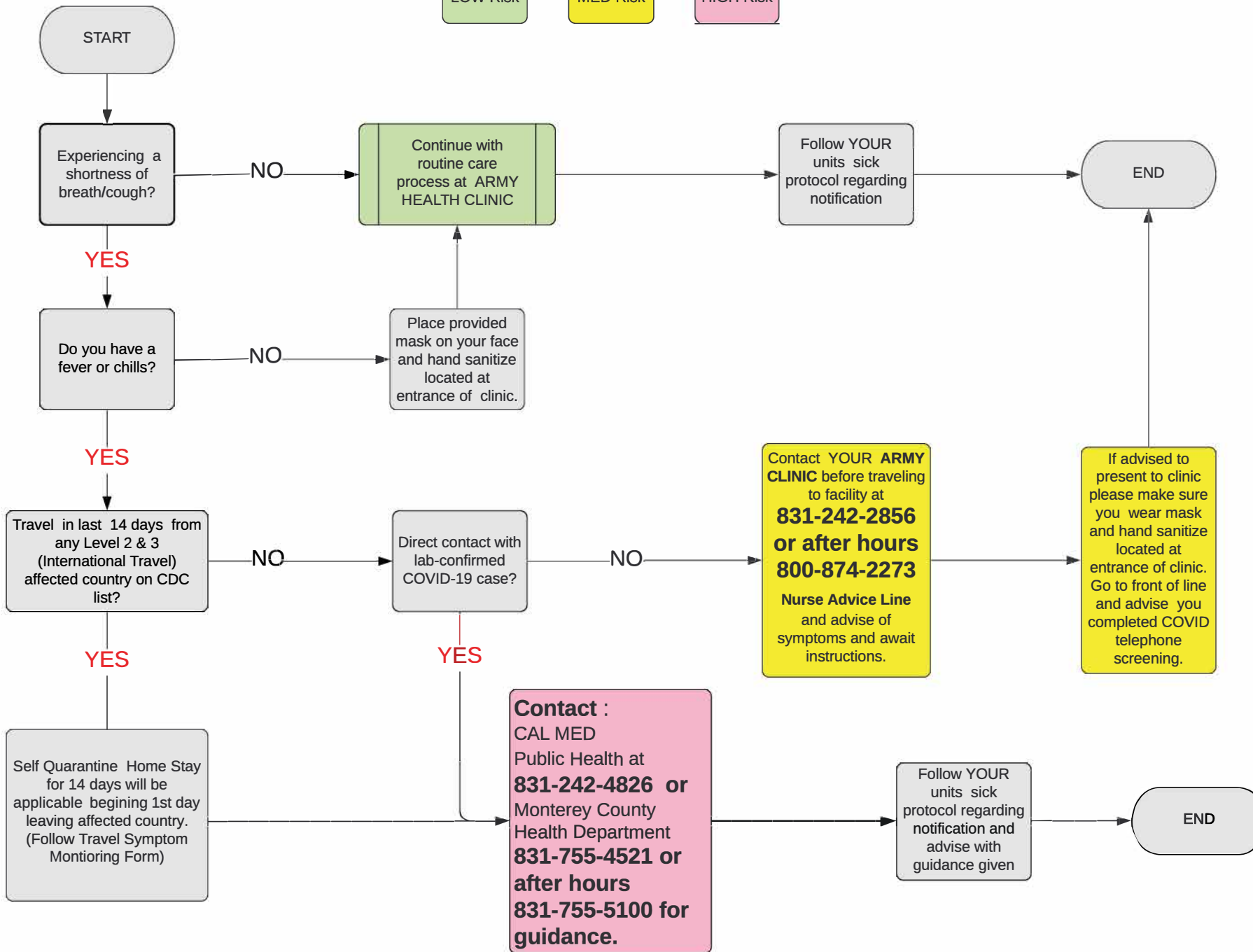


ACTIVE DUTY SERVICE MEMBER WAKES UP AND FEELS SICK

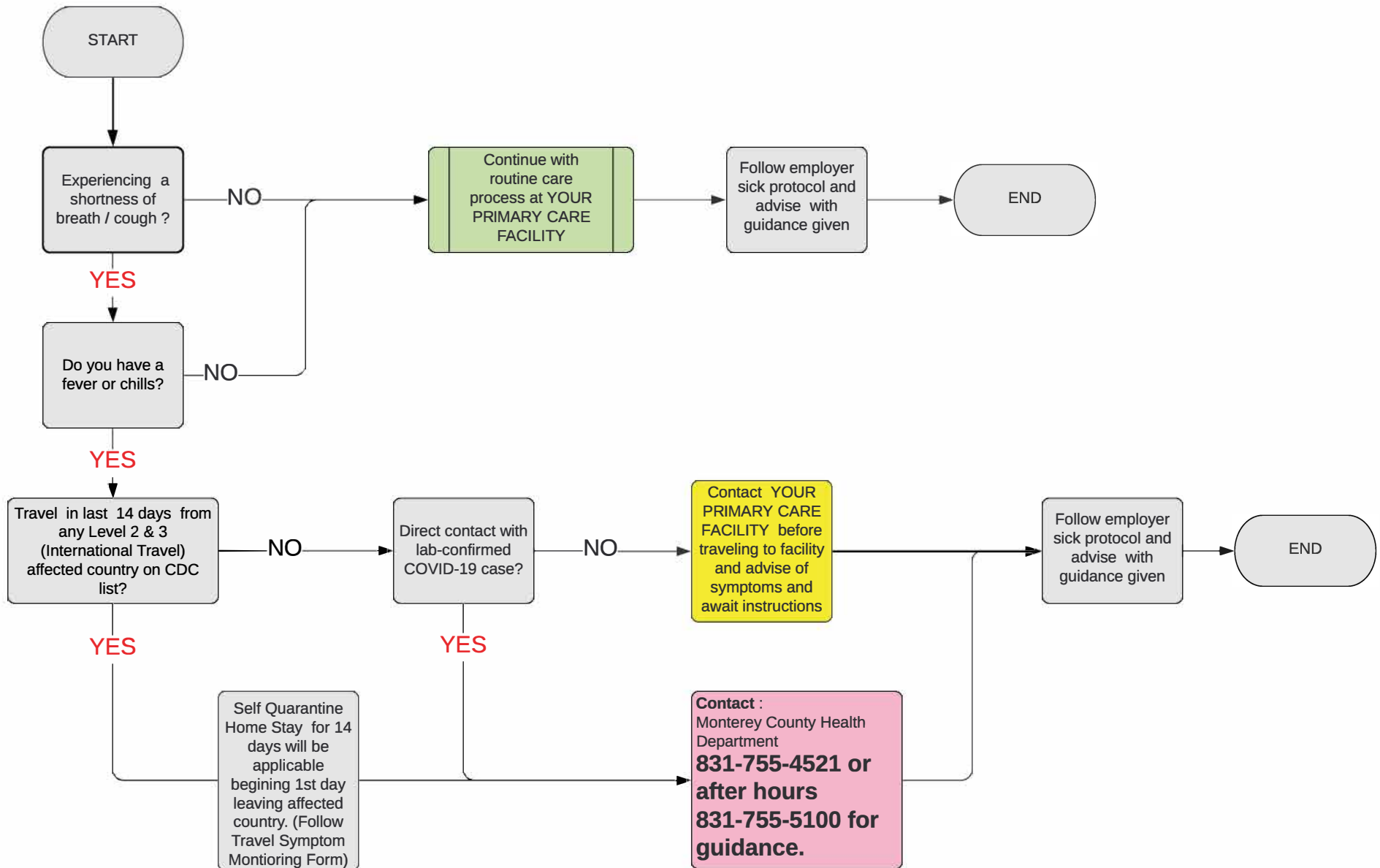
CAL MED COVID-19 Protocol MAR 2020

LOW Risk
MED Risk
HIGH Risk



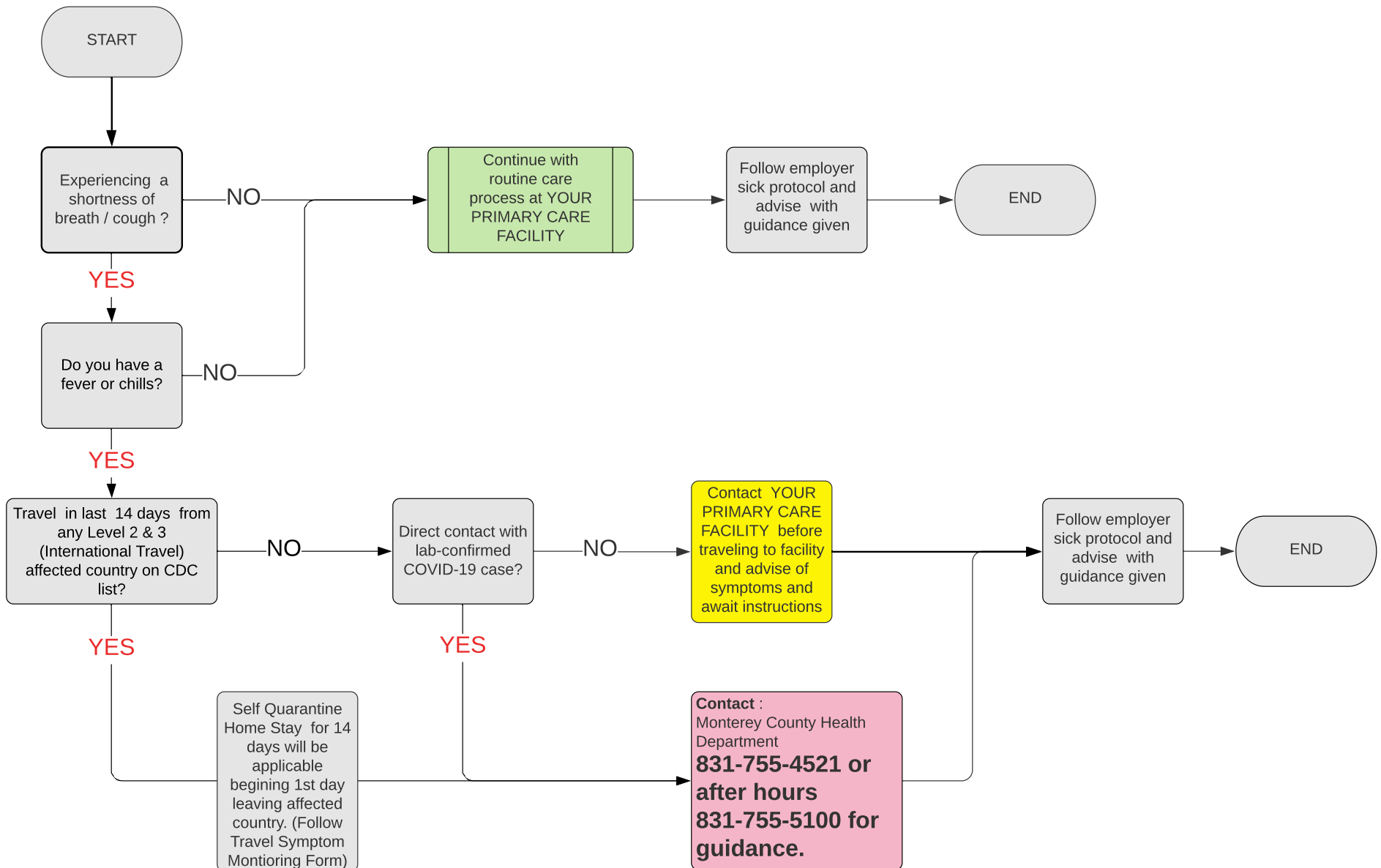
CIVILIAN WAKES UP AND FEELS SICK

CAL MED COVID-19 Protocol MAR 2020



FACULTY MEMBER WAKES UP FEELS SICK

CAL MED COVID-19 Protocol MAR 2020



What is Self-Monitoring?

What do I need to do?

- Take your temperature twice a day (morning and night). If you do not have a thermometer we can provide one for you.
- You should keep a record of whether you are taking any medication with aspirin, Tylenol® (acetaminophen), paracetamol, Aleve® (naproxen), Motrin® or Advil® (ibuprofen). If you are taking any of those medications, temperature readings should be taken before your next dose.
- Monitor daily for symptoms including fever (temperature of 100.0° F or above), feeling feverish, chills, cough, night sweats or difficulty breathing.

What do I do if I develop symptoms?

- **If you need emergency medical care call 911** and be sure to tell them you may have been exposed to novel coronavirus.
- Otherwise, seek prompt medical attention if you develop symptoms including fever, cough, or difficulty breathing.
- Before seeking care, call your healthcare provider and tell them that you may have been exposed to novel coronavirus.
- Put on a facemask before you enter the facility. These steps will help the healthcare provider's office to keep other people from getting infected or exposed.
- Ask your healthcare provider to call the Presidio of Monterey Department of Public Health at 831-242-4826.

How often will I be contacted?

- Unless you develop symptoms, the Presidio of Monterey Department of Public Health will not contact you.

How long will monitoring last?

- Self monitoring can end after 14 days since your last potential exposure to someone with novel coronavirus.
- Your last day of monitoring will be: ___/___/_____.

NSAM NGIS OR NAVY LODGE 14 DAY HOMESTAY & SELF-MONITORING

Do's

All NSAM NGIS or NAVY LODGE Homestay and Self-Monitoring individuals **shall**:

- utilize their program sponsor as their primary point of contact (POC), unless otherwise directed.
- self-monitor using the attached checklist, monitoring temperature twice daily (thermometer will be provided if needed).
- fill out the attached initial screening form for each of your family members.
- notify MAJ Jodi Brown at jodi.l.brown1.mil@mail.mil, if you, or any of your room occupants, show symptoms of COVID-19 (as described on the attached fact sheet), and MAJ Brown will arrange to have the affected individual seen at the Community Hospital of Monterey County.
- food and supplies delivered to your room should be dropped off at the front door by the individual(s) delivering the items.
- maintain social distancing/6 feet separation with individuals visiting or delivering items.
- bag and tie trash, including leftover food, and place outside the door for pick-up and disposal.
- coordinate with their primary POC for meal drop off and bagged trash pick-up.
- coordinate with their primary POC (or other pre-arrangements made with lodging front desk) for room servicing items drop off (towels, linen, soaps, etc.).

Don'ts

All NSAM NGIS or NAVY LODGE Homestay and Self-Monitoring individuals **shall not**:

- leave their room during the 14 days of Homestay and Self-Monitoring.
- smoke in their room.

Failure to comply with the above directions may result in being barred from base by the Commanding Officer of Naval Support Activity Monterey.

Individual in 14 Day Homestay and self-Monitoring:

I have read and understand the above information _____

Primary POC/program sponsor for Individual in 14 Day Homestay and self-Monitoring:

I have read and understand the above information _____

14 Day Start Date: _____

14 Day End Date: _____



CORONAVIRUS (COVID-19) SYMPTOM MONITORING FORM

California Medical Detachment, Presidio of Monterey

Name: _____ Date of Arrival to U.S.: _____
 Countries visited in 14 days prior to arrival to U.S.: _____
 Status (circle one): Service Member/ DoD Civilian Employee/ Family Member
 Email: _____ Phone: _____
 Organization/Unit: _____

To slow the spread of coronavirus disease 2019 (COVID-19) into the United States, the Centers for Disease Control and Prevention (CDC) is working with state and local public health partners to implement after-travel health precautions.

Depending on your travel history, you will be asked to stay home for a period of 14 days from the time you left an area with widespread or ongoing community spread (Level 3 Travel Health Notice) or watch your health for a period of 14 days from the time you left an area with sustained community transmission (Level 2 Travel Health Notice)

Day after arrival to U.S.	Date	Temp (°F)	Symptoms	
0 (arrival day)		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
1		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
2		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
3		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____

4		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
5		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
6		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
7		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
8		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
9		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
10		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____

11		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
12		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
13		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____
14		AM: PM:	<input type="checkbox"/> No symptoms <input type="checkbox"/> Felt feverish <input type="checkbox"/> Cough <input type="checkbox"/> Dry <input type="checkbox"/> Productive <input type="checkbox"/> Sore Throat <input type="checkbox"/> Shortness of breath <input type="checkbox"/> Chills <input type="checkbox"/> Headache	<input type="checkbox"/> Muscle Aches <input type="checkbox"/> Vomiting <input type="checkbox"/> Abdominal Pain <input type="checkbox"/> Diarrhea: _____ times/day <input type="checkbox"/> Other: _____ _____

If you become sick with fever, cough, or shortness of breath (flu-like symptoms), during business hours (M-F, 0730-1630) please call the **Presidio of Monterey Department of Public Health at 831-242-4826** or **Monterey County Health Department (MCHD) at 831-755-4521**, outside business hours, please call **MAJ Jodi Brown at 803-627-7363** or **MCHD after hours line at 831-755-5100** for further instructions. If need urgent medical care, please call 9-1-1. If non-urgent medical care, please call ahead to **CHOMP ER at 831-625-4900** prior to arrival and let them know your travel/exposure history and symptoms.

For questions, please call Presidio of Monterey Department of Public Health at 831-242-4826

Recommended precautions for household members, intimate partners, and caregivers in a non-healthcare setting¹ of

A patient with symptomatic laboratory-confirmed COVID-19

or

A patient under investigation

(Note: Can also be applied to those returning from international travel on 14-day restriction of movement)

Household members, intimate partners, and caregivers in a nonhealthcare setting may have close contact² with a person with symptomatic, laboratory-confirmed COVID-19 or a person under investigation. Close contacts should monitor their health; they should call their healthcare provider right away if they develop symptoms suggestive of COVID-19 (e.g., fever, cough, shortness of breath)

Close contacts should also follow these recommendations:

- Make sure that you understand and can help the patient follow their healthcare provider's instructions for medication(s) and care. You should help the patient with basic needs in the home and provide support for getting groceries, prescriptions, and other personal needs.
- Monitor the patient's symptoms. If the patient is getting sicker, call his or her healthcare provider and tell them that the patient has laboratory-confirmed 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.
- Household members should stay in another room or be separated from the patient as much as possible. Household members should use a separate bedroom and bathroom, if available.
- 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. For more information, see [COVID-19 and Animals](#).
- 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 60 to 95% 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.

- The patient should wear a facemask when you are around other people. If the patient is not able to wear a facemask (for example, because it causes trouble breathing), you, as the caregiver, should wear a mask when you are in the same room as the patient.
- 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, urine.
 - Throw out disposable facemasks and gloves after using them. Do not reuse.
 - 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.
- Avoid sharing household items with the patient. You should not share dishes, drinking glasses, cups, eating utensils, towels, bedding, or other items. After the patient uses these items, you should wash them thoroughly (see below "Wash laundry 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. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.
- Wash laundry thoroughly.
 - Immediately remove and wash clothes or bedding that have blood, stool, or body fluids on them.
 - Wear disposable gloves 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.
 - Read and follow directions on labels of laundry or clothing items and detergent. In general, using a normal laundry detergent according to washing machine instructions and 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. Soap and water should be used preferentially if hands are visibly dirty.
- Discuss any additional questions with your state or local health department or healthcare provider.

Guidance for at Home Care:

Mechanics: Coronavirus is transmitted via liquid droplets when a person coughs or sneezes. The virus can enter via these droplets through the eyes, nose or throat if you are in close contact (within ~6ft or 2 m). https://www.cdc.gov/coronavirus/2019-ncov/about/prevention.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fabout%2Fprevention-treatment.html

- The virus is not known to be airborne (e.g. transmitted through the particles floating in the air) and it is not something that enters through the skin.
- It can be spread by touch if a person has used their hands to cover their mouth or nose when they cough. That's why we recommend you cough or sneeze into your arm and wash your hands regularly.
- Face masks should be used by sick people to prevent transmission to other people. A face mask will help keep a person's droplets in.

Recommendations: more detailed information can be found here;
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-home-care.html>

Quarantine is defined as the separation or restriction of movement of well persons who might have been exposed to a communicable disease while determining if they become ill.

Quarantine:

For the health of your family, friends and community, you need to stay at home. That means do not have visitors and do not go to work or school, public areas, including places of worship, stores, shopping malls and restaurants. You can use delivery/pick up services for groceries or other needs but avoid face to face contact. <https://www.cdc.gov/coronavirus/2019-ncov/community/home/cleaning-disinfection.html>

No need for separate washers and dryers.

Isolation is defined as the separation or restriction of activities of an ill person with a contagious disease from those who are well.

If **Isolation** is required: the CDC recommendations are at
<https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html>

- assess whether the residential setting is suitable and appropriate for home care;
- assess whether the patient is capable of adhering to precautions that will be recommended as part of home care or isolation (respiratory hygiene, hand hygiene, etc.); and contact MAJ Jodi Brown at Jodi.I.brown1.mil@mail.mil to notify that the residential setting has been determined to be suitable for home care, and that hospital discharge is planned.

Avoid contaminating common items and surfaces

- At least once daily, clean and disinfect surfaces that you touch often, like toilets, bedside tables, doorknobs, phones and television remotes.
- Do not share personal items with others, such as toothbrushes, towels, bed linen, utensils or electronic devices.
- Use regular household disinfectants or diluted bleach (1 part bleach and 9 parts water) to disinfect.
- Place contaminated items that cannot be cleaned in a lined container, secure the contents and dispose of them with other household waste.
- Put the lid of the toilet down before flushing.
- Arrange to have groceries and supplies dropped off at your door to minimize contact.
- Stay in a separate room and use a separate bathroom from others in your home, if possible.
- If you have to be in contact with others, keep at least 6ft between yourself and the other person. Keep interactions brief and wear a face mask.
- Avoid contact with individuals with chronic conditions, compromised immune systems and older adults.
- Avoid contact with pets if you live with other people that may also be touching the pet.

Keep your hands clean

- Wash your hands often with soap and water for at least 20 seconds, and dry with disposable paper towels or dry reusable towel, replacing it when it becomes wet.
- You can also remove dirt with a wet wipe and then use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose and mouth.
- Cough or sneeze into the bend of your arm or into a tissue.

Care for yourself

• <https://www.cdc.gov/coronavirus/2019-ncov/community/home/cleaning-disinfection.html>

- No need for separate washers and dryers.
- Monitor your symptoms as directed by your health care provider or public health authority.
- If your symptoms get worse, immediately contact your health care provider or public health authority and follow their instructions.
 - CALMED PH 831-242-4826 or the
 - Monterey County Health Department (MCHD) at 831-755-4521.
 - After business hours (evenings/weekends) they can call the MCHD after hours line at 831-755-5100

Supplies to have at home when isolating

- Surgical/procedure face masks (do not re-use)
- Eye protection
- Disposable gloves (do not re-use)
- Disposable paper towels
- Tissues
- Waste container with plastic liner

- Thermometer
- Over the counter medication to reduce fever (e.g., ibuprofen or acetaminophen)
- Running water
- Hand soap
- Alcohol-based sanitizer containing at least 60% alcohol
- Dish soap
- Regular laundry soap
- Regular household cleaning products
- Bleach (5% sodium hypochlorite) and a separate container for dilution (1 part bleach to 9 parts water)
- Alcohol prep wipes
- Arrange to have your groceries delivered to you

NSAM, NGIS OR NAVY LODGE 14 DAY HOMESTAY & SELF-MONITORING PROVISIONS CHECKLIST

Public health considerations require certain services to be specially coordinated during a required 14-day homestay and self-monitoring period. The following services, such room servicing, bed linens, food, personal laundry and trash pick will be specially coordinated and handled in the following manner:

WHO	WHAT	WHEN	WHERE	HOW
NGIS or NL	Routine room servicing items (towels, toiletries, soaps, etc.)	Upon request	Drop-off outside room door	Coordinated with call to NGIS or NL front desk
NGIS or NL	Bed linens	Upon request	Drop-off outside room door	Coordinated with call NGIS or NL front desk
Program sponsor	Food	Upon request	Drop-off outside room door	Coordinated with call to program sponsor
Program sponsor	Personal laundry	Upon request	Pick-up and drop off outside of room door (bagged)	Coordinated with call to program sponsor
Program sponsor (or other entity, as coordinated)	Trash pick-up		Picked up outside of door (bagged and tied off)	Coordinated with call to program sponsor

Disclaimers:

This information is subject to change.

Please visit <https://nps.edu/web/safety/coronavirus> for updates.

What you need to know about coronavirus disease 2019 (COVID-19)

What is coronavirus disease 2019 (COVID-19)?

Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. The virus that causes COVID-19 is a novel coronavirus that was first identified during an investigation into an outbreak in Wuhan, China.

Can people in the U.S. get COVID-19?

Yes. COVID-19 is spreading from person to person in parts of the United States. Risk of infection with COVID-19 is higher for people who are close contacts of someone known to have COVID-19, for example healthcare workers, or household members. Other people at higher risk for infection are those who live in or have recently been in an area with ongoing spread of COVID-19. Learn more about places with ongoing spread at <https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html#geographic>.

Have there been cases of COVID-19 in the U.S.?

Yes. The first case of COVID-19 in the United States was reported on January 21, 2020. The current count of cases of COVID-19 in the United States is available on CDC's webpage at <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>.

How does COVID-19 spread?

The virus that causes COVID-19 probably emerged from an animal source, but is now spreading from person to person. The virus is thought to spread mainly between people who are in close contact with one another (within about 6 feet) through respiratory droplets produced when an infected person coughs or sneezes. It also may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads. Learn what is known about the spread of newly emerged coronaviruses at <https://www.cdc.gov/coronavirus/2019-ncov/about/transmission.html>.

What are the symptoms of COVID-19?

Patients with COVID-19 have had mild to severe respiratory illness with symptoms of

- fever
- cough
- shortness of breath

What are severe complications from this virus?

Some patients have pneumonia in both lungs, multi-organ failure and in some cases death.

How can I help protect myself?

People can help protect themselves from respiratory illness with everyday preventive actions.

- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Wash your hands often with soap and water for at least 20 seconds. Use an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available.

If you are sick, to keep from spreading respiratory illness to others, you should

- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces.

What should I do if I recently traveled from an area with ongoing spread of COVID-19?

If you have traveled from an affected area, there may be restrictions on your movements for up to 2 weeks. If you develop symptoms during that period (fever, cough, trouble breathing), seek medical advice. Call the office of your health care provider before you go, and tell them about your travel and your symptoms. They will give you instructions on how to get care without exposing other people to your illness. While sick, avoid contact with people, don't go out and delay any travel to reduce the possibility of spreading illness to others.

Is there a vaccine?

There is currently no vaccine to protect against COVID-19. The best way to prevent infection is to take everyday preventive actions, like avoiding close contact with people who are sick and washing your hands often.

Is there a treatment?

There is no specific antiviral treatment for COVID-19. People with COVID-19 can seek medical care to help relieve symptoms.

