artery disease, or cardiomyopathies
- Sickle cell disease
- Type 2 diabetes mellitus

Based on what we know at this time, people with the following conditions **might be at an increased risk** for severe illness from COVID-19:

- Asthma (moderate-to-severe)
- Cerebrovascular disease (affects blood vessels and blood supply to the brain)
- Cystic fibrosis

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- Hypertension or high blood pressure
- Immunocompromised state (weakened immune system) from blood or bone marrow transplant, immune deficiencies, HIV, use of corticosteroids, or use of other immune weakening medicines
- Neurologic conditions, such as dementia
- Liver disease
- Pregnancy
- Pulmonary fibrosis (having damaged or scarred lung tissues)
- Smoking
- Thalassemia (a type of blood disorder)
- Type 1 diabetes mellitus[1]

What percentage of people are seriously ill, hospitalized, or die from COVID-19?

Approximately 10% of cases are hospitalized, though the risk of hospitalization is high in people over the age of 65. The fatality rate ranges greatly, though averages 1%. People in their 50s are at higher risk for severe illness than people in their 40s. Similarly, people in their 60s or 70s are, in general, at higher risk for severe illness than people in their 50s. The greatest risk for severe illness from COVID-19 is among those aged 85 or older.

How many cases have no symptoms or are asymptomatic?

Approximately 25% of cases have no symptoms. However, CDC estimates there are 10 additional cases for every one identified through lab testing.

When will we have a COVID-19 vaccine?

Likely at least a year from now. There are multiple companies with vaccines in various stages of development. Some vaccine candidates are promising; however, the fastest a vaccine was ever created was four years for Mumps.

Why should I wear a mask?

YES! By wearing a mask, you reduce the amount of virus you potentially breathe. When an infectious person wears a mask, the mask limits the amount of virus released into the air and reduces the distance virus is spread. Since COVID-19 can spread *before* a person has symptoms, wearing a mask even when you feel well is VERY important.

If you were sick in January or February, did you have COVID-19?

Likely no, unless you traveled to China or Europe in either month. CDC re-tested influenza specimens for more than 12,000 people in five states and found the earliest cases occurred in

[1] https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/people-with-medical-conditions.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fneed-extra-precautions%2Fgroups-at-higher-risk.html

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February. There is evidence of low levels of community spread in Washington, California, and New York in late January/early February.

Keep in mind, many respiratory viruses circulate in winter months. If COVID-19 were truly present in the US earlier than reported, hospitalizations and deaths would have surged significantly which did not happen until April.

How do I know if I have antibodies for COVID-19?

The accuracy of antibody testing is dependent on the amount of disease in the community. Most communities do not have enough activity for antibody tests to be accurate. Antibody tests confirm whether a person has immunity to COVID-19, but cannot determine whether or not someone is still at risk for getting COVID-19. Mild or asymptomatic cases of COVID-19 may not develop sufficient antibodies to prevent future infection.

Are COVID-19 tests reliable?

There are two main types of diagnostic tests for COVID-19 – a PCR test (takes longer to get a result), and a rapid test (takes minutes for a result). PCR tests for COVID-19 are reliable and monitored by the FDA for accuracy. COVID-19 rapid tests are slightly less reliable than a PCR test, though if an error occurs it is likely to be a false negative test.

If you have contact with a known case of COVID-19, but test negative by PCR or rapid test, you may still test positive up to 14 days after being exposed.

How do I protect myself against COVID-19?

The key to avoiding illness is maintaining your overall health and taking precautions when interacting with others.

- Get adequate rest
- Try to avoid extra stress
- Eat healthy
- Exercise, though not excessively

Specific to COVID-19

- Wear a mask in public and ask those entering your home (outside of close friends and family) to wear a mask in your home
- Remove your shoes when entering your house
- Limit errands to essential trips
- Limit or avoid non-essential travel, especially by air
- Maintain distance from others outside of your home
- Try to spend time with the same friends and family on a regular basis
- Encourage your friends and family to take precautions
- Keep track of whether COVID-19 cases are increasing in your community

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What is "contact tracing"?

Contact tracing is used by health departments to prevent the spread of infectious disease. In general, contact tracing involves identifying people who have an infectious disease (cases) and people who they came in contact with (contacts) and working with them to interrupt disease spread. This includes asking people with COVID-19 to isolate and their contacts to quarantine at home voluntarily.

Contact tracing for COVID-19 typically involves:

- Interviewing people with COVID-19 to identify everyone they had close contact with during the time they may have been infectious
- Notifying contacts of their potential exposure
- Referring contacts for testing
- Monitoring contacts for signs and symptoms of COVID-19
- Connecting contacts with services they might need during the self-quarantine period[2]

Contacts of laboratory-confirmed cases should self-isolate for 14 days following exposure and should track any symptoms daily.

How do I decide whether to go out, participate in sports, or travel?

In general, **the more closely you interact with others and the longer that interaction, the higher the risk of COVID-19 spread.** So, think about:

- How many *people* will you interact with?
    - Interacting with *more people* raises your risk.
    - Being in a group with people who aren't social distancing or wearing cloth face coverings increases your risk.
    - Engaging with new people (e.g., those who don't live with you) also raises your risk.
    - Some people have the virus and don't have any symptoms, and it is not yet known how often people without symptoms can transmit the virus to others.
- Can you keep 6 feet of *space* between you and others? Will you be outdoors or indoors?
    - The *closer* you are to other people who may be infected, the greater your risk of getting sick.
    - Keeping distance from other people is especially important for people who have an increased risk for severe illness.
    - Indoor spaces are more risky than outdoor spaces where it might be harder to keep people apart and there's less ventilation.
- What's the length of *time* that you will be interacting with people?

[2] https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/contact-tracing.html

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- Spending *more time* with people who may be infected increases your risk of becoming infected.
- Spending more time with people increases *their* risk of becoming infected if there is any chance that you may already be infected.[3]

Should I take care of my routine medical needs? What about elective surgery?

Talk to your doctor. You may be able to schedule a telemedicine visit for routine medical needs or follow a set protocol by your healthcare provider for an in-person visit. When COVID-19 is widespread in your community, you may want to wait until a later date for your surgery.

Can I get sick by touching contaminated surfaces?

Yes, but this is not common. It is possible to become sick if you have contact with a surface (i.e., fomite) after an infected person. In order for a person to become sick, extensive contact with a surface is needed and the person not infected much touch his/her face immediately after. Household disinfectants will kill COVID-19.

Does sunlight kill the virus? Does weather affect the virus?

No and No. The virus is able to spread person to person even in sunlight. Weather does not appear to affect the virus as cases are surging in summer months all over the world.

Where is the best place to get information on COVID-19?

Use reputable resources. These include state and local health departments, the Centers for Disease Control and Prevention (CDC), World Health Organization (WHO), universities (e.g., Johns Hopkins), and health centers. Be wary of popular news outlets as articles frequently attempt to summarize information, which is not always accurate. Avoid getting information from social media, unless from a reputable source.

CDC - https://www.cdc.gov/coronavirus/2019-nCoV/index.html
State Health Departments - https://www.cdc.gov/coronavirus/2019-ncov/php/open-america/hd-search/index.html
Johns Hopkins University - https://coronavirus.jhu.edu/

[3] https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/deciding-to-go-out.html

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