

# COVID-19 (Coronavirus Disease)

## Frequently Asked Question (FAQ) - For Internal Use Only

Current as of: March 23, 2020

DISCLAIMER: COVID-19 information is rapidly changing and documents will be updated accordingly.

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### Signs, Symptoms, and Spread

DISCLAIMER: COVID-19 information is rapidly changing and documents will be updated accordingly.

**1. What is COVID-19?**

COVID-19 is a new respiratory coronavirus disease first identified in Wuhan, Hubei Province, China. Coronaviruses are a large family of viruses. Some cause illness in people; numerous other coronaviruses circulate among animals. Similarly, Severe Acute Respiratory Syndrome Coronavirus (SARS-CoV) and Middle Eastern Respiratory Syndrome Coronavirus (MERS-CoV) have evolved and caused transmission from animal to humans in previous years.

**2. What are the signs and symptoms of the COVID-19?**

Current symptoms reported for patients with COVID-19 have included mild to severe respiratory illness with fever, cough, and difficulty breathing.

**3. When do symptoms appear after exposure?**

The Centers for Disease Control and Prevention (CDC) currently believes that symptoms may appear in as few as 2 days or as long as 14 after exposure.

**4. How does the virus spread?**

Currently, the virus is presumed to spread by close person-to-person contact. It is believed that respiratory droplet and contact is the main route of transmission similar to how influenza and other respiratory pathogens spread.

**5. What does “close contact” mean?**

Close contact is defined as:

- a) Being within approximately 6 feet (2 meters), or within the room or care area, of a COVID-19 case for a prolonged period of time while not wearing recommended personal protective equipment or PPE (e.g., gowns, gloves, NIOSH-certified disposable N95 respirator, eye protection);
- b) Caring for, living with, visiting with a COVID-19 case; or
- c) Having direct contact with infectious secretions of a COVID-19 case (e.g., being coughed on) while not wearing recommended personal protective equipment.

**6. What is the incubation period for COVID-19?**

The time between exposure to and the onset of symptoms for COVID-19 may be 2 to 7 days, although in some cases it may be as long as 14 days. For this reason, patients are monitored for symptoms for 14 days after exposure.

## Cleaning and Infectious Waste

### 7. How should infectious waste from COVID-19 patients be disposed of?

Follow facility policy on infectious waste disposal. There are no additional recommendations on handling of linen, trash or food trays. Whenever possible, use disposable patient use items (e.g. stethoscope, blood pressure cuff).

### 8. What are recommendations for cleaning COVID-19 patient rooms?

Follow facility protocol for cleaning isolation rooms. Maintain the room vacant post discharge for one hour prior to terminal clean.

## Healthcare/Employee Workers

### 9. What is the protocol for healthcare workers returning from international travel?

Any employee identified as returning from a country designated as Level 3 by the CDC will be required to self-quarantine for 14 days, and will need to respond to questions on the CommonSpirit Health COVID-19 questionnaire via telephone call with the division/facility Employee Health Department. Employee Health will check in with the employee each day of the 14-day quarantine and will document symptom information on the questionnaire.

## Isolation Precautions and Personal Protective Equipment (PPE)

### 10. What isolation precautions are recommended for suspected or confirmed COVID-19 patients?

Contact and droplet precautions with eye protection is recommended. In addition, if an aerosolizing generating procedure is performed (e.g., Intubation/extubation, oral suctioning, breathing treatments, BiPAP/CPAP), a N95 must be worn and moved to an airborne isolation room (if available).

Upon patient identification, **immediately** provide a mask to the patient and notify your healthcare facility's infection prevention personnel.

Healthcare personnel **entering the room** should wear the following Personal Protective Equipment (PPE):

- Gloves
- Gown
- Standard/surgical mask (wear a N95 respirator or PAPR when performing an aerosolizing generating procedure)
- Goggles or face shield

**During transport**, the patient should wear a surgical mask. Do not use N95 respirators on patients.

**11. How should an employee dispose of personal protective equipment?**

Disposal of personal protective equipment (PPE) does not require any special condition or process. Utilizing the same process and receptacle as currently established for PPE is appropriate.

**12. How long should a patient stay under isolation precautions?**

Suspected or confirmed COVID-19 cases should remain under isolation precautions until cleared by local health department.

## **Specimens, Visitation, and Discharge**

**13. What are the guidelines for specimen collection and handling?**

Clinical specimens should be collected from PUIs as identified by the Centers for Disease Control and Prevention. Typical specimens required include nasopharyngeal and oral pharyngeal swabs.

**14. Is patient visitation permitted?**

Each facility has adopted visitation restrictions based on internal assessment and recommendations from local and State health departments as well as CSH national office.

**15. When can a COVID-19 patient be discharged?**

Patients should not be discharged without approval from the local health department.

## **References**

CDC Information for Healthcare Professionals

<https://www.cdc.gov/coronavirus/2019-ncov/guidance-hcp.html>

CDC Sequence for Donning/Doffing PPE

<https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf>

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