Information for Patients about the new Coronavirus (COVID-19)

The novel (new) coronavirus was discovered in late December 2019 and is beginning to spread around the world. Spread like this occurs every year with the influenza virus. The concerning thing about this spread happening with the COVID-19 is that we don’t have as much experience or knowledge yet as we do with influenza – exactly how is it spread (sneezing, coughing, hand-to-hand), how “contagious” is it, how long does an infection last, how sick can people get with it, is there a treatment that’s needed? Experts are beginning to get these answers. One interesting thing is that many (possibly up to 2/3) people may have COVID-19 but have no symptoms, either the entire time they have the virus or for a period of time after being sick with it. Though this means that someone can look well and spread the virus to others, it also means that the virus may not cause that severe of illness in most patients. Here are some common questions that many patients and medical personnel have.

What are the risk-factors for COVID-19? The Centers for Disease Control and Prevention (“the CDC”) has defined risk factors that make is much more likely that someone has COVID-19. Those with these risk factors are being called “persons under investigation” or “PUI”. This changes over time as we learn new information. The CDC posts updates at: https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html. As of February 29, there are 3 high-risk groups:

- Someone with fever OR lung symptoms (cough, chest pain, breathing difficulty, low oxygen level abnormal lung exam or x-ray) who has had close contact within 14 days of feeling ill, with someone with confirmed COVID-19
- Someone with fever AND lung symptoms (cough, chest pain, breathing difficulty, low oxygen level abnormal lung exam or x-ray) who has a history of travel to any part of China and also Iran, Italy, Japan and South Korea within 14 days of symptoms onset.
- Someone with fever and lung symptoms severe enough to require hospitalization with who does not have an alternative diagnosis (eg influenza)

I feel sick. Should I get tested for COVID-19? Tests are in short supply and results take close to a week to come back, so currently the CDC is authorizing testing only for those with risk factors. Broader testing may be recommended soon. If you feel sick and have no COVID-19 risk factors, you should make the same decisions about seeking medical care as you would ordinarily. Determining whether you have a cold, influenza, bronchitis or pneumonia is important, but still done the same way as before COVID-19. If you feel moderately to severely ill, you should seek medical care promptly.

I don’t feel sick but am worried. Should I get tested for COVID-19? As above, testing is currently only available for those with risk factors. As more tests become available, with quicker result times, testing more and more people may be recommended and some predict that even home testing might become available. This sort of testing may help reduce spread of virus by those with no symptoms, but it is currently not available.

What is the treatment for COVID-19? Supportive treatments (oxygen, IV fluids, breathing treatments) are being used in hospitalized patients with severe symptoms but there is no specific treatment for COVID-19 the way there is for influenza. Antibiotics do not help COVID-19 unless there is a bacterial infection as a complication.
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I do not want to get COVID-19. What should I do? People who feel well can make their own personal decisions about spending time in public or around large numbers of people but limiting this is currently not being recommended. People should avoid travel to countries where COVID-19 is more prevalent (those listed in the risk-factors) unless absolutely necessary; in some cases, travel may be restricted. There is currently no vaccine for COVID-19. The CDC recommends a variety of actions to decrease the spread of any respiratory illness and so this would apply to COVID-19 prevention as well.

- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.
- Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing.
- 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.
- CDC does not recommend that people who are well wear a facemask to protect themselves from respiratory diseases, including COVID-19.
- Facemasks should be used by people who show symptoms of COVID-19 or any respiratory illness, to help prevent the spread of the disease to others. The use of facemasks is also crucial for health care workers and caregivers in close settings.
- In addition, when caring for patients with COVID-19 risk factors, healthcare personnel should use an N95 mask as well as a gown, gloves and a face shield.
- Stay up to date on risk factor information to know whether you should be tested. This is available at: https://www.cdc.gov/coronavirus/2019-nCoV/hcp/clinical-criteria.html

Other information for patients and the public is available from the CDC at: