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Coronavirus Disease 2019 (COVID-19)

Frequently Asked Questions

Updated May 4, 2020

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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 the disease 2019 (COVID-19), is not the same as the [coronaviruses that commonly circulate](#) and cause a 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 coronaviruses.

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 is coronavirus disease 2019, abbreviated as COVID-19. In COVID-19, 'CO' stands for 'corona,' 'VI' for 'virus.' 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 previously identified 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 in areas where 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, people who were in quarantine, or healthcare professionals.

Stigma is discrimination against an identifiable group of people, a place, or a nation. Stigma can be caused by a lack of knowledge about how COVID-19 spreads, a need to blame someone, fears about discrimination, or 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 is an 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 COVID-19](#). Everyone can help stop stigma related to COVID-19 by [knowing the facts](#) and 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 finding and confirming cases displayed by different places 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 cases that 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.

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. These viruses can infect people and then spread between people. This occurred with [MERS-CoV](#) and [SARS-CoV](#) virus that causes COVID-19. The SARS-CoV-2 virus is a betacoronavirus, like MERS-CoV and SARS-CoV. These viruses have their origins in bats. The sequences from U.S. patients are similar to those of SARS-CoV-2 sequences posted, suggesting a likely single, recent emergence of this virus from an animal reservoir. The source of this virus is unknown.

More information about the source and spread of COVID-19 is available on the [Situation Report: 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 the faces of 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 in a hospital 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 the state and local public health officials. The decision involves considering the specifics of the person's 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 discuss the decision with your healthcare provider with 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 had 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 or 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 the 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 coronaviruses are 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 new data about how COVID-19 spreads, along with evidence of widespread C communities across the country, CDC recommends that people wear a [cloth face cover](#) mouth in the community setting. This is an additional public health measure people sh of COVID-19 in addition to (not instead of) social distancing, frequent hand cleaning and actions. A cloth face covering is not intended to protect the wearer, but may prevent th wearer to others. This would be especially important in the event that someone is infec symptoms. A cloth face covering should be worn whenever people must go into public : example). Medical masks and N-95 respirators are reserved for healthcare workers and recommended by current CDC guidance.

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 a often by respiratory droplets. Although the virus can survive for a short period on some spread from domestic or international mail, products or packaging. However, it may be COVID-19 by touching a surface or object that has the virus on it and then touching thei 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 p need for donated blood is constant, and blood centers are open and in urgent need of r people who are well to continue to donate blood if they are able, even if they are practi of COVID-19. CDC is supporting blood centers by providing recommendations that will l Examples of these recommendations include spacing donor chairs 6 feet apart, thorough environmental cleaning practices, and encouraging donors to make donation appointm

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 a eyeglass wearers.
- Contact lens wearers should continue to [practice safe contact lens wear and care hy](#) against transmission of any contact lens-related infections, such as always washing h before handling lenses.
- People who are healthy can continue to wear and care for their contact lenses as pr 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

Is contact lens disinfecting solution effective against COVID-19?

- [Hydrogen peroxide-based systems](#) for cleaning, disinfecting, and storing contact len against the virus that causes COVID-19.
 - For other disinfection methods, such as multipurpose solution and ultrasonic c enough scientific evidence to determine efficacy against the virus.
- [Always use solution](#) to disinfect your contact lenses and case to kill germs that may l
- 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

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. Although 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 do the following things they 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 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 use hand sanitizer properly and 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 the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting that will protect the item. Dirty laundry from an ill person can be washed with other people's items.

You can find additional information on preventing COVID-19 at [Prevention for 2019 Novel Coronavirus \(COVID-19\)](#) at [Preventing COVID-19 Spread in Communities](#). Additional information on how COVID-19 spreads is available 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 will generally present with mild symptoms. Reported symptoms in children include cold-like symptoms such as runny nose, and cough. Vomiting and diarrhea have also been reported. It's not known if children may be at higher risk for severe illness, for example, children with underlying medical conditions or healthcare needs. There is much more to be learned about how the disease impacts children.

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 health practices. A cloth face covering is not intended to protect the wearer but may prevent the spread of virus. This would be especially important if someone is infected but does not have symptoms. N95 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 link between children and COVID-19. Most illness, including serious illness, is happening in adults of working age and older adults. Children do not seem to 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 help reduce the spread of COVID-19 in the community.

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 out, 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 make phone 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 suggest that children may have only mild symptoms. However, they can still pass this virus onto others with whom they have contact, 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 have 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, unexplained changes in behavior, 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. Proper handwashing 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. If weather is not ideal, walk 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 coordinate with someone positioned to provide childcare. If someone at higher risk for COVID-19 will be providing care (such as a grandparent or someone with a serious underlying medical condition), limit your child's contact with other 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 from COVID-19.

More data are needed to learn which underlying or complex medical conditions may put children at a higher risk. 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, find out 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 you and 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, [particularly 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, including:

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

When to Seek Medical Attention

If you have any of these **emergency warning signs*** for COVID-19 get medical attention immediately.

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion or inability to arouse
- Bluish lips or face

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

Call 911 if you have a medical emergency: Notify the operator that you have, or think you have, COVID-19. If possible, put on a cloth face covering before medical help arrives.

- 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 with at least 60% alcohol when soap and water are not available. These actions are part [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 a soap at removing germs.
- If soap and water are not readily available, you can use an FDA-approved alcohol-k contains at least 60% alcohol. You can tell if the sanitizer contains at least 60% alcc label.

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

- To be effective against killing some types of germs, [hand sanitizers](#) need to have a 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 forr 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 cold to severe illness. People with these symptoms or combinations of symptoms may have COVID-19:

- Cough
- Shortness of breath or difficulty breathing

Or at least two of these symptoms:

- Fever
- Chills
- Repeated shaking with chills
- Muscle pain
- Headache
- Sore throat
- New loss of taste or smell

This list is not all inclusive. Please consult your medical provider for any other symptom concerning to you.

Read about [COVID-19 Symptoms](#)

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

It is possible to test positive for flu (as well as other respiratory pathogens) and the virus at the same time.

Should I be tested for COVID-19?

Not everyone needs to be tested for COVID-19. For information about testing, see [Testing](#)

Where can I get tested for COVID-19?

The process and locations for testing vary from place to place. Contact your state, local, department for more information, or reach out to a medical provider. State and local pl received tests from CDC while medical providers are getting tests developed by comme supplies of these tests are increasing, it may still be difficult to find someplace to get tes [COVID-19](#) for more information.

Can a person test negative and later test positive for COVID-19?

Using the CDC-developed viral test, a negative result means that the virus that causes C person's sample. In the early stages of infection, it is possible the virus will not be detec

For COVID-19, a negative test result for a sample collected while a person has symptom COVID-19 virus is not causing their current illness.

What kind of test is being used to diagnose if I have COVID-19?

There are actually many tests being used to diagnose COVID-19 that the U.S. Food & Dr authorized for use during the current emergency. All of these viral tests identify the viru respiratory system, such as from nasal or nasopharyngeal swabs. Some tests are condu visit, and results are available to you within minutes. Other tests must be sent to a labo that takes 1-2 days once the lab receives your samples.

Locations and types of testing sites vary depending on where you live (see question: [Wh](#) with your testing site to learn which test it uses. You can find a [patient information shee website](#) [↗](#) .

In the coming weeks, healthcare providers in most states will begin offering home colle and Drug Administration (FDA) has authorized for use during the current emergency. A to give you the approved kit – the Pixel by LabCorp COVID-19 test home collection kit. Y sample (a nasal swab) at home and then send your sample to a laboratory for analysis.

For more information please see [FDA's most recent press release](#) [↗](#) .

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 SARS-CoV-2, the virus that causes COVID-19. These antibodies are produced when someone has been infected, so a positive result indicates that person was previously infected with the virus.

CDC is working with other federal agencies to evaluate the performance of commercial antibody tests that are becoming increasingly available from healthcare providers. This evaluation is ongoing and will be completed in early May.

We do not know yet if the antibodies that result from infection with SARS-CoV-2 can prevent reinfection with this virus (immunity) or how long antibodies to the virus will protect someone. CDC is conducting research to answer those questions.

Antibody tests may not be able to tell you if you are currently infected because it typically takes time to develop antibodies to SARS-CoV-2. To tell if you are currently infected, you would need a test that looks for the virus in samples from your upper respiratory system, such as a nasopharyngeal swab.

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

CDC and partners are investigating to determine if you can get sick with COVID-19 more than once. We are not sure if you can become re-infected. Until we know more, continue to take steps to 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 [Page 6 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 update this list.

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. All medication changes 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 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. For more information, see [What does more severe illness mean?](#) your healthcare provider if you have a question about your health or how your health condition is being managed.

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 the risk of serious illness and poorer outcomes from COVID-19. Adults with disabilities also have a higher risk of 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 condition or how your health is being managed.

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 for a 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 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 mainly spreads 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 the faces of people who are nearby or possibly be inhaled into the lungs. This type of spread is not thought 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. There is less of a chance of the virus spreading from certain types of touching, such as holding the hand of someone who 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 eye protection).

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 disinfectants. 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, decontaminate the outside of the bag with a [product with EPA-approved emerging viral pathogens claims](#) that is effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for cleaning and disinfection products (e.g., concentration, application method and contact time). Wear nitrile gloves 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 is required for aerosols or if required for chemicals used in embalming. Follow the manufacturer's label. Wear heavy-duty gloves over nitrile disposable gloves if there are 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 effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer's instructions for cleaning and 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.

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 notify US consular officials at the Department of State. Consular personnel are available 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 Office of Overseas Citizens Services in Washington, DC, from 8 am to 5 pm Eastern time 888-407-4747 (toll-free) or 202-501-4444. For emergency assistance after working hours holidays, call the Department of State switchboard at 202-647-4000 and ask to speak with Overseas Citizens Services duty officer. In addition, the [US embassy](#)  closest to or in the country where the deceased person lived 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 embalmed. 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 does not kill germs, but it helps prevent infection. *Disinfecting* kills germs on surfaces. By killing germs on a surface after cleaning, it helps prevent the spread of infection.

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 use 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 of infection. A surface may have gotten the virus on it from a person with or suspected to have COVID-19. Cleaning and disinfecting the surface kills germs on surfaces.

Who should clean and disinfect community spaces?

Regular cleaning staff can clean and disinfect community spaces. Cleaning staff should use cleaning and disinfection chemicals and be provided with the personal protective equipment and 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 is in 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, or other devices. 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 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 prevent 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 prevent 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 surfaces is an inefficient use of disinfectant supplies and has not been proven to reduce the risk of COVID-19 spreading. The risk of 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 believed 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 take steps to protect your pets and other animals, such as washing your hands and maintaining good hygiene. For more information on the many 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 including the virus that causes COVID-19, can spread to people from the skin, fur, or ha

However, because animals can sometimes carry other germs that can make people sick practice [healthy habits](#) around pets and other animals, including washing hands before 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 ar Until we learn more about this new coronavirus, you should restrict contact with pets a are sick with COVID-19, just like you would with people. When possible, have another m care for your animals while you are sick. If you are sick with COVID-19, avoid contact wit

- 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 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 small 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 the virus that causes 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. Domestic 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 that causes COVID-19. Based on the limited information available to date, the risk of animals spreading COVID-19 to people 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 in contact with 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 likely to be 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 homes, 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 pet.

Can I walk my dog?

Walking a dog is important for both animal and human health and well-being. Walk dog least 6 feet (2 meters) from other people and animals, do not gather in groups, and stay avoid mass gatherings. Do not go to dog parks or public places where a large number o help maintain social distancing, do not let other people pet your dog when you are out

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 v mostly after having contact with a person with COVID-19. Talk to your veterinarian abou have about your pets.

If your pet gets sick after contact with a person with COVID-19, **do not take your pet to** Call your veterinarian and let them know the pet was around a person with COVID-19. S telemedicine consultations or other plans for seeing sick pets. Your veterinarian can evi 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 r and any tests done on animals are done on a case by case basis. For example, if the pet new, concerning illness with symptoms similar to those of COVID-19, the animal's veteri 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 be low. There is no reason to think that any animals, including shelter pets, play a signif virus that causes COVID-19.

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 species.

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 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 see 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 make 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.

See also: [Animals and COVID-19](#)

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 C

– 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 :

See CDC's updated [Interim Healthcare Infection Prevention and Control Recommendation 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 cl with COVID-19 (e.g., coughing likely increases exposure risk as does exposure to a several consideration should be given to those exposed in health care settings.