



Centers for Disease
Control and Prevention

REVIEWED

By Chris at 9:11 am, Jun 05, 2020

Find pages with...

All these words:

Results must contain all of these words

This exact word
or phrase:

Results must contain this full phrase

Any of these
words:

Results must match at least one of these
words

None of these
words:

Results cannot contain any of these words

Language:

Find pages in the language you select

Between these
dates:

Results updated between these given dates

Clear

Advanced Search

Coronavirus Disease 2019 (COVID-19)

Frequently Asked Questions

Updated June 2, 2020

Other Frequently Asked Questions and Answers About:

[Travel](#)

[Healthcare Professionals](#)

[Healthcare Infection](#)

[Laboratory Viral Panels](#)

[Laboratory Biosafety](#)

[General Business](#)

[Personal Protective Equip](#)

[K-12 Schools and Child Ca](#)



[Retirement Communities](#)

[Facilities](#)

[Correctional and Detentio](#)

[Event Organizers & Indiv](#)

Help control the spread of rumors and be aware of fraud schemes.

- [Coronavirus Rumor Control](#)  (FEMA)
- [COVID-19 Fraud Alert](#)  (Office of the Inspector General)

Coronavirus Disease 2019 Basics

What is a novel coronavirus?

A novel coronavirus is a new coronavirus that has not been previously identified. The virus that causes coronavirus disease 2019 (COVID-19), is not the same as the [coronaviruses that commonly circulate](#) and cause mild illness, like the common cold.

A diagnosis with coronavirus 229E, NL63, OC43, or HKU1 is not the same as a COVID-19 diagnosis. COVID-19 will be evaluated and cared for differently than patients with common corona

Why is the disease being called coronavirus disease 2019, COVID-19?

On February 11, 2020 the World Health Organization [announced](#) an official name for the 2019 novel coronavirus outbreak, first identified in Wuhan China. The new name of this disease 2019, abbreviated as COVID-19. In COVID-19, 'CO' stands for 'corona,' 'VI' for 'viri' Formerly, this disease was referred to as "2019 novel coronavirus" or "2019-nCoV".

There are many types of human coronaviruses including some that commonly cause mild illnesses. COVID-19 is a new disease, caused by a novel (or new) coronavirus that has not been found in humans. The name of this disease was selected following the World Health Organization's naming of new human infectious diseases.

Why might someone blame or avoid individuals and groups (create stigma) because of COVID-19?

People in the U.S. may be worried or anxious about friends and relatives who are living with COVID-19. COVID-19 is spreading. Some people are worried about getting the disease from these people. This can lead to social stigma, for example, toward people who live in certain parts of the world, internationally, people who were in quarantine, or healthcare professionals.

Stigma is discrimination against an identifiable group of people, a place, or a nation. Stigma is based on a lack of knowledge about how COVID-19 spreads, a need to blame someone, fears about discrimination, and rumors that spread rumors and myths.

Stigma hurts everyone by creating more fear or anger toward ordinary people instead of focusing on what is causing the problem.

How can people help stop stigma related to COVID-19?

People can fight stigma by providing social support in situations where you notice this in your community or emotional or [mental health](#) of stigmatized groups and the communities they live in. Stop making communities and community members resilient. See [resources on mental health and COVID-19](#). Everyone can help stop stigma related to COVID-19 by [knowing the facts](#) and sharing them with your community.

Why do some state's COVID-19 case numbers sometimes differ from what is posted

CDC's overall case numbers are validated through a confirmation process with jurisdictional health departments. Cases identified and confirmed by different jurisdictions may differ.

How do CDC's COVID-19 case numbers compare with those provided by the World Health Organization (WHO) or Johns Hopkins?

CDC's COVID-19 case numbers include many publicly reported numbers, including information from territorial, international and external partners.

Why do the number of cases for previous days increase?

Delays in reporting can cause the number of COVID-19 cases reported on previous days to increase. This effect is described as "backfill.") State, local, and territorial health departments report their cases once they have been confirmed and share these data with CDC. Since it takes time to conduct laboratory testing, cases from a previous day may be added to the daily counts a few days late.

COVID-19 and Hypertension

Are people with high blood pressure (hypertension) at higher risk from COVID-19?

At this time, we do not think that people with high blood pressure and no other underlying conditions are more likely than others to get severely ill from COVID-19. Although many people who have COVID-19 have high blood pressure, they are often older or have other medical conditions, such as serious heart conditions that place them at higher risk of severe illness from COVID-19.

If you have high blood pressure, it's critically important that you keep your blood pressure under control to reduce your risk for heart disease and strokes. Take your blood pressure medications as directed every day if you are able to take your blood pressure at home, and work with your healthcare team to ensure your blood pressure is well controlled. Any changes to your medications should be discussed with your healthcare team.

Should I continue to take my blood pressure medication?

Yes. Continue to take your blood pressure medications exactly as prescribed and make sure you are following up on your treatment plan. Continue all your regular medications, including angiotensin-converting enzyme inhibitors (ACE-Is) or angiotensin receptor blockers (ARBs), as prescribed by your healthcare provider. For more information, see the recommendations by [current clinical guidelines](#) from the American Heart Association, the Centers for Disease Control and Prevention, the American College of Cardiology, and the American College of Cardiology.

How COVID-19 Spreads

What is the source of the virus?

COVID-19 is caused by a coronavirus called SARS-CoV-2. Coronaviruses are a large family in people and many different species of animals, including camels, cattle, cats, and bats. Coronaviruses can infect people and then spread between people. This occurred with SARS-CoV-2 now with the virus that causes COVID-19. The SARS-CoV-2 virus is a betacoronavirus, like SARS-CoV and MERS-CoV. Three of these viruses have their origins in bats. The sequences from U.S. patients are similar to those initially posted, suggesting a likely single, recent emergence of this virus from an animal source of this virus is unknown.

More information about the source and spread of COVID-19 is available on the [Situations and Spread of the Virus](#).

How does the virus spread?

The virus that causes COVID-19 is thought to spread mainly from person to person, mainly through droplets produced when an infected person coughs or sneezes. These droplets can land on people who are nearby or possibly be inhaled into the lungs. Spread is more likely when people are in close contact with one another (within about 6 feet).

COVID-19 seems to be spreading easily and sustainably in the community ("community spread") in [geographic areas](#). Community spread means people have been infected with the virus in areas where they are not sure how or where they became infected.

Learn what is known about the [spread of newly emerged coronaviruses](#).

Why are we seeing a rise in cases?

The [number of cases of COVID-19](#) being reported in the United States is rising due to [increased testing](#) and reporting across the country. The growing number of cases in part reflects that as many U.S. states and territories experience community spread. More detailed and accurate data will help us better understand and track the size and scope of the outbreak and strengthen prevention and control measures.

Can someone who has had COVID-19 spread the illness to others?

The virus that causes COVID-19 is [spreading from person-to-person](#). People are thought to be most contagious when they are symptomatic (the sickest). That is why CDC recommends that these patients be isolated or at home (depending on how sick they are) until they are better and no longer pose a risk to others. Recently the virus has also been detected in asymptomatic persons.

How long someone is actively sick can vary so the decision on when to release someone from isolation depends on a test-based or non-test-based strategy (i.e. time since illness started and time since recovery). The decision is made by state and local public health officials. The decision involves considering the specifics of the illness, disease severity, illness signs and symptoms, and the results of laboratory testing for the virus.

Learn more about [CDC's guidance on when to release someone from isolation](#) and [discussing isolation with someone who has COVID-19](#). For information on when someone who has been sick with COVID-19 is no longer contagious, see [Interim Guidance for Discontinuation of In-Home Isolation for Patients with COVID-19](#).

Someone who has been released from isolation is not considered to pose a risk of infection to others.

Can someone who has been quarantined for COVID-19 spread the illness to others?

Quarantine means separating a person or group of people who have been exposed to someone who has COVID-19 but have not developed illness (symptoms) from others who have not been exposed, in order to prevent the spread of that disease. Quarantine is usually established for the incubation period of the common illness. The span of time during which people have developed illness after exposure. For COVID-19, the incubation period is 14 days from the last date of exposure because the incubation period for this virus is 14 days. Someone who has been released from COVID-19 quarantine is not considered a risk for spreading the illness to others if they have not developed illness during the incubation period.

Can the virus that causes COVID-19 be spread through food, including restaurant and frozen packaged food?

Coronaviruses are generally thought to be spread from person to person through respiratory droplets. There is no evidence to support transmission of COVID-19 associated with food. Before eating, it is important to always wash your hands with soap and water for at least 20 seconds. Throughout the day use a tissue to cover your coughing or sneezing, and wash your hands after coughing or sneezing, or going to the bathroom.

It may be possible that a person can get COVID-19 by touching a surface or object, like a doorknob, that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not the main way the virus spreads.

In general, because of poor survivability of these coronaviruses on surfaces, there is little risk of transmission from food products or packaging.

Learn what is known about the [spread of COVID-19](#).

Can I get sick with COVID-19 if it is on food?

Based on information about this novel coronavirus thus far, it seems unlikely that COVID-19 is spread through food – additional investigation is needed.

Will warm weather stop the outbreak of COVID-19?

It is not yet known whether weather and temperature affect the spread of COVID-19. Some viruses that cause the common cold and flu, spread more during cold weather months but that it is impossible to become sick with these viruses during other months. There is much more research needed on the transmissibility, severity, and other features associated with COVID-19 and investigation is ongoing.

What is community spread?

Community spread means people have been infected with the virus in an area, including where they became infected.

What temperature kills the virus that causes COVID-19?

Generally coronaviruses survive for shorter periods at higher temperatures and higher dryer environments. However, we don't have direct data for this virus, nor do we have a based cutoff for inactivation at this point. The necessary temperature would also be based on surface, the environment, etc. Regardless of temperature please follow [CDC's guidance](#)

Can mosquitoes or ticks spread the virus that causes COVID-19?

At this time, CDC has no data to suggest that this new coronavirus or other similar coronavirus can be spread by mosquitoes or ticks. The main way that COVID-19 spreads is from person to person. See [Spreads](#) for more information.

How to Protect Yourself

Am I at risk for COVID-19 in the United States?

This is a rapidly evolving situation and the [risk assessment](#) may change daily. The latest CDC's Coronavirus Disease 2019 (COVID-19) website.

How many cases have been reported in the United States?

COVID-19 case counts for the United States are updated regularly online. See the [current COVID-19](#).

How can I help protect myself?

Visit the [COVID-19 Prevention and Treatment](#) page to learn about how to protect yourself from COVID-19.

What should I do if I have had close contact with someone who has COVID-19?

There is information for [people who have had close contact](#) with a person confirmed to COVID-19 available online.

Does CDC recommend the use of facemask or face coverings to prevent COVID-19?

In light of data about how COVID-19 spreads, along with evidence of widespread COVID across the country, CDC recommends that people wear a [cloth face covering](#) to cover the mouth and nose in a community setting. This is an additional public health measure people should take to reduce the spread of COVID-19 in addition to (not instead of) social distancing, frequent hand cleaning and other every day measures. A cloth face covering is not intended to protect the wearer, but may prevent the spread of virus from the wearer to others. This would be especially important in the event that someone is infected but does not know it. Cloth face coverings should be worn whenever people must go into public settings (grocery stores, pharmacies, etc.) and N-95 respirators are reserved for healthcare workers and other first responders, as recommended in CDC guidance.

Is it safe to get care for my other medical conditions during this time?

- It is important to continue taking care of your health and wellness. If you have a condition that may be at [higher risk for severe illness from COVID-19](#). Below are some things you can do to protect your health during this time.
- Continue your medications, and do not change your treatment plan without talking to your healthcare provider.
- Continue to manage your disease the way your healthcare provider has told you.
- Have at least a 2-week supply of all prescription and non-prescription medications. Talk to your healthcare provider, insurer, and pharmacist about getting an extra supply of prescription medications to avoid multiple trips to the pharmacy.
- Talk to your healthcare provider about whether your vaccinations are up-to-date. Older adults, and those with some underlying medical conditions, are recommended to receive [influenza](#) and [pneumococcal disease](#) as soon as your provider tells you that you can.
- Call your healthcare provider
 - if you have any concerns about your medical conditions, or if you get sick.
 - to find out about different ways you can connect with your healthcare provider for chronic disease management or other conditions. Ask about phone calls, video appointments, text messages, emails and mailings. Learn more about [telehealth here](#) [↗](#).
- Do not delay getting emergency care for your health problems or *any* health concerns that require immediate attention.
 - If you need emergency help, call 911.
 - Emergency departments have infection prevention plans to protect you from getting COVID-19 while receiving care for your medical condition.
- Continue to practice [everyday](#) prevention: wash your hands often, keep space between you and other people, cover your mouth and nose with a cloth face cover when around other people, cover coughs and sneezes, and disinfect frequently touched surfaces often.

Am I at risk for COVID-19 from mail, packages, or products?

There is still a lot that is unknown about COVID-19 and how it spreads. Coronaviruses are often spread by respiratory droplets. Although the virus can survive for a short period on some surfaces, it is not thought to be spread from domestic or international mail, products or packaging. However, it may be possible to get COVID-19 by touching a surface or object that has the virus on it and then touching their face, possibly their eyes, but this is not thought to be the main way the virus spreads.

Learn more about [safe handling of deliveries and mail](#).

Is it okay for me to donate blood?

In healthcare settings across the United States, donated blood is a lifesaving, essential part of patient care. The need for donated blood is constant, and blood centers are open and in urgent need of donors. People who are well to continue to donate blood if they are able, even if they are practicing social distancing to prevent the spread of COVID-19. CDC is supporting blood centers by providing recommendations that will help them stay open and safe. Examples of these recommendations include spacing donor chairs 6 feet apart, thorough hand hygiene, and environmental cleaning practices, and encouraging donors to make donation appointments.

Should contact lens wearers take special precautions to prevent COVID-19?

- Currently there is no evidence to suggest contact lens wearers are more at risk for COVID-19 than eyeglass wearers.
- Contact lens wearers should continue to [practice safe contact lens wear and care hygiene](#) to help prevent against transmission of any contact lens-related infections, such as always washing hands before handling lenses.
- People who are healthy can continue to wear and care for their contact lenses as prescribed by their eye care professional.

Find more information about [how coronavirus spreads](#) and [how to protect yourself](#).

Visit [CDC's contact lens website](#) for more information on healthy contact lens wear and care.

Is contact lens disinfecting solution effective against COVID-19?

- [Hydrogen peroxide-based systems](#) for cleaning, disinfecting, and storing contact lens against the virus that causes COVID-19.
 - For other disinfection methods, such as multipurpose solution and ultrasonic cleaning, there is not enough scientific evidence to determine efficacy against the virus.
- [Always use solution](#) to disinfect your contact lenses and case to kill germs that may be on them.
- Handle your lenses over a surface that has been cleaned and disinfected.

Find more information about [how coronavirus spreads](#) and [how to protect yourself](#).

Visit [CDC's contact lens website](#) for more information on healthy contact lens wear and care.

COVID-19 and Children

What is the risk of my child becoming sick with COVID-19?

Based on available evidence, children do not appear to be at higher risk for COVID-19 than adults. While some children and infants have been sick with COVID-19, adults make up most of the known cases. For more information about who is at higher risk for severe illness from COVID-19, visit [People who are at higher risk for severe illness from COVID-19](#).

How can I protect my child from COVID-19 infection?

You can encourage your child to help stop the spread of COVID-19 by teaching them to should do to stay healthy.

- Avoid close contact with people who are sick.
- Stay home when you are sick, except to get medical care.
- Cover your coughs and sneezes with a tissue and throw the tissue in the trash.
- Wash your hands often with soap and water for at least 20 seconds, especially after or sneezing; going to the bathroom; and before eating or preparing food.
- If soap and water are not readily available, use an alcohol-based hand sanitizer with wash hands with soap and water if hands are visibly dirty.
- Clean and disinfect frequently touched surfaces and objects (e.g., tables, countertop and cabinet handles).
- Launder items, including washable plush toys, as appropriate and in accordance with instructions. If possible, launder items using the warmest appropriate water setting completely. Dirty laundry from an ill person can be washed with other people's item

You can find additional information on preventing COVID-19 at [Prevention for 2019 Nov](#) at [Preventing COVID-19 Spread in Communities](#). Additional information on how COVID- at [How COVID-19 Spreads](#).

More information on [Children and Coronavirus Disease 2019 \(COVID-19\)](#) is available on

Are the symptoms of COVID-19 different in children than in adults?

No. The symptoms of COVID-19 are similar in children and adults. However, children generally presented with mild symptoms. Reported symptoms in children include cold- runny nose, and cough. Vomiting and diarrhea have also been reported. It's not known may be at higher risk for severe illness, for example, children with underlying medical c healthcare needs. There is much more to be learned about how the disease impacts ch

Should children wear masks?

CDC recommends that everyone 2 years and older wear a cloth face covering that covers their nose and mouth when they are out in the community. Cloth face coverings should NOT be put on babies or children younger than 2 years of age because of the danger of suffocation. Children younger than 2 years of age are listed as anyone who has trouble breathing or is unconscious, incapacitated, or otherwise unable to remove the covering without assistance.

Wearing cloth face coverings is a public health measure people should take to reduce the spread of COVID-19 in addition to (not instead of) social distancing, frequent hand cleaning, and other everyday safety practices. A cloth face covering is not intended to protect the wearer but may prevent the spread of virus from the wearer to others. This would be especially important if someone is infected but does not have symptoms. Respirators are still reserved for healthcare personnel and other first responders, as recommended in CDC guidance.

How do I prepare my children in case of COVID-19 outbreak in our community?

Outbreaks can be stressful for adults and children. Talk with your children about the outbreak and reassure them that they are safe. If appropriate, explain to them that most illness from COVID-19 is mild. [Children respond differently to stressful situations than adults](#). CDC offers [resources](#) about COVID-19.

What steps should parents take to protect children during a community outbreak?

This is a new virus and we are still learning about it, but so far, there does not seem to be a high risk for children. Most illness, including serious illness, is happening in adults of working age and older adults. Children can get the virus and become ill. Many schools across the country have announced dismissals. Keep track of school dismissals in your community. Read or watch local media sources for updates. If schools are dismissed temporarily, use alternative childcare arrangements, if needed.

If your child/children become sick with COVID-19, notify their childcare facility or school. Encourage children to complete classroom assignments and activities they can do from home to keep up with their schoolwork.

Discourage children and teens from gathering in other public places while school is dismissed to reduce the spread of COVID-19 in the community.

What is multisystem inflammatory syndrome in children (MIS-C) and who is at risk?

CDC is working with state and local health departments to learn more about multisystemic children (MIS-C) associated with COVID-19 and gather more information as quickly as possible and who is at risk. As new information becomes available, we will continue to provide [caregivers](#) as well as [healthcare and public health professionals](#). MIS-C has been described across multiple body systems, potentially including the heart, lungs, kidneys, brain, skin and other organs. Signs and symptoms of MIS-C include fever and various symptoms such as abdominal pain, diarrhea, neck pain, rash, and feeling tired.

If your child has any of these symptoms, [other symptoms of COVID-19](#), or other concerning symptoms, contact your pediatrician. If your child is showing any emergency warning signs including trouble breathing, chest pain or pressure in the chest, new confusion, inability to wake or stay awake, bluish lips or face, or other concerning signs, **seek emergency care right away.**

School Dismissals and Children

While school's out, can my child hang out with their friends?

- The key to slowing the spread of COVID-19 is to practice social distancing. While schools are closed, children should not have in-person playdates with children from other households. If children are playing outside, it is essential that they remain 6 feet from anyone who is not in their own household.
- To help children maintain social connections while social distancing, help your child talk on the phone, make video calls or video chats with their friends.
- Make sure children practice [everyday preventive behaviors](#), such as washing their hands with soap and water. Remember, if children meet outside of school in groups, it can put everyone at risk.
 - Revise spring break plans if they included non-essential travel.
- Information about [COVID-19 in children](#) is somewhat limited, but current data suggests that children may have only mild symptoms. However, they can still pass this virus onto others who are more vulnerable, including [older adults and people who have serious underlying medical conditions](#).

While school's out, how can I help my child continue learning?

- **Stay in touch with your child's school.**
 - Many schools are offering lessons online (virtual learning). Review assignments your child establish a reasonable pace for completing the work. You may need turning on devices, reading instructions, and typing answers.
 - Communicate challenges to your school. If you face technology or connectivity having a hard time completing assignments, let the school know.
- **Create a schedule and routine for learning at home, but remain flexible.**
 - Have consistent bedtimes, and get up at the same time, Monday through Friday.
 - Structure the day for learning, free time, healthy meals and snacks, and physical activity.
 - Allow flexibility in the schedule—it's okay to adapt based on your day.
- **Consider the needs and adjustment required for your child's age group.**
 - The transition to being at home will be different for preschoolers, K-5, middle school students. Talk to your child about expectations and how they are adjusting to school.
 - Consider ways your child can stay connected with their friends without spending too much time on screens.
- **Look for ways to make learning fun.**
 - Have hands-on activities, like puzzles, painting, drawing, and making things.
 - Independent play can also be used in place of structured learning. Encourage counting sheets or practice counting by stacking blocks.
 - Practice handwriting and grammar by writing letters to family members. This is a good way to limit face-to-face contact.
 - Start a journal with your child to document this time and discuss the shared experiences.
 - Use audiobooks or see if your local library is hosting virtual or live-streamed reading sessions.

While school's out, will kids have access to meals?

Check with your school on plans to continue meal services during the school dismissal. Some schools are keeping school facilities open to allow families to pick up meals or are providing grab-and-go meals.

While school's out, how can I keep my family healthy?

- **Watch your child for any signs of illness.**
 - If you see any sign of illness consistent with [symptoms of COVID-19](#), particularly breath, call your healthcare provider and keep your child at home and away from school as possible. Follow CDC's guidance on "[What to do if you are sick.](#)"
- **Watch for signs of stress in your child.**
 - Some common changes to watch for include excessive worry or sadness, unhealed wounds, and difficulty with attention and concentration. For more information, see the "[Manage Anxiety and Stress](#)."
 - Take time to talk with your child or teen about the COVID-19 outbreak. Answer [facts](#) about COVID-19 in a way that your child or teen can understand.
 - Go to CDC's [Helping Children Cope with Emergencies](#) or [Talking with Children About COVID-19](#) for more information.
- **Teach and reinforce [everyday preventive actions](#).**
 - Parents and caretakers play an important role in teaching children to wash their hands. Hand washing can keep them healthy and stop the virus from spreading to others.
 - Be a good role model—if you wash your hands often, they're more likely to do the same.
 - Make [handwashing a family activity](#).
- **Help your child stay active.**
 - Encourage your child to play outdoors—it's great for physical and mental health. Consider walking, jogging, or go on a bike ride.
 - Use indoor activity breaks (stretch breaks, dance breaks) throughout the day to stay active and focused.
- **Help your child stay socially connected.**
 - Reach out to friends and family via phone or video chats.
 - Write cards or letters to family members they may not be able to visit.
 - Some schools and non-profits, such as the [Collaborative for Academic, Social, and Emotional Learning](#) and [The Yale Center for Emotional Intelligence](#) [↗](#), have resources for social and emotional learning. Visit [this page](#) to see if your school has tips and guidelines to help support social and emotional learning.

While school's out, limit time with older adults, including relatives, and people with conditions.

Older adults and people who have serious underlying medical conditions are at highest COVID-19.

- If others in your home are at particularly [high risk for severe illness from COVID-19](#), separate your child from those people.
- If you are unable to stay home with your child during school dismissals, carefully consider who is positioned to provide childcare. If someone at higher risk for COVID-19 will be providing care (e.g., a grandparent or someone with a serious underlying medical condition), limit your child's contact with those people.
- Consider postponing visits or trip to see older family members and grandparents. Consider sending letters and sending via mail.

Children and Youth with Special Healthcare

Is my child with an underlying medical condition or special healthcare need at higher risk from COVID-19?

Children with complex, chronic medical conditions, including children with physical, developmental differences, can have special healthcare needs. It's not known yet whether all children are at a higher risk for severe illness from COVID-19.

Although most COVID-19 cases in children are not severe, serious illness that needs to be hospitalized can happen. Some data on children reported that the majority who needed hospitalization had one underlying medical condition. The most common underlying conditions reported include chronic lung disease (including asthma), heart disease, and conditions that weaken the immune system. Information suggests that children with these underlying medical conditions may be at a higher risk for severe illness from COVID-19.

More data are needed to learn which underlying or complex medical conditions may put children at a higher risk for severe illness from COVID-19. CDC is monitoring new information as it becomes available and will provide updates as more information is available.

Learn more about caring for [children with special health care needs during a disaster or emergency](#) and [children at risk for severe illness from COVID-19](#).

What additional steps should families that have a child with an underlying medical condition and health care need take?

In addition to following the recommendations to [prevent getting sick](#) and [running errands](#), take extra steps recommended for persons with [higher risk of severe COVID-19 illness](#) and with [potential COVID-19 exposure or confirmed illness](#).

- Identify potential alternative caregivers, if you or other regular caregivers become sick with COVID-19. If possible, these alternative caregivers would not be at [higher risk of severe illness](#) themselves.
- Try to have at least one month of medication and medical supplies on hand. Some health care providers may have a limited supply of prescription medications. Consider discussing this option with your child's health care provider.
- Review any care plans for your child, such as an asthma action plan, and make sure alternative caregivers are familiar with these plans.
- If you do not have [care plans or an emergency notebook](#), try to make them. They typically contain information about your child's medical conditions, how to manage those conditions, child's doctors, allergies, information on medications (names, dosages, and administration instructions), preferences (food and other) or special needs, daily routines and activities, friends, and other information that is important to support behavioral and emotional health.
- Learn if your child's healthcare providers, including doctors and therapists, have new ways of providing appointments. If they offer telemedicine visits, find out how those visits work and get additional information you need.
- If your child receives any support care services in the home that need to be continued, discuss with your child's healthcare providers what will do if those direct care providers get sick, or if persons in your household are sick with COVID-19.
- Discuss with the support care agencies and the providers ways to minimize risk for exposure to COVID-19.
 - If your child or other persons in your household are sick with COVID-19 and are unable to provide care, inform your direct care providers and consider postponing or rescheduling services. [Discontinuing home isolation](#) have been met.
 - Ask service providers if they are experiencing any [symptoms of COVID-19](#), or if they have been in contact with someone who has COVID-19.
 - Tell the service provider to:
 - Wear a [cloth face covering](#) if they will be close (less than 6 feet) to you or your child. Their cloth face covering helps protect you if they are infected but do not protect them from you.
 - Ask them to wash their hands with soap and water or, if unavailable, use hand sanitizer.

What can I do if my child has difficulties adjusting to new routines and following rec

Helping children understand and follow recommendations, like social distancing and [w](#) can be challenging if your child has intellectual disabilities, sensory issues, or other spec

- Keeping children at home and sheltering in place can lower stress created by social c covering recommendations. Reach out to others for help in running essential erranc
- Behavioral techniques can be used to address behavioral challenges and to develop social stories, video modeling, picture schedules, and visual cues. Try rewarding you or her favorite non-food treat or activities to help switch routines and to follow recor
- Many of the organizations you turn to for information and support around your child condition may have information on their websites to help families address issues rel
- Your child's therapist(s) and/or teachers may also have resources to help successfull your child.

Additional information on [caring for children](#) and on [child development specific conditi](#)

How can my family cope with the added stress?

Supporting children with special healthcare needs can put additional demands and stre during emergency situations. You have likely found ways to manage the stress and chal situation. It is important to continue your family's coping methods, including reaching o friends, support groups, and organizations that have been helpful in the past.

See information on ways to cope with stress (such as [visiting parks, trails, or open space stronger](#)).

If you, or someone you care about, are feeling overwhelmed with emotions like sadness: feel like you want to harm yourself or others:

- Call 911
- Visit the [Disaster Distress Helpline](#) [🔗](#) , call 1-800-985-5990, or text TalkWithUs to 66
- Visit the [National Domestic Violence Hotline](#) [🔗](#) or call 1-800-799-7233 and TTY 1-80

What if my child or someone else in the home is sick with symptoms of COVID-19?

If your child with special healthcare needs becomes sick with [symptoms of COVID-19](#), call your healthcare provider. If your child has new or worsening [emergency warning signs](#), such as trouble breathing, chest pain, confusion or inability to wake them up, or bluish lips or face, call 911. If you think someone in your home has COVID-19, notify the operator so that first responders may be appropriately prepared to help others.

Notify your child's healthcare provider if someone else in your house becomes sick with COVID-19. They can provide any advice specific for your child.

See additional information if [someone in the home is sick with COVID-19](#) or suspected to have COVID-19.

What if my child's symptoms of their underlying medical condition or complex, chronic condition worsen?

- Call your child's healthcare provider if you have any concerns about your child's medical condition. If you need emergency help, call 911.
- Emergency departments have infection prevention plans to protect you and your child. If your child needs care for medical conditions not related to COVID-19, do not delay getting your child's underlying condition or complex medical condition because you are afraid of COVID-19 when visiting the healthcare setting.

What if my child needs to go to the hospital?

If your child's healthcare provider tells you to go to the hospital for any health problem,

- Ask the healthcare provider to let the hospital know you are coming and to share the hospital will need to know to care for your child.
- Visiting policies may have changed due to COVID-19. If your child's hospital policy do with a child, ask your child's healthcare provider for a statement explaining your child be present.
- Bring your care plans/emergency notebook with you along with paper and pen to write during your time at the hospital.

Preparing Your Home and Family for COVID

How can my family and I prepare for COVID-19?

Create a household plan of action to help protect your health and the health of those you live with in the event of an outbreak of COVID-19 in your community:

- Talk with the people who need to be included in your plan, and discuss [what to do if in your community](#).
- Plan ways to care for those who might be at greater risk for serious complications, [those with severe chronic medical](#) conditions like heart, lung or kidney disease.
 - Make sure they have access to several weeks of medications and supplies in case of prolonged periods of time.
- Get to know your neighbors and find out if your neighborhood has a website or social media page that is connected.
- Create a list of local organizations that you and your household can contact in the event of an outbreak for information, healthcare services, support, and resources.
- Create an emergency contact list of family, friends, neighbors, carpool drivers, health care providers, employers, the local public health department, and other community resources.

What steps can my family take to reduce our risk of getting COVID-19?

Practice everyday preventive actions to help reduce your risk of getting sick and remind the same. These actions are especially important for older adults and people who have conditions:

- Avoid close contact with people who are sick.
- Stay home when you are sick, except to get medical care.
- Cover your coughs and sneezes with a tissue and throw the tissue in the trash.
- Wash your hands often with soap and water for at least 20 seconds, especially after or sneezing; going to the bathroom; and before eating or preparing food.
- If soap and water are not readily available, use an alcohol-based hand sanitizer with wash hands with soap and water if hands are visibly dirty.
- Clean and disinfect frequently touched surfaces and objects (e.g., tables, countertop and cabinet handles).
- Launder items, including washable plush toys, as appropriate and in accordance with instructions. If possible, launder items using the warmest appropriate water setting completely. Dirty laundry from an ill person can be washed with other people's item

What should I do if someone in my house gets sick with COVID-19?

Most people who get COVID-19 will be able to recover at home. [CDC has directions](#) for you and your family at home and their caregivers, including:

- Stay home when you are sick, except to get medical care.

When to Seek Emergency Medical Attention

Look for emergency warning signs* for COVID-19. If someone is showing any of these signs, seek medical care immediately

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Bluish lips or face

*This list is not all possible symptoms. Please call your medical provider for any other symptoms or concerns concerning to you.

Call 911 or call ahead to your local emergency facility: Notify the operator that you have someone who has or may have COVID-19.

- Use a separate room and bathroom for sick household members (if possible).
- Wash your hands often with soap and water for at least 20 seconds, especially after coughing or sneezing; going to the bathroom; and before eating or preparing food.
- If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.
- Provide your sick household member with clean disposable facemasks to wear at home to help prevent spreading COVID-19 to others.
- [Clean the sick room and bathroom](#), as needed, to avoid unnecessary contact with the sick person.
- Avoid sharing personal items like utensils, food, and drinks.

How can I prepare in case my child's school, child care facility, or university is dismissed?

Talk to the [school or facility](#) about their emergency operations plan. Understand the plan and social services (such as student meal programs) during school dismissals. If your child attends [university](#), encourage them to learn about the school's plan for a COVID-19 outbreak.

How can I prepare for COVID-19 at work?

Plan for potential changes at your workplace. Talk to your employer about their emergency plan, including sick-leave policies and telework options. [Learn how businesses and employers can prepare for COVID-19.](#)

Should I use soap and water or a hand sanitizer to protect against COVID-19?

Handwashing is one of the best ways to protect yourself and your family from getting sick. Wash your hands with soap and water for at least 20 seconds, especially after blowing your nose, coughing or sneezing, going to the bathroom; and before eating or preparing food. If soap and water are not readily available, use a hand sanitizer with at least 60% alcohol.

What cleaning products should I use to protect against COVID-19?

Clean and disinfect frequently touched surfaces such as tables, doorknobs, light switches, desks, phones, keyboards, toilets, faucets, and sinks. If surfaces are dirty, clean them with soap and water prior to disinfection. To disinfect, most common EPA-registered household disinfectants are effective. For more information, see [recommendations for household cleaning and disinfection.](#)

Should I make my own hand sanitizer if I can't find it in the stores?

CDC recommends handwashing with soap and water for at least 20 seconds or, using a sanitizer with at least 60% alcohol when soap and water are not available. These actions are part of [actions](#) individuals can take to slow the spread of respiratory diseases like COVID-19.

- When washing hands, you can use plain soap or antibacterial soap. Plain soap is effective at removing germs.
- If soap and water are not readily available, you can use an FDA-approved alcohol-based hand sanitizer that contains at least 60% alcohol. You can tell if the sanitizer contains at least 60% alcohol by the label.

CDC does not encourage the production and use of homemade hand sanitizer [products](#); [the correct use of the ingredients](#) [↗](#) and the need to work under sterile conditions to produce hand sanitizer in industries that are looking into producing hand sanitizer to fill in for commercial shortages. [World Health Organization guidance](#) [📄](#) [↗](#). Organizations should revert to the use of commercially approved products once such supplies again become available.

- To be effective against killing some types of germs, [hand sanitizers](#) need to have a minimum of 60% alcohol and be used when hands are not visibly dirty or greasy.
- Do not rely on “Do It Yourself” or “DIY” recipes based solely on essential oils or other natural ingredients or on compounding practices.
- Do not use hand sanitizer to disinfect frequently touched surfaces and objects. [See](#) [cleaning and sanitizing your home](#).

[See FAQs about hand hygiene for healthcare personnel responding to COVID-2019.](#)

In Case of an Outbreak in Your Community

What should I do if there is an outbreak in my community?

During an outbreak, stay calm and put your preparedness plan to work. Follow the step

Protect yourself and others.

- Stay home if you are sick. Keep away from people who are sick. Limit close contact w possible (about 6 feet).

Put your household plan into action.

- Stay informed about the local COVID-19 situation. Be aware of temporary school d may affect your household's daily routine.
- Continue practicing everyday preventive actions. Cover coughs and sneezes with a often with soap and water for at least 20 seconds. If soap and water are not availabl contains 60% alcohol. Clean frequently touched surfaces and objects daily using a re and water.
- Notify your workplace as soon as possible if your regular work schedule changes. take leave if you or someone in your household gets sick with [COVID-19 symptoms](#), dismissed temporarily. [Learn how businesses and employers can plan for and respc](#)
- Stay in touch with others by phone or email. If you have a chronic medical conditio friends, and health care providers to check on you during an outbreak. Stay in touch especially those at increased risk of developing severe illness, such as older adults a medical conditions.

Will schools be dismissed if there is an outbreak in my community?

Depending on the situation, public health officials may recommend community actions COVID-19, such as school dismissals. Read or watch local media sources that report sch for communication from your child's school. If schools are dismissed temporarily, disco gathering or socializing anywhere, like at a friend's house, a favorite restaurant, or the l

Should I go to work if there is an outbreak in my community?

Follow the advice of your local health officials. Stay home if you can. Talk to your employer, taking leave if you or someone in your household gets sick with [COVID-19 symptoms](#) is dismissed temporarily. Employers should be aware that more employees may need to care for children or other sick family members than is usual in case of a community outbreak.

Will businesses and schools close or stay closed in my community and for how long? What is included in “stay at home” or “shelter in place” order in my community?

CDC makes recommendations, shares information, and provides guidance to help slow the spread of COVID-19 in the U.S. including guidance for schools and businesses. CDC regularly shares information with state, local, territorial, and tribal health authorities. These local authorities are responsible for issuing orders including “stay at home” or “shelter in place.” What is included in these orders and how long they last are also decided by local authorities. These decisions may also depend on many factors such as the rate of spreading in a certain community.

Please [contact your local health department](#) to find out more.

Can CDC tell me or my employer when it is safe for me to go back to work/school after being exposed to COVID-19?

CDC cannot address the policies of any business or organization. CDC shares recommendations based on available science to help people make decisions that improve their health and safety. Every organization may decide to visibly screen for symptoms or perform on-site symptom checks.

If your employer, school, or organization requires you to present documentation regarding returning to work or school (for example, proof of a negative COVID-19 lab test, if a test is not available, a letter from a healthcare provider to ask if he or she would be able to provide a form of documentation), self-isolation and self-quarantine may not be possible.

CDC has guidance for when and how people with COVID-19 can discontinue home isolation. [/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html](https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/steps-when-sick.html).

CDC also has guidance for what people should do if they think they have been exposed to COVID-19. <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/social-distancing.html>

In all cases, follow the guidance of your healthcare provider and local health department based on local circumstances.

Symptoms & Testing

What are the symptoms and complications that COVID-19 can cause?

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. People with these symptoms

- 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

This list does not include all possible symptoms. CDC will continue to update this list as COVID-19.

Read more about [COVID-19 Symptoms](#).

Is it possible to have the flu and COVID-19 at the same time?

Yes. It is possible to test positive for flu (as well as other respiratory infections) and COVID-19.

Should I be tested for COVID-19?


Maybe; not everyone needs to be tested for COVID-19.

If you have [symptoms of COVID-19](#) and want to get tested, call your healthcare provider.

You can also visit your state or local health department's website to look for the latest information. [See Test for Past Infection for more information.](#)

How can I get tested for COVID-19?

[Two kinds of tests are available for COVID-19](#): viral tests and antibody tests. A viral test checks for the virus. An antibody test checks for a previous infection.

If you think you need a viral test, call your healthcare provider or [state](#) or [local](#)  health department about your symptoms and how you think you may have been exposed to the virus. You can also visit your state or local health department's website to see if they offer viral tests at their office. Your state or local health department can tell you where testing is available. See [Testing for Current Infection](#) for more information.

If you want an antibody test, call your healthcare provider to see if they offer antibody tests. You can also visit your state or local health department's website for local information.


Can someone test negative and later test positive on a viral test for COVID-19?

Yes, it is possible. You may test negative if the sample was collected early in your infection during this illness. You could also be exposed to COVID-19 after the test and get infected. If you test negative, you still should take steps to [protect yourself and others](#). See [Testing for Current Infection](#) for more information.

What kind of tests are being used to diagnose COVID-19?

Viral tests are used to diagnose COVID-19. These tests tell you if you currently have an illness that causes COVID-19. There are many viral tests available. All of the viral tests identify the virus, such as from swabs from the inside of your nose.

Some tests are conducted at the testing site you visit, and results are available to you while you wait. Other tests must be sent to a laboratory to analyze, a process that takes 1-2 days once the laboratory receives the sample. Two tests allow you to collect your sample at home – either a swab from the inside of your nose or a saliva sample, but you will still need to send the sample to a laboratory for processing.

Locations and types of testing sites vary depending on where you live (see question: [Where can I get tested?](#)). Talk with your testing site to learn which test it uses. You can find a [patient information sheet](#) on the [testing site website](#) .

What is antibody testing? And can I be tested using this method?

Antibody testing checks a sample of a person's blood to look for antibodies to the virus that causes COVID-19. When someone gets COVID-19, their body usually makes antibodies. However, it typically takes 1-2 weeks to develop these antibodies. Some people may take even longer to develop antibodies, and some people may not develop antibodies. A positive result from this test may mean that person was previously infected with the virus. Talk to your healthcare provider about what your antibody test result means.

Antibody tests should not be used to diagnose COVID-19. To see if you are currently infected with the virus, viral tests identify the virus in respiratory samples, such as swabs from the inside of your nose or a saliva sample.

We do not know yet if having antibodies to the virus that causes COVID-19 can protect someone from being infected again or, if they do, how long this protection might last. Scientists are conducting research to answer these questions.

If I have recovered from COVID-19, will I be immune to it?

We do not know yet if people who recover from COVID-19 can get infected again. CDC is conducting research to determine if a person can get sick with COVID-19 more than once. Until we know more, we recommend you [protect yourself and others](#).

Higher Risk

Who is at higher risk for serious illness from COVID-19?

COVID-19 is a new disease and there is limited information regarding risk factors for severe illness. Based on currently available information and clinical expertise, **older adults and people of any age with underlying medical conditions** might be at higher risk for severe illness from COVID-19.

Based on what we know now, those at high-risk for severe illness from COVID-19 are:

- [People aged 65 years and older](#)
- People who live in a nursing home or long-term care facility

People of all ages with underlying medical conditions, particularly if not well controlled,

- People with chronic lung disease or moderate to severe asthma
- People who have serious heart conditions
- People who are immunocompromised
 - Many conditions can cause a person to be immunocompromised, including cancer, organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, long-term use of corticosteroids and other immune weakening medications
- People with severe obesity (body mass index [BMI] ≥ 40)
- People with diabetes
- People with chronic kidney disease undergoing dialysis
- People with liver disease

What should people at higher risk of serious illness with COVID-19 do?

If you are at higher risk of getting very sick from COVID-19, you should:

- Stock up on supplies
- Take everyday precautions to keep space between yourself and others
- When you go out in public, keep away from others who are sick
- Limit close contact and wash your hands often
- Avoid crowds, cruise travel, and non-essential travel

If there is an outbreak in your community, stay home as much as possible. Watch for symptoms. If you get sick, stay home and call your doctor. More information on how to prepare and how communities and caregivers can support those at higher risk is available on [Pe from COVID-19](#).

How were the underlying conditions for people considered higher risk of serious illness selected?

This list is based on:

- What we are learning from the outbreak in other countries and in the United States.
- What we know about risk from other respiratory infections, like flu.

As CDC gets more information about COVID-19 cases here in the United States, we will

Are there any medications I should avoid taking if I have COVID-19?

Currently, there is no evidence to show that taking ibuprofen or naproxen can lead to a COVID-19.

People with high blood pressure should take their blood pressure medications, as directed by your healthcare provider to make sure that their blood pressure is as well controlled as possible. Changes to blood pressure medications should only be made by your healthcare provider.

What about underlying medical conditions that are not included on this list?

Based on available information, adults aged 65 years and older and people of any age with certain underlying medical conditions included on this list are at higher risk for severe illness and poorer outcomes. We are continuously collecting and analyzing data regularly and will update the list when we learn more. People with medical conditions not on the list might also be at higher risk and should consult with their healthcare provider if they are concerned.

We encourage all people, regardless of risk, to:

- Take [steps](#) to protect yourself and others.
- Call your healthcare provider if you are [sick](#) with a fever, cough, or shortness of breath.
- Follow CDC [travel](#) guidelines and the recommendations of your state and local health department.

What does a well-controlled health condition mean?

Generally, well-controlled means that your condition is stable, not life-threatening, and your test results and other findings are as similar as possible to those without the health condition. You should consult with your healthcare provider if you have a question about your health or how your health condition is being managed.

What does more severe illness mean?

Severity typically means how much impact the illness or condition has on your body's function. If you have a question about your health or how your healthcare provider is managing your condition, you should talk with your healthcare provider.

Are people with disabilities at higher risk?

Most people with disabilities are not inherently at higher risk for becoming infected with COVID-19. Some people with physical limitations or other disabilities might be at a higher risk because of their underlying medical condition.

- People with certain disabilities might experience higher rates of chronic health conditions, which increase their risk of serious illness and poorer outcomes from COVID-19. Adults with disabilities who have heart disease, stroke, diabetes, or cancer than adults without disabilities.

You should talk with your healthcare provider if you have a question about your health or how your healthcare provider is managing your condition.

COVID-19 and Hypertension

Are people with high blood pressure (hypertension) at higher risk from COVID-19?

At this time, we do not think that people with high blood pressure and no other underlying conditions are more likely than others to get severely ill from COVID-19. Although many people who have COVID-19 have high blood pressure, they are often older or have other medical conditions, such as serious heart conditions that place them at higher risk of severe illness from COVID-19.

If you have high blood pressure, it's critically important that you keep your blood pressure under control to reduce your risk for heart disease and strokes. Take your blood pressure medications as directed every day if you are able to take your blood pressure at home, and work with your healthcare provider to ensure your blood pressure is well controlled. Any changes to your medications should be discussed with your healthcare team.

Should I continue to take my blood pressure medication?

Yes. Continue to take your blood pressure medications exactly as prescribed and make upon in your treatment plan. Continue all your regular medications, including angiotensin inhibitors (ACE-Is) or angiotensin receptor blockers (ARBs), as prescribed by your health recommended by [current clinical guidelines](#) from the American Heart Association, the American College of Cardiology, and the American College of Cardiology.

Healthcare Professionals and Health Departments

What should healthcare professionals and health departments do?

For recommendations and guidance on persons under investigation; infection control, isolation, and equipment guidance; home care and isolation; and case investigation, see [Information for Healthcare Professionals](#). For information on specimen collection and shipment, see [Information for Laboratories](#). For information on health professional on COVID-19, see [Information for Public Health Professionals](#).

See also: [FAQs for Healthcare Professionals](#)

COVID-19 and Funerals

Am I at risk if I go to a funeral or visitation service for someone who died of COVID-19?

There is currently no known risk associated with being in the same room at a funeral or visitation service for the body of someone who died of COVID-19.

Am I at risk if I touch someone who died of COVID-19 after they have passed away?

COVID-19 is a new disease and we are still learning how it spreads. The virus that causes COVID-19 is spread mainly from close contact (i.e., within about 6 feet) with a person who is currently infected. The virus likely spreads primarily through respiratory droplets produced when an infected person coughs or sneezes, similar to how influenza and other respiratory infections spread. These droplets can land on surfaces or be inhaled by people who are nearby or possibly be inhaled into the lungs. This type of spread is not considered to be the primary mode of transmission.

It may be possible that a person can get COVID-19 by touching a surface or object that has been touched by someone who is infected and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the primary mode of transmission.

People should consider not touching the body of someone who has died of COVID-19. People with severe underlying health conditions are at higher risk of developing serious COVID-19 illness. There is a less of a chance of the virus spreading from certain types of touching, such as holding hands, if the body has been prepared for viewing. Other activities, such as kissing, washing, and shrouding, should be avoided before, during, and after the body has been prepared, if possible. If washing the body or shrouding is part of religious or cultural practices, families are encouraged to work with their community's clergy and funeral home staff on how to reduce their exposure as much as possible. At a minimum, people participating in these activities should wear disposable gloves. If splashing of fluids is expected, additional personal protective equipment (PPE) may be required (such as disposable gown, faceshield or goggles and gloves).

Cleaning should be conducted in accordance with manufacturer's instructions for all cleaning products (e.g., concentration, application method and contact time). [Products with EPA-registered disinfectant claims](#) are expected to be effective against COVID-19 based on data for their use. After removal of PPE, perform [hand hygiene](#) by washing hands with soap and water for at least 20 seconds or using alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available. Hand sanitizer should be used if the hands are visibly soiled.

What do funeral home workers need to know about handling decedents who had COVID-19?

A funeral or visitation service can be held for a person who has died of COVID-19. Funeral home workers should follow their routine infection prevention and control precautions when handling a decedent. If it is necessary to transfer a body to a bag, follow [Standard Precautions](#), including additional personal protective equipment (PPE) if splashing of fluids is expected. For transporting a body after the body is placed in the bag, disinfect the outside of the bag with a [product with EPA-approved emerging viral pathogens claim](#) against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for disinfection products (e.g., concentration, application method and contact time, etc.). Wear PPE when handling the body bag.

Embalming can be conducted. During embalming, follow Standard Precautions including additional PPE if splashing is expected (e.g. disposable gown, faceshield or goggles and N95 respirator). Use additional PPE if protection if any procedures will generate aerosols or if required for chemicals used in the manufacturer's label. Wear heavy-duty gloves over nitrile disposable gloves if there are cuts, wounds, or other injuries that break the skin. Additional information on how to safely conduct embalming procedures is in the [CDC's Postmortem Guidance](#). Cleaning should be conducted in accordance with the manufacturer's instructions. [Products with EPA-approved emerging viral pathogens claims](#) [are expected to be effective against COVID-19](#) based on data for harder to kill viruses. Follow the manufacturer's instructions for disinfection products (e.g., concentration, application method and contact time).

After cleaning and removal of PPE, perform [hand hygiene](#) by washing hands with soap and water for 20 seconds or using an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available. Soap and water should be used if the hands are visibly soiled.

Decedents with COVID-19 can be buried or cremated, but check for any additional state or local health department requirements that may dictate the handling and disposition of the remains of individuals who have died of COVID-19.

How can loved ones safely handle belongings of someone who died from COVID-19?

The belongings of someone who has died of suspected or confirmed COVID-19 (outside hospital setting) may be returned to family members along with instructions for [cleaning](#) on local rules and regulations, family members may retrieve these belongings at the funeral facility.

Family members should use gloves and practice good hand hygiene when handling the belongings received, family members should also [follow the household item-specific cleaning guidelines for personal items, such as electronics](#).

What should I do if my family member died from COVID-19 while overseas?

When a US citizen dies outside the United States, the deceased person's next of kin or I should notify US consular officials at the Department of State. Consular personnel are available 24 hours a week, to provide assistance to US citizens for overseas emergencies. If a family member representative is in a different country from the deceased person, he or she should call the Office of Overseas Citizens Services in Washington, DC, from 8 am to 5 pm Eastern time at 888-407-4747 (toll-free) or 202-501-4444. For emergency assistance after working hours or on holidays, call the Department of State switchboard at 202-647-4000 and ask to speak with the Overseas Citizens Services duty officer. In addition, the [US embassy](#) [🔗](#) closest to or in the country where the death occurred should provide assistance.

My family member died from COVID-19 while overseas. What are the requirements the United States?

CDC does not require an autopsy before the remains of a person who died overseas are returned to the United States. Depending on the circumstances surrounding the death, some countries may require support to the family include the local consulate or embassy, travel insurance provider, and aid organizations, and the deceased's employer. There likely will need to be an official and official documents issued by the consular office.

CDC requirements for importing human remains depend upon if the body has been examined if a person died from a [quarantinable communicable disease](#).

At this time, COVID-19 is a quarantinable communicable disease in the United States and standards for importation found in 42 Code of Federal Regulations Part 71.55 and may be authorized for entry into the United States only under the following conditions:

- The remains are cremated; OR
- The remains are properly embalmed and placed in a hermetically sealed casket; OR
- The remains are accompanied by a permit issued by the CDC Director. The CDC permit must accompany the human remains at all times during shipment.
 - Permits for the importation of the remains of a person known or suspected to have died from a quarantinable communicable disease may be obtained through the CDC Division of Quarantine by calling the CDC Emergency Operations Center at 770-488-7100 or emailing dgmqpolicyoffice@cdc.gov.

Please see [CDC's guidance](#) for additional information.

What CDC is Doing

What is CDC doing about COVID-19?

CDC is working with other federal partners in a whole-of-government response. This is a complex situation and CDC will continue to provide updated information as it becomes available to protect people's health. More information about [CDC's response to COVID-19](#) is available online.

Cleaning and Disinfection

What is the difference between cleaning and disinfecting?

Cleaning with soap and water removes germs, dirt, and impurities from surfaces. It lowers the risk of infection. *Disinfecting* kills germs on surfaces. By killing germs on a surface after cleaning, you help prevent the spread of infection.

Is it safe to vacuum in a school, business, or community facility after someone with COVID-19 has been present?

The risk of transmitting or spreading SARS-CoV-2, the virus that causes COVID-19, during this time, there are no reported cases of COVID-19 associated with vacuuming. If vacuuming in a school, business, or community facility that was used by a person with suspected or confirmed COVID-19, follow the CDC recommendations for [Cleaning and Disinfection for Community Facilities](#). Wait for a minimum wait time of 24 hours, or as long as practical.

After cleaning and disinfection, the following recommendations may help reduce the risk to individuals when vacuuming:

- Consider removing smaller rugs or carpets from the area completely, so there is less surface area to vacuum.
- Use a vacuum equipped with a high-efficiency particulate air (HEPA) filter, if available.
- Do not vacuum a room or space that has people in it. Wait until the room or space is empty, at night, for common spaces, or during the day for private rooms.
- Consider temporarily turning off room fans and the central HVAC system that service the area. This helps ensure that particles that escape from vacuuming will not circulate throughout the facility.

What is routine cleaning? How frequently should facilities be cleaned to reduce the risk of COVID-19?

Routine cleaning is the everyday cleaning practices that businesses and communities need to maintain a healthy environment. Surfaces frequently touched by multiple people, such as door handles, handrails, and light switches, should be cleaned with soap and water or another detergent at least daily with frequent cleaning and disinfection may be required based on level of use. For example, in public spaces, such as shopping carts and point of sale keypads, should be cleaned after each use. Cleaning *removes* dirt and impurities, including germs, from surfaces. Cleaning also reduces the number of germs on a surface.

Is cleaning alone effective against the virus that causes COVID-19?

Cleaning does not kill germs, but by removing them, it lowers their numbers and the risk. A surface may have gotten the virus on it from a person with or suspected to have COVID-19. Cleaning and disinfecting kills germs on surfaces.

Who should clean and disinfect community spaces?

Regular cleaning staff can clean and disinfect community spaces. Cleaning staff should be trained on the use of cleaning and disinfection chemicals and provided with the personal protective equipment (PPE) for the chemicals used.

How long do companies need to close for disinfection after an exposure? How long can they come back to work?

Companies do not necessarily need to close after a person with confirmed or suspected COVID-19 visits a company facility. The area(s) used or visited by the ill person should be closed for 24 hours. Open outside doors and windows as much as possible ensuring that doing so does not compromise the facility (i.e. make sure that children are not able to enter the closed off area through doors). and use ventilating fans to increase air circulation in the area. Once the area has been [disinfected](#), it can be opened for use. Workers without close contact with the person with COVID-19 can return to work immediately after disinfection is completed.

How effective are alternative disinfection methods, such as ultrasonic waves, high intensity light, and LED blue light?

The efficacy of these disinfection methods against the virus that causes COVID-19 is not known. EPA recommends use of the [surface disinfectants identified on List N](#) [↗](#) against the virus that causes COVID-19. EPA does not routinely review the safety or efficacy of pesticidal devices, such as UV lights, LED lights, etc. Therefore, EPA cannot confirm whether, or under what circumstances, such products may reduce the spread of COVID-19.

Should outdoor playgrounds, like those at schools or in parks, be cleaned and disinfected to prevent the spread of COVID-19?

Outdoor areas generally require normal routine cleaning and do not require disinfection. Disinfecting outdoor playgrounds is not an efficient use of disinfectant supplies and has not been proven to reduce the risk of COVID-19 to the public. You should maintain existing cleaning and hygiene practices for high touch surfaces made of plastic or metal, such as grab bars and railings, should be cleaned and disinfected. Disinfection of wooden surfaces (e.g., play structures, benches, tables) or groundcover is not recommended.

Can sanitizing tunnels be used at building entrances or exits to prevent the spread of COVID-19?

CDC does not recommend the use of sanitizing tunnels. There is no evidence that they reduce the spread of COVID-19. Chemicals used in sanitizing tunnels could cause skin, eye, or respiratory irritation.

Should sidewalks and roads be disinfected to prevent COVID-19?

CDC does not recommend disinfection of sidewalks or roads. Spraying disinfectant on sidewalks and roads is not an efficient use of disinfectant supplies and has not been proven to reduce the risk of COVID-19. Spreading the virus that causes COVID-19 from these surfaces is very low and disinfecting these surfaces is not recommended.

COVID-19 and Animals

Can I get COVID-19 from my pets or other animals?

At this time, there is no evidence that animals play a significant role in spreading the virus. Based on the limited information available to date, the risk of animals spreading COVID-19 is likely to be low. A small number of pets have been reported to be infected with the virus that causes COVID-19, but contact with people with COVID-19.

Pets have other types of coronaviruses that can make them sick, like canine and feline coronavirus. These coronaviruses cannot infect people and are not related to the current COVID-19 outbreak.

However, since animals can spread other diseases to people, it's always a good idea to practice good hygiene around pets and other animals, such as washing your hands and maintaining good hygiene. For more information on the benefits of pet ownership, as well as staying safe and healthy around animals including wildlife, visit CDC's [Healthy Pets, Healthy People website](#).

Do I need to get my pet tested for COVID-19?

No. At this time, routine testing of animals for COVID-19 is not recommended.

Can animals carry the virus that causes COVID-19 on their skin or fur?

Although we know certain bacteria and fungi can be carried on fur and hair, there is no evidence that the virus that causes COVID-19, including the virus that causes COVID-19, can spread to people from the skin, fur, or hair of animals.

However, because animals can sometimes carry other germs that can make people sick, it's important to practice [healthy habits](#) around pets and other animals, including washing hands before touching them.

Should I avoid contact with pets or other animals if I am sick with COVID-19?

We are still learning about this virus, but it appears that it can spread from people to animals. Until we learn more about this new coronavirus, you should restrict contact with pets if you are sick with COVID-19, just like you would with people. When possible, have another person care for your animals while you are sick. If you are sick with COVID-19, avoid contact with

- Petting
- Snuggling
- Being kissed or licked
- Sharing food or bedding

If you must care for your pet or be around animals while you are sick, wash your hands with soap and water after contact with pets and wear a cloth face covering.

What animals can get COVID-19?

We don't know for sure which animals can be infected with the virus that causes COVID-19. A number of pets, including dogs and cats, reported to be infected with the virus that causes COVID-19 after close contact with people with COVID-19. A tiger at a zoo in New York has also tested positive for COVID-19.

Recent research shows that ferrets, cats, and golden Syrian hamsters can be experimentally infected and can spread the infection to other animals of the same species in laboratory settings. Dogs did not become infected or spread the infection based on results from these studies. Dogs are not as likely to become infected with the virus as cats and ferrets. These findings are based on a small number of animals, and do not show whether animals can spread infection to people.

At this time, there is no evidence that animals play a significant role in spreading the virus. Based on the limited information available to date, the risk of animals spreading COVID-19 is likely to be low. Further studies are needed to understand if and how different animals could be infected with the virus that causes COVID-19 and the role animals may play in the spread of COVID-19.

Should I worry about my pet cat?

We are still learning about this virus and how it spreads, but it appears it can spread from some situations. CDC is aware of a small number of pets, including cats, reported to be infected with the virus that causes COVID-19, mostly after close contact with people with COVID-19. Most of these animals were owned by a person with COVID-19. A tiger at a New York zoo has also tested positive for the virus that causes COVID-19.

At this time, there is no evidence that animals play a significant role in spreading the virus that causes COVID-19. Based on the limited data available, the risk of animals spreading COVID-19 to people is low. The virus that causes COVID-19 spreads mainly from person to person, typically through respiratory droplets from coughing, sneezing, or talking.

People sick with COVID-19 should isolate themselves from other people and animals, in their home or elsewhere, until we know more about how this virus affects animals. If you must care for your pet while you are sick, wear a cloth face covering and wash your hands before and after you touch the animal.

Can I walk my dog during the COVID-19 pandemic?

Walking your dog is important for both animal and human health and wellbeing. Walk your dog at least 6 feet (2 meters) away from others. Do not gather in groups, stay out of crowded places, and avoid large gatherings. To help maintain social distancing, do not let other people pet your dog while you are walking.

See “Can I take my dog to a dog park?” for information on dog parks.

Can I take my dog to a dog park?

Dog parks provide socialization and exercise for dogs, which is an important part of the a small risk that people with COVID-19 could spread it to animals, CDC recommends that with people outside of your household, especially in places with community spread of COVID-19, you should consider avoiding dog parks or other places where large numbers of people and dogs are gathered.

Some areas are allowing dog parks to open. If you choose to go to a dog park, follow local health department guidance to reduce the risk of you or your dog getting infected with COVID-19 if you go to a dog park.

- Do not take your dog to a dog park if you are [sick](#) or if you have recently been in close contact with someone who has COVID-19.
- Do not take your dog to a dog park if your dog is sick. Signs of sickness in dogs may include coughing, difficulty breathing or shortness of breath, lethargy, sneezing, discharge from the nose, or diarrhea.
- If your dog has [tested positive](#) for the virus that causes COVID-19, talk to your veterinarian for appropriate guidance for your pet to go back to normal activities.
- Try to limit your dog's interaction with other people outside of your household while at the dog park.
- As much as possible, avoid touching common items in the dog park like water bowls. Use hand sanitizer after touching items from the park. To make sure your dog has fresh water, bring your own portable water bowl.
- Limit other pet items brought to the dog park, such as toys. [Clean and disinfect](#) any items returned home (leashes, toys, water bowls).
- Do not wipe or bathe your dog with chemical disinfectants, alcohol, hydrogen peroxide, or bleach not approved for animal use.

See more [information on pets and COVID-19](#) and recommendations for how to help keep your pet safe.

Can I take my dog to daycare or a groomer?

Until we know more about how this virus affects animals, CDC encourages pet owners to limit other human family members to protect them from possible infection. This means limit pets and people outside your household as much as possible and avoiding places where they gather.

Some areas are allowing groomers and boarding facilities such as dog daycares to operate. If you use a groomer or boarding facility, follow any protocols put into place at the facility, such as [covering](#) and maintaining at least 6 feet of space between yourself and others if possible.

Limit pet items brought from home to the groomer or boarding facility, and disinfect them before returning home (such as leashes, bowls, and toys). Use an [EPA-registered disinfectant](#) and rinse thoroughly with clean water afterwards. **Do not** wipe or bathe your pet with hydrogen peroxide, or any other products not approved for animal use.

Do not put face coverings on pets, and do not take a sick pet to a groomer or boarding facility. Signs of illness in animals may include:

- Fever
- Coughing
- Difficulty breathing or shortness of breath
- Lethargy
- Sneezing
- Nasal/ocular discharge
- Vomiting
- Diarrhea

If you think your pet is sick, call your veterinarian. Some veterinarians may offer telemedicine plans for seeing sick pets. Your veterinarian can evaluate your pet and determine the next steps for treatment and care.

See more [information on pets and COVID-19](#) and recommendations for how to help keep your pet safe.

What should I do if my pet gets sick and I think it's COVID-19?

There is a small number of animals around the world reported to be infected with the virus, mostly after having contact with a person with COVID-19. Talk to your veterinarian about what to do if you have concerns about your pets.

If your pet gets sick after contact with a person with COVID-19, **do not take your pet to a veterinarian**. Call your veterinarian and let them know the pet was around a person with COVID-19. Seek telemedicine consultations or other plans for seeing sick pets. Your veterinarian can evaluate the next steps for your pet's treatment and care.

Why are animals being tested when many people can't get tested?

Animals are only being tested in very rare circumstances. Routine testing of animals is rare, and any tests done on animals are done on a case by case basis. For example, if the pet is new, concerning illness with symptoms similar to those of COVID-19, the animal's veterinarian, public health and animal health officials to determine if testing is needed.

Are pets from a shelter safe to adopt?

Based on the limited information available to date, the risk of animals spreading COVID-19 is believed to be low. There is no reason to think that any animals, including shelter pets, play a significant role in the spread of the virus that causes COVID-19.

What should I do if there are pets at my long-term care facility or assisted living facility?

Based on the limited information available to date, the risk of animals spreading COVID-19 is low. However, it appears that the virus that causes COVID-19 can spread from people in contact with people with COVID-19.

Until we learn more about how this virus affects animals, use similar precautions for pets in your facility as you would for other people in your facility. This will help protect both people and pets from COVID-19.

- Do not let pets in the facility interact with sick people.
- Pets or other animals should not be allowed to roam freely around the facility.
- Residents should avoid letting their pets interact with people as much as possible.
- Dogs should be walked on a leash at least 6 feet (2 meters) away from others.
- People sick with COVID-19 should **avoid contact with pets and other animals.**
- Do not allow pets into common areas of the facility such as cafeterias and social areas.
- Cats should be kept indoors to prevent them from interacting with other animals or people.

Talk to a veterinarian [if a pet in your facility gets sick](#) or if you have any concerns about your facility. If you think a pet in the facility was exposed to or is showing [signs](#) consistent with COVID-19, contact your [state health official](#) to discuss guidance on testing pets or other animals for the virus that causes COVID-19.

People who are at [higher risk for severe illness](#) from COVID-19 should avoid providing care for animals in the facility.

For more information, visit CDC's [If You Have Pets](#) webpage.

What about imported animals or animal products?

CDC does not have any evidence to suggest that imported animals or animal products spread COVID-19 in the United States. This is a rapidly evolving situation and information will be available. CDC, the U. S. Department of Agriculture (USDA), and the U.S. Fish and Wildlife Service have complementary roles in regulating the importation of live animals and animal products.

- [CDC regulates](#) animals and animal products that pose a threat to human health,
- [USDA regulate](#) [↗](#) animals and animal products that pose a threat to agriculture; and
- [FWS regulates](#) [↗](#) importation of endangered species and wildlife that can harm the environment, humans, the interests of agriculture, horticulture, or forestry, and the welfare and survival of the animals.

Can I travel to the United States with dogs or import dogs into the United States during a COVID-19 outbreak?

Please refer to [CDC's requirements for bringing a dog to the United States](#). The current [vaccination](#) requirements apply to dogs imported from high-risk countries for rabies.

What precautions should be taken for animals that have recently been imported from other countries (for example, by shelters, rescues, or as personal pets)?

Imported animals will need to meet [CDC](#) and [USDA](#) [↗](#) requirements for entering the United States. There is no evidence that companion animals, including pets and service animals, can spread COVID-19. As with any animal introduced to a new environment, animals recently imported should be monitored for signs of illness. If an animal becomes ill, the animal should be examined by a veterinarian at a veterinary clinic **before** bringing the animal into the clinic and let them know that the animal is from another country.

This is a rapidly evolving situation and information will be updated as it becomes available.

Can wild animals spread the virus that causes COVID-19 to people or pets?

Currently, there is no evidence to suggest the virus that causes COVID-19 is circulating in the United States, or that wildlife might be a source of infection for people in the United States. The first wild animal testing positive for the virus in the United States was a tiger with a respiratory illness in New York City. However, this tiger was in a captive zoo environment, and public health officials believe the virus was spread after being exposed to a zoo employee who was infected and spreading the virus.

If a wild animal were to become infected with the virus, we don't know whether the virus could spread among wildlife or if it could spread to other animals, including pets. Further studies are needed to understand how different animals, including wildlife, could be affected by COVID-19. Because wildlife can be infected even without looking sick, it is always important to enjoy wildlife from a distance.

Take steps to prevent getting sick from wildlife in the United States:


- Keep your family, including pets, a safe distance away from wildlife.
- Do not feed wildlife or touch wildlife droppings.
- Always wash your hands and supervise children washing their hands after working with wildlife.
- Leave orphaned animals alone. Often, the parents are close by and will return for their young.
- Consult your state wildlife agency's guidance if you are preparing or consuming legal wildlife.
- Do not approach or touch a sick or dead animal – contact your state wildlife agency if you see one.

Can bats in United States get the virus that causes COVID-19, and can they spread it?

Other coronaviruses have been found in North American bats in the past, but there is no evidence that the virus that causes COVID-19 is present in any free-living wildlife in the United States, including bats. While other coronaviruses do not cause illness or death in bats, but we don't yet know if this new coronavirus could affect American species of bats sick. Bats are an important part of natural ecosystems, and their populations are declining in the United States. Bat populations could be further threatened by the disease on bats resulting from a misconception that bats are spreading COVID-19. However, there is no evidence that bats in the United States are a source of the virus that causes COVID-19 for people. Further studies are needed to understand if and how bats could be affected by COVID-19.

Is hunter-harvested game meat safe to eat during the COVID-19 pandemic?

Currently, there is no evidence that you can get infected with the virus that causes COVID-19 from wild hunted game meat. However, hunters can get infected with other diseases when processing animals. Hunters should always practice good hygiene when processing animals by following the recommendations:

- Do not harvest animals that appear sick or are found dead.
- Keep game meat clean and cool the meat down as soon as possible after harvesting.
- Avoid cutting through the backbone and spinal tissues and do not eat the brains of animals.
- When handling and cleaning game:
 - Wear rubber or disposable gloves.
 - Do not eat, drink, or smoke.
- When finished handling and cleaning game:
 - Wash your hands thoroughly with soap and water.
 - Clean knives, equipment, and surfaces that were in contact with game meat with a disinfectant. While these recommendations apply to general food safety practices about COVID-19, you may use a product on the [EPA list of disinfectants for use against COVID-19](#) .
- Cook all game meat thoroughly ([to an internal temperature of 165°F or higher](#)).
- Check with your state wildlife agency regarding any testing requirements for other diseases and instructions regarding preparing, transporting, and consuming game meat.

How can I safely run my equestrian facility?

You should follow your state and/or local jurisdictional guidance regarding continuing care. There have not been any reports of horses testing positive for the virus that causes COVID-19. Based on limited information available to date, the risk of animals spreading the virus that causes COVID-19 is considered to be low. COVID-19 is primarily spread from person to person, so steps should be taken to reduce risks for people visiting your facility.

- Encourage employees and other visitors, including boarders, owners, farriers, veterinarians, and students, not to enter the facility if they are sick. Employees should not return to work until the following criteria are met, after talking with their doctor. Implement sick leave policies that are nonpunitive, and consistent with public health guidance, allowing employees to stay home if they have signs of respiratory infection.
- Consider conducting daily health checks (e.g., symptom and/or temperature screening) for all others visiting the facility before they enter the premises. People with a fever of 100.4°F (38°C) or other [signs of illness](#) should not be admitted to the premises. If implementing health checks, do so in a safe and respectfully. See [General Business FAQs](#) for more information.
 - Employees or visitors who appear to have symptoms upon arrival or who become ill while at the facility should immediately be separated from other employees and visitors and sent home.
- Limit the number of people entering the facility. Consider staggering lesson and visitation times to reduce the number of people in the facility and potential for person-to-person contact. If possible, decrease high-traffic areas by limiting areas open to visitors/owners or staggering use of grooming or wash stalls and tack rooms.
- Increase distance and limit duration of contact between employees and visitors if possible, people should maintain at least 6 feet of distance between each other at the facility, including during teaching lessons. Allow for [social distancing](#) and avoid large numbers of people with employee-only areas.
- Visitors and employees should wear cloth face coverings to protect others especially in areas where social distancing measures are difficult to maintain. Wearing a cloth face covering does NOT replace other measures such as social distancing.
- Set up hand hygiene stations at the entrance and within the facility, so that employees and visitors can clean their hands before they enter. Employees should [wash hands](#) regularly with soap and water for 20 seconds. An alcohol-based hand sanitizer containing at least 60% alcohol can be used if soap and water are not available. If dirty, they should be washed with soap and water before using an alcohol-based hand sanitizer. Hand hygiene stations may be a hose and soap located at entrances to allow for hand washing.
- Clean and disinfect frequently touched surfaces such as grooming tools, halters, leashes, and tack.

See also: [Pets and Other Animals](#)

Community Mitigation

What is community mitigation?

Community mitigation activities are actions that people and communities can take to slow the spread of diseases, including COVID-19. Community mitigation is especially important before a vaccine is available.

What are community mitigation actions for COVID-19?

Some community mitigation actions may include:

- [Washing](#) hands often
- Avoiding close contact with people who are sick, and practicing [social distancing](#)
- Covering mouth and nose with a [cloth face cover](#) when around others
- Covering coughs and sneezes
- Cleaning and disinfecting frequently touched surfaces daily

Who is involved in community mitigation actions?

Individuals, communities, schools, businesses and healthcare organizations all have a role in community mitigation. Policies*, which include limits on large gatherings, restrictions on businesses, and social distancing, are often needed to fully put in place community mitigation strategies.

Each community is unique. Because some actions can be very disruptive to daily life, mitigation strategies are often different depending on how much disease has spread within the community, what the local health department can do, and the ability to take these actions at the local level. To identify appropriate activities, a community's needs and the ability to take these actions at the local level. To identify appropriate activities, a community's needs might be impacted need to be considered, including [populations most vulnerable to severe illness](#). These populations might be more impacted socially or economically. When selecting mitigation activities, state and local officials should consider the spread of disease locally, characteristics of the people who live in the community (such as age groups, languages spoken, overall health status), and the kind of public health resources (such as testing facilities, hospitals) that are available in the community. State and local officials may need to adjust mitigation activities and immediately take steps to scale them up or down depending on the changing situation.

Putting mitigation into practice is based on:

- Emphasizing individual responsibility for taking recommended personal-level actions
- Empowering businesses, schools, and community organizations to take recommended actions in ways that protect persons at increased risk of severe illness
- Focusing on settings that provide critical infrastructure or services to individuals at increased risk
- Minimizing disruptions to daily life to the extent possible

*CDC cannot address the policies of any business or organization. CDC shares recommended actions based on available science to help people make decisions that improve their health and safety. In addition, CDC provides guidance of your healthcare provider and local health department. Local decisions depend on local conditions.

COVID-19 and Water

Can the virus that causes COVID-19 spread through drinking water?

The virus that causes COVID-19 has not been detected in drinking water. Conventional water treatment processes, such as those in most municipal drinking water systems, use filtration and disinfection, such as those in most municipal drinking water systems, to remove the virus that causes COVID-19.

Is the virus that causes COVID-19 found in feces (stool)?

The virus that causes COVID-19 has been found in the feces of some patients diagnosed with COVID-19. It is unclear whether the virus found in feces may be capable of causing COVID-19. There has been one report of the virus spreading from feces to a person. Scientists also do not know how the virus could be spread from the feces of an infected person to another person. However, they have data from previous outbreaks of diseases caused by related coronaviruses, such as severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS).

Can the virus that causes COVID-19 spread through pools, hot tubs, spas, and water playgrounds?

There is no evidence that the virus that causes COVID-19 can be spread to people through pools, hot tubs, or water playgrounds. Additionally, proper operation of these aquatic venues (including the use of chlorine or bromine) should inactivate the virus.

While there is [ongoing community spread](#) of the virus, it is important for individuals, as well as pools, hot tubs, and water playgrounds (for example, at hotels or apartment complexes) to take steps to ensure health and safety:

- Everyone should follow state, local, territorial, or tribal guidance that might determine how pools, hot tubs, or water playgrounds may operate and might include [CDC considerations](#).
- Individuals should continue to [protect themselves and others](#) at public pools, hot tubs, and water playgrounds both in and out of the water – for example, by [staying at least 6 feet away from people](#) and [wearing cloth face covers](#) when not in the water.
- In addition to ensuring water quality and safety, operators of public pools, hot tubs, and water playgrounds should follow [guidance on cleaning and disinfecting community facilities](#).

Can the COVID-19 virus spread through sewerage systems?

The virus that causes COVID-19 has been found in untreated wastewater. Researchers (1) report that the virus can cause disease if a person is exposed to untreated wastewater or sewerage systems. To date, there is no information to date that this has occurred. At this time, the risk of transmission of the virus that causes COVID-19 through designed and maintained sewerage systems is thought to be low.

Should wastewater workers take extra precautions to protect themselves from the virus that causes COVID-19?

Recently, the virus that causes COVID-19 has been found in untreated wastewater. While there is no information to date that anyone has become sick with COVID-19 because of exposure to untreated wastewater, standard practices should be followed to protect workers from the virus that causes COVID-19.

Standard practices associated with wastewater treatment plant operations should be sufficient to protect workers from the virus that causes COVID-19. These standard practices can include engineering controls, hygiene precautions, specific safe work practices, and personal protective equipment required when handling untreated wastewater. No additional COVID-19-specific protective measures are required for workers involved in wastewater management, including those at wastewater treatment plants.

If my utility has issued a Boil Water Advisory, can I still use tap water to wash my hands?

In most cases, it is safe to [wash your hands](#) with soap and tap water during a [Boil Water Advisory](#). Follow guidance from your local public health officials. If soap and water are not available, use hand sanitizer containing at least 60% alcohol.

Footnotes

¹Fever may be subjective or confirmed

²Close contact is defined as—

a) being within approximately 6 feet (2 meters) of a COVID-19 case for a prolonged period while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case

– or –

b) having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed

If such contact occurs while not wearing recommended personal protective equipment or NIOSH-certified disposable N95 respirator, eye protection), criteria for PUI consideration are:

See CDC's updated [Interim Healthcare Infection Prevention and Control Recommendations for Investigation for 2019 Novel Coronavirus](#).

Data to inform the definition of close contact are limited. Considerations when assessing duration of exposure (e.g., longer exposure time likely increases exposure risk) and the clinical presentation of COVID-19 (e.g., coughing likely increases exposure risk as does exposure to a severely ill patient) should be given to those exposed in health care settings.