

Novel Coronavirus 2019 (COVID-19) Frequently Asked Questions

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The purpose of this document is to provide public health and community partners with frequently asked questions and answers that may be used to assist in responding to inquiries from their communities.

PLEASE NOTE: New or updated information appears in orange text.

GENERAL INFORMATION

What is a novel Coronavirus?

A novel coronavirus is a new coronavirus that has not been previously identified. The virus causing coronavirus disease 2019 (COVID-19) is not the same as the [coronaviruses that commonly circulate among humans](#) and cause mild illness like the common cold. Patients with COVID-19 will be evaluated and cared for differently than patients with the common coronaviruses. <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

Where did the COVID-19 virus come from?

Coronaviruses are a large family of viruses. Some cause illness in people, and others cause illness in animals. Rarely, animal coronaviruses infect people and then can spread person to person. This occurred for the viruses that cause Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome Coronavirus 1 (SARS-CoV-1), and probably occurred for the virus that causes COVID-19. <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

Is the COVID-19 virus the same as the MERS-CoV or SARS-CoV-1 virus?

No. The coronavirus causing COVID-19 is similar to *but not the same* as SARS-CoV-1 that caused the SARS epidemic in 2002 and the MERS Co-V that emerged in 2012. This is important because SARS-CoV-1 and MERS-CoV cause much more serious illness. <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

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 other viruses, like those that cause the common cold and flu, spread more during cold weather months but that does not mean it is impossible to become sick with these viruses during other months. There is much more to learn about the transmissibility, severity, and other features associated with COVID-19 and investigations are ongoing. <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

ILLNESS AND SYMPTOMS

What are the symptoms of COVID-19?

Common symptoms of COVID-19 include fever, cough, sore throat, runny nose, shortness of breath, fatigue, chills, muscle aches, loss of taste and smell and, in severe cases, difficulty breathing. Read more about the symptoms of COVID-19 here: <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

How sick are people with COVID-19?

Most people infected with the virus that causes COVID-19 will have no symptoms or mild symptoms. But some (especially those older than 60 years or with other medical conditions) may develop severe illness and even die.

Everywhere I go people are coughing. How do I know they don't have COVID-19?

There are many other infections that cause fever and cough. Everyone should try to prevent getting sick from any of these infections and COVID-19 by usual but effective methods described below. If you are at higher risk for severe illness from COVID-19, due to age >60 or because you have other chronic medical conditions, it is especially important that you take these steps as shown below.

Am I at high risk for serious illness or dying if I get this virus?

If you are at higher risk for serious illness from COVID-19, it is extra important for you to take actions to reduce your risk of getting this infection. 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, including:
 - 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 treatment, smoking, bone marrow or organ transplantation, immune deficiencies, poorly controlled HIV or AIDS, and prolonged 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 I do right now if I am high risk for getting COVID-19?

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 and emergency signs. If you get sick, stay home and call your doctor. More information on how to prepare, what to do if you get sick, and how communities and caregivers can support those at higher risk is available on [People at Risk for Serious Illness from COVID-19](#).

Prevent getting infected during the COVID-19 epidemic:

- Avoid close contact with people who are sick.
- Keep your hands clean.
 - Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing, or having been in a public place.
 - If soap and water are not available, use a hand sanitizer that contains at least 60% alcohol.
 - To the extent possible, avoid touching high-touch surfaces in public places – elevator buttons, door handles, handrails, handshaking with people, etc. Use a tissue or your sleeve to cover your hand or finger if you must touch something.
 - Wash your hands after touching surfaces in public places.
- Avoid touching your face, especially your nose, eyes, and mouth.

- Practice routine cleaning of frequently-touched surfaces in your environment (for example: tables, doorknobs, light switches, handles, desks, toilet handles, faucets, sinks and cell phones).
- Avoid crowds, especially in poorly-ventilated spaces.
- Avoid all non-essential travel including plane trips and cruise ships.

Stay home as much as possible:

- Consider ways of getting household items and food brought to your house through family, social, or commercial networks
- Contact your healthcare provider to ask about obtaining extra necessary prescription medications in case you need to stay home for a prolonged period of time.
 - If you cannot get extra medications, consider using mail-order for medications.
- Be sure you have over-the-counter medicines and medical supplies to treat fever and other symptoms.
 - Most people will be able to recover from COVID-19 at home.

Have a plan in case you get sick:

- Consult with your healthcare provider for more information about [monitoring your health for symptoms suggestive of COVID-19](#).
- Stay in touch with others by phone or email. You may need to ask for help from friends, family, neighbors, community health workers, etc. if you become sick.
- Determine who can provide you with care if your own caregiver gets sick.

Is there a treatment for COVID-19?

People sick with COVID-19 can receive supportive care to help relieve symptoms, such as taking pain or fever medications, drinking plenty of fluids, and resting. Most people sick with COVID-19 can stay at home. Some patients who are very sick may need to go to the hospital.

What if think I might have COVID-19?

If you develop a fever, symptoms of respiratory illness, such as cough or shortness of breath, flu-like symptoms, or loss of taste or smell you should call your healthcare professional. [Anyone with even mild symptoms of COVID-19](#) is encouraged to get tested. Testing options can be found on the [NH COVID-19 Website](#).

When can I go back to work after a respiratory illness/suspect COVID-19?

Any person with COVID-19 compatible symptoms who is not tested and can be managed at home (i.e., does not require hospitalization) should be instructed to [self-isolate](#) until:

At least 10 days have passed since symptoms first appeared

AND

At least 3 days (72 hours) have passed since recovery*

**Recovery is defined as a resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms.*

HOW THE VIRUS SPREADS

Can someone who has COVID-19 spread it to others?

Yes. The virus mainly spreads from person to person through small droplets produced when an infected person coughs or sneezes and then these droplets land in the mouths or noses of people who are nearby (within about 6 feet). The virus can also get on a sick person’s hand and then they can infect someone when they shake another person’s hand. That is why you should keep your hands clean and avoid touching your own face.

https://www.cdc.gov/coronavirus/2019-ncov/prepare/transmission.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fabout%2Ftransmission.html

How else is COVID-19 spread?

Besides the main person-to-person way described above, it is possible that a surface can become dirty with the virus from an infected person. The virus can then survive for a short period of time on that surface. If a person touches that dirty surface, that person can infect themselves by transferring the virus to their own nose, mouth, or eyes. This is much less common than from direct person-to-person contact, but it is why we are recommending frequent hand hygiene and cleaning surfaces that sick people may have coughed on or touched, like handrails.

Can someone spread the virus without being sick?

COVID-19 is thought to spread mainly through close contact from person-to-person in respiratory droplets from someone who is infected. People who are infected often have symptoms of illness. Some people without symptoms may be able to spread virus. COVID-19 is a new disease and **we are still learning about how it spreads** and the severity of illness it causes.

Does the virus spread easily?

Since the first cases in China in December, the virus that causes COVID-19 has now become global (a “pandemic”). It is spreading in communities all over the United States. **Community spread** means people have been infected with the virus but may not have the usual risks of international travel or known contact with a confirmed case, so are not sure how or where they became infected. <https://www.nh.gov/covid19/faqs/>

How long does COVID-19 survive on paper and other material?

The virus that causes COVID-19 transmits by respiratory droplets. Its ability to survive on paper has not been studied. There are studies of experimental contamination that show the virus can survive for hours and, in some cases, days. This is another reason why hand hygiene is so important. It may be possible for a person to get COVID-19 by touching a surface or object that has the virus on it and then touch their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads. [Routine cleaning and disinfection](#) can also help prevent the spread of COVID-19 through surfaces.

Can the virus that causes COVID-19 be spread through food, including refrigerated or frozen foods?

Eating contaminated food is not a significant source of infection. Coronaviruses do not survive long on surfaces, so there is very low risk of spread from food products or packaging that are shipped over a period of days or weeks at ambient, refrigerated, or frozen temperatures. Coronaviruses mostly spread from person to person through respiratory droplets, as described above. It is always good practice to wash your hands with soap and water for 20 seconds before preparing or eating food. Learn more what is known about the [spread of COVID-19](#).

Can the virus that causes COVID-19 be transmitted through the bite of an insect?

There is no evidence that the virus can be transmitted through the bite of an insect.

TESTING

Who should be tested for COVID-19?

Any person who is experiencing even mild symptoms of COVID-19 should be tested. These symptoms include, fever, cough, congestion, shortness of breath, muscle aches, chills, new significant fatigue, or loss of taste or smell. In addition anyone over the age of 60, healthcare workers, those with underlying health conditions, household members of vulnerable populations listed previously, child care staff, or employees who cannot avoid prolonged close contact with

peers or the general public may request a test. You can also now request to be tested even if you are asymptomatic. To request a test contact your healthcare professional or find other testing options on our [NH COVID-19 website](#).

People who are 65years of age and older or those with chronic medical problems are at higher risk for hospitalization and death from COVID-19 and should:

- Stay at home and away from public places.
- Avoid any domestic or international travel.
- Call a provider if you are experiencing symptoms. If not severely ill, please call ahead before showing up at a hospital or emergency department.

People who have mild symptoms of COVID-19, even if not tested, should stay home until:

At least 10 days have passed since symptoms first appeared

AND

At least 3 days (72 hours) have passed since recovery*

**Recovery is defined as a resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms.*

People who do not have symptoms but have been notified that they may have been exposed:

- through close contact with a person with COVID-19 or a person likely to have COVID-19 (without testing); and,
- any persons who have traveled from countries with widespread sustained transmission should:
 - Stay home ([self-quarantine](#)) for 14 days from the last day of potential exposure.
 - It can take up to 14 days from the time someone is exposed to develop symptoms of COVID-19.
 - Not be tested for COVID-19 because it doesn't change the need for a person to self-quarantine even if testing is negative.
 - Help us preserve our medical supplies by not asking to be tested.

How do I get tested for COVID-19?

For information on how to get tested for COVID-19, please visit the [NH COVID-19 Testing Guidance webpage](#). If you need immediate medical attention (for example, if you are very short of breath), call your Emergency Department or Urgent Care Center before going and tell them about your symptoms.

I heard there are additional testing sites throughout the state, how do I access them?

The NH DHHS has established five new testing locations and a mobile testing team to increase the availability of COVID-19 testing in New Hampshire. The Community-Based COVID-19 Testing Program features fixed drive through testing locations in Claremont, Lancaster, Plymouth, Tamworth, Rochester, Concord, Milford, [Keene](#), [Londonderry](#), [New Hampton](#), and [Portsmouth](#). Please contact your healthcare provider or complete the online [COVID-19 Testing Request form](#) before going to any testing location.

Can I get a COVID-19 antibody blood test?

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 from this test indicates that person was likely previously infected with the virus. Antibody-based tests are now available through commercial laboratories for the detection of antibodies against SARS-CoV-2. Antibody tests should not be used to diagnose acute COVID-19 infection because it can take about 2 weeks after infection for antibody tests to be positive. It is not yet known if a person with a positive antibody test is protected from future SARS-CoV-2 infection or has the potential to infect others. Individuals who test positive for COVID-19 antibodies will be contacted by the Division of Public Health.

More information on fixed testing site locations and how to get testing results can be found on the [NH COVID-19 testing webpage](#): <https://www.nh.gov/covid19/resources-guidance/testing-guidance.htm>

PERSONAL PREVENTION

Is there a vaccine for COVID-19?

Not yet. Scientists are working on developing a vaccine to prevent COVID-19.

<https://www.niaid.nih.gov/diseases-conditions/coronaviruses-therapeutics-vaccines>

How can I protect myself and others from COVID-19?

There are steps you can take to reduce your risk of getting sick from COVID-19 and other respiratory infections, and help prevent transmitting infections to others, including:

- Wash your hands often with soap and water for at least 20 seconds.
- Use an alcohol-based hand sanitizer if soap and water are not available.
- Cover your mouth and nose with a tissue when you cough or sneeze, then throw the tissue in the trash and wash your hands.
- Do not touch your eyes, nose, or mouth with unwashed hands.
- Wear a cloth face covering to protect others
- ***When outside your home, keep a distance of at least 6 feet between yourself and others.*** [This is known as social distancing.](#)
- Stay home from work or school if you have a fever or are not feeling well.
- Avoid close contact with people who are sick.
- Clean and disinfect objects and surfaces.
- Get a flu shot—it is not too late to be protected from flu.

Should I buy masks or wear one in public?

Homemade cloth face coverings should be worn in public setting even when social distancing measures can be maintained. Wearing a cloth face coverings not a substitute for physical distancing and other prevention measures. The wearing of cloth face coverings is to help protect others around you if you are infected and don't know it. The use of facemasks is crucial for healthcare workers and people who are taking care of someone in close settings (such as at home or in a healthcare facility). Buying unnecessary N95 and surgical masks depletes the supply for healthcare professionals who need them to reduce the spread of disease and keep you safe.

<https://www.cdc.gov/coronavirus/2019-ncov/about/prevention-treatment.html>

CLEANING AND DISINFECTING

How do I clean and disinfect in a healthcare setting?

CDC provides [Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 \(COVID-19\) in Healthcare Settings](#)

- Ensure that environmental cleaning and disinfection procedures are followed consistently and correctly.
- Routine cleaning and disinfection procedures (e.g., using cleaners and water to pre-clean surfaces prior to applying an EPA-registered, hospital-grade disinfectant to frequently touched surfaces or objects for appropriate contact times as indicated on the product's label) are appropriate for SARS-CoV-2 in healthcare settings, including those patient-care areas in which aerosol-generating procedures are performed.
- Refer to [EPA-registered disinfectants](#) that have qualified under EPA's emerging viral pathogens program for use against SARS-CoV-2.

How do I clean and/or disinfect in a community facility?

CDC provides guidance for [Cleaning and Disinfection for Community Facilities](#) such as schools, institutions of higher education, offices, daycare centers, businesses, and community centers that do, and do not, house persons overnight.

How do I disinfect electronics such as tablets, touch screens, remote controls, and ATM machines?

The CDC offers guidance on [cleaning and disinfecting household items including electronics](#).

- If present, remove any visible contaminants.
- Follow the manufacturer's instructions and recommendations for all cleaning and disinfection products.
- Consider using covers for electronics that can be easily wiped clean.
- If no manufacturer guidelines are available, consider using alcohol-based wipes or sprays containing at least 70% alcohol to disinfect touch screens. Be sure to dry surfaces thoroughly to avoid pooling of liquids as this could damage electronics, screens, etc.

PLANNING

Should I plan for COVID-19?

Yes! Everyone has a role to play in getting ready and keeping yourself, your family and your community healthy! Check out these easy to follow recommendations from the CDC:

[Resources for Preparedness in the Home](#)

[Resources for Preparedness in the Workplace](#)

[Resources for Community Preparedness](#)

What should businesses be doing?

Businesses play a key role in stopping the spread of disease, including COVID-19, by encouraging employees to stay home when they are sick and preparing for staffing shortages in advance. Guidance and educational materials, such as the *COVID-19 Information for Businesses* can be found on the [NH DHHS COVID-19 website](#).

Is there specific guidance for schools, colleges, and universities?

Schools can play an important role to prevent the introduction and spread of COVID-19 into NH communities. Guidance and educational materials, such as the *COVID-19 Information for Schools* can be found on the [NH DPHS COVID-19 webpage](#).

Which businesses are allowed to open under New Hampshire's Stay-At-Home order?

Under the Stay at Home 2.0 plan, the Governor's Economic Reopening Taskforce has been developing guidance documents for industries to operate under. A list of businesses and functions that are permitted under this order, as well as guidelines for reopening have been posted on the Governor's website at <https://www.covidguidance.nh.gov/>

Are there recommendations for Faith-Based and Community Organizations?

Yes. The Governor's Economic Reopening Taskforce provides guidance for Places of Worship at:

<https://www.covidguidance.nh.gov/sites/g/files/ehbemt381/files/inline-documents/2020-05/guidance-worship.pdf>

Are there any recommendations for Homeless Shelters?

CDC has developed recommendations for homeless service providers, including overnight emergency shelters, day shelters, and meal service providers, about how to protect their staff, clients, and guests. Guidance can be found on the CDC's [FAQs for Homeless Shelters](#) website.

Are there any recommendations for jails and prisons?

Jails and prisons should have a plan in place to identify and house together people with suspected and diagnosed COVID-19 and those who are at high risk of serious illness if they become infected. This includes people with chronic illness, those with compromised immune systems and pregnant women.

<https://thehill.com/opinion/criminal-justice/485236-4-ways-to-protect-our-jails-and-prisons-from-coronavirus>

ISOLATION AND QUARANTINE AND PUBLIC HEALTH MONITORING

What is isolation?

Isolation is used to separate people infected with the virus (those who are sick with COVID-19 from people who are not infected. People who are in isolation should stay home until it's safe for them to be around others. In the home, anyone sick or infected should separate themselves from others by staying in a specific "sick room" or area and using a separate bathroom (if available). A [self-isolation guide](#) can be going on the NH COVID-19 website.

What is quarantine?

Quarantine is used to keep someone who might have been exposed to COVID-19 away from others. Quarantine helps prevent spread of disease that can occur before a person knows they are sick or if they are infected with the virus but do not have symptoms. People in quarantine should stay home, separate themselves from others, monitor their health, and follow directions from their state or local health department. A [self-quarantine guide](#) can be found on the NH COVID-19 website.

Can household members of people under quarantine leave their home?

Yes. Household members of persons under quarantine are not required to stay home. As long as the person under quarantine does not show any symptoms, and the household members are well, those living in the same house as someone on quarantine can leave the home. If the person being quarantined develops illness, household members must then also stay home on quarantine.

What is self-observation?

NH DHHS has created a [Self-Observation Guide](#). This describes that self-observation is important for people who have been exposed to someone with COVID-19. If you are told to self-observe, for the 14 days following exposure, do the following:

1. Practice strict respiratory etiquette and hygiene including covering your nose and mouth with a tissue when coughing or sneezing and washing hands often with soap and water for at least 20 seconds, or using an alcohol-based hand sanitizer if soap is not available.
2. Remain alert for fever, cough, shortness of breath, or other signs of respiratory illness.
3. If you feel feverish or develop a cough or shortness of breath:
 - Take your temperature.
 - Limit contact with others.
 - Seek health advice, but before going to a doctor's office or emergency room call ahead and tell the provider or office about your potential exposure to COVID-19 and symptoms.

EMPLOYERS AND BUSINESSES

What does a potential exposure to COVID-19 mean?

A potential exposure to COVID-19 means being a household contact or having close contact within 6 feet of an individual with confirmed or suspected COVID-19. The timeframe for having contact with an individual includes the period of time of 48 hours before the individual became symptomatic.

When can workers return to work after an exposure to COVID-19?

Workers may be permitted to go back to work after exposure to COVID-19 provided they remain asymptomatic and additional precautions are implemented to protect them and the community.

What are the additional precautions that need to be implemented when a worker exposed to COVID-19 returns to the work place?

Critical infrastructure workers who have had an exposure to COVID-19 but **remain asymptomatic** should adhere to the following practices prior to and during their work shift:

- **Pre-Screen:** Employers should measure the employee's temperature and assess symptoms prior to them starting work. Ideally, temperature checks should happen before the individual enters the facility.
- **Regular Monitoring:** As long as the employee doesn't have a temperature or symptoms, they should self-monitor under the supervision of their employer's occupational health program.
- **Wear a Mask:** The employee should wear a face mask at all times while in the workplace for 14 days after last exposure. Employers can issue facemasks or can approve employees' supplied cloth face coverings in the event of shortages.
- **Social Distancing:** The employee should maintain a physical distance of 6 feet from others as work duties permit in the workplace.
- **Disinfect and Clean work spaces:** Clean and disinfect all areas such as offices, bathrooms, common areas, shared electronic equipment routinely.

When can employees return to work after travel?

Employers should follow the [COVID-19 Employee Travel, Screening, and Exclusion Guidance](#) in regards to travel for staff in all workplace settings including businesses, education, and healthcare facilities.

RISK-RELATED CONCERNS

Am I at risk for novel coronavirus from a package or products shipped to my house?

Coronaviruses are spread by respiratory droplets. There is no evidence that products or packaging have ever transmitted COVID-19. <https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

Are there special cleaning procedures that should be followed in response to COVID-19?

Clean any visibly dirty surfaces and then follow with a disinfectant for the prevention of COVID-19 and other viral respiratory illnesses. Public and private spaces should be routinely cleaned including all frequently touched surfaces such as desks, tables, chairs and doorknobs. No additional disinfection beyond routine cleaning is recommended at this time. Use cleaning agents that are usually used in these areas and follow the directions on the label. Have disposable wipes handy so that commonly used surfaces can be wiped down before each use. For more information on household cleaning, resources from the CDC, visit <https://www.cdc.gov/coronavirus/2019-ncov/community/home/cleaning-disinfection.html>

How should I clean if someone with suspected or confirmed COVID-19 has been in an area or a room?

For detailed instructions on what and how to clean after a possible COVID-19 exposure, visit the CDC's recommendations at <https://www.cdc.gov/coronavirus/2019-ncov/community/organizations/cleaning-disinfection.html>

What should healthcare personnel (HCP) do if they had a potential exposure to COVID-19?

The CDC offers [Interim U.S. Guidance for Risk Assessment and Public Health Management of Healthcare Personnel with Potential Exposure in a Healthcare Setting to Patients with Coronavirus Disease \(COVID-19\)](#). This interim guidance is intended to assist with assessment of risk, monitoring, and work restriction decisions for healthcare personnel with potential exposure to COVID-19.

Should I require my employee to provide a note to validate their illness?

No. The CDC and NH DPHS do not recommend that employers require a provider's note for employees who have been sick with acute respiratory illness. This cannot usually be provided in an efficient manner, so it can reduce your workforce and impair your continuity of operations. We suggest instead that businesses adopt a non-test based strategy, including:

At least 10 days have passed since symptoms first appeared

AND

At least 3 days (72 hours) have passed since recovery*

**Recovery is defined as a resolution of fever without the use of fever-reducing medications and improvement in respiratory symptoms (e.g., cough, shortness of breath).*

If an individual is diagnosed with COVID-19 or suspected to have been exposed to someone with COVID-19, they will be contacted by the health department and provided documentation.

These guidance are different for healthcare workers.

Source: <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html>

What is Multisystem Inflammatory Syndrome in Children (MIS-C)?

Multisystem Inflammatory Syndrome in Children (MIS-C) is a condition that causes inflammation in many parts of the body. We do not yet know what causes MIS-C. Many children with MIS-C have had the virus that causes COVID-19. Protect your child from COVID-19 by taking preventative actions such as washing or sanitizing hands often, avoiding those who are sick, practicing social distancing, having children over the age of 2 wear a cloth face covering in public settings, and frequently cleaning and disinfecting high-touch surfaces. For more information on MIS-C, visit the CDC's "For Parents: MIS-C" webpage: <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/children/mis-c.html>

What should I do if I think my child is sick with MIS-C?

We know that many children with MIS-C had the virus that causes [COVID-19](#), or had been around someone with COVID-19. We do not yet know what causes MIS-C. MIS-C can be serious, even deadly, but most children who were diagnosed with this condition have gotten better with medical care.

If you think your child is sick with MIS-C or they are showing symptoms **Contact your child's doctor, nurse, or clinic right away**. Symptoms may include:

- Fever
- Abdominal pain
- Vomiting
- Diarrhea
- Neck pain
- Rash
- Bloodshot eyes
- Feeling extra tired

Be aware that not all children will have all the same symptoms.

Seek emergency care right away if your child is showing any of these **emergency warning signs of MIS-C** or other concerning signs:

- Trouble breathing
- Pain or pressure in the chest that does not go away
- New confusion
- Inability to wake or stay awake
- Bluish lips or face
- Severe abdominal pain

RISKS TO PETS AND ANIMALS

What risks do animals or animal products pose?

The Centers for Disease Control and Prevention (CDC) does not have any evidence to suggest that animals or animal products pose a risk for spreading COVID-19 in the United States.

- [CDC regulates](#) animals and animal products that pose a threat to human health, USDA regulates animals and animal products that pose a threat to agriculture.
- [US Fish and Wildlife Service \(FWS\) regulates](#) importation of endangered species and wildlife that can harm the health and welfare of humans, the interests of agriculture, horticulture, or forestry, and the welfare and survival of wildlife resources.
- [American Veterinary Medical Association \(AVMA\)](#) provides information on risks to pets and animals with additional guidance for veterinarians and veterinary clinics.

Should I be concerned about pets or other animals and 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 considered to be low. We are still learning about this virus, and **it appears that in some rare situations, people can spread the virus to animals**. Further studies are needed to understand if and how different animals could be affected by the virus, and the role animals may play in the spread of COVID-19. For more information, visit CDC's [If You Have Pets](#) webpage.

What if I'm sick with COVID-19 and have pets?

While you are sick with COVID-19, avoid contact with your pet, including petting, snuggling, being kissed or licked, and sharing food. Whenever possible, have another member of your household care for your animals while you are sick. If you must care for your pet or be around animals while you are sick, wash your hands before and after you interact with pets and wear a facemask.

<https://www.cdc.gov/coronavirus/2019-ncov/faq.html#animals>

TRAVEL-RELATED CONCERNS

Should I travel within the United States?

Cases of COVID-19 have been reported in all states, and some areas are experiencing community spread. Crowded travel settings, like airports, may increase your risk of exposure to COVID-19 if there are other travelers with COVID-19.

There are several things you should consider when deciding whether it is safe for you to travel:

- ***Will you or your travel companion(s) be in close contact with others during your trip?***
Your risk of exposure to respiratory viruses like COVID-19 increases in crowded settings, particularly closed-in settings with little air circulation. This may include settings such as conferences, public events (like concerts and sporting events), religious gatherings, public spaces (like movie theatres and shopping malls), and public transportation (like buses, metro, trains).
- ***Are you or your travel companion(s) at higher risk of severe illness if you do get COVID-19?***

People at higher risk for severe disease are older adults and people of any age with serious chronic medical conditions (such as heart disease, lung disease, or diabetes). The CDC recommends that [travelers at higher risk for COVID-19 complications](#) avoid all cruise travel and nonessential air travel.

- ***Do you have a plan for taking time off from work or school, in case you get exposed to, or are sick with, COVID-19?***

If you have close contact with someone with COVID-19 during travel, you may be asked to stay home to self-monitor and avoid contact with others for up to 14 days after travel. If you become sick with COVID-19, you may be unable to go to work or school until you are considered noninfectious. You will be asked to avoid contact with others (including being in public places) during this period of infectiousness.

- ***Do you live with someone who is older or has a severe chronic health condition?***

If you get sick with COVID-19 upon your return from travel, your household contacts may be at risk of infection. Household contacts who are older adults or have severe chronic medical conditions are at higher risk for severe illness from COVID-19.

- ***Is COVID-19 spreading where you live?***

Consider the risk of passing COVID-19 to others during travel, particularly if you will be in close contact with people who are [older adults or have severe chronic health condition](#). These people are at a higher risk for getting very sick. If your symptoms are mild or you do not have a fever, you may not realize you are infectious.

Depending on your unique circumstances, you may choose to delay or cancel your plans. If you do decide to travel, be sure to [practice precautions](#) to prevent getting and spreading COVID-19 and other respiratory diseases during travel. Those arriving to New Hampshire from out of state should follow the [self-quarantine guidelines](#) for 14 days. For the most up-to-date COVID-19 travel information, visit [CDC COVID-19 Travel page](#).

What are the different recommendations for travelers returning from countries with a Level 3, 2, or 1 travel advisory?

- **Level 3: Self-Quarantine Recommendations**

Travelers from countries with a level 3 travel advisory are advised to self-quarantine by staying home and monitoring their health for 14 days following travel ([Self-Quarantine Guidance](#)).

- **Level 2: Self-Observation Recommendations**

Travelers from countries with a level 2 travel advisory are advised to monitor their health and limit interactions with others for 14 days after returning to the United States ([Self-Observation Guidance](#)).

- **Level 1: No movement restrictions**

Take normal precautions to keep yourself healthy.

What if I recently traveled to an area affected by COVID-19 and am sick?

The CDC has additional specific online guidance for travelers available at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>

What about families of people who have recently traveled?

There is no public health reason to exclude family members of people with no symptoms who were in an area with active community spread of disease in the previous 14 days. Family members who did not travel may go to school or work if the person who traveled has no symptoms.

I am traveling to a country with a travel notice. Should I cancel?

Travel notices are based on assessment of the potential health risks involved with traveling to a certain area. A list of destinations with travel notices is available on the [CDC website](#).

- **Warning Level 3: Avoid Nonessential Travel**

CDC recommends travelers avoid all nonessential travel to destinations with Level 3 travel notices because of the risk of getting COVID-19.

- **Alert Level 2: Practice Enhanced Precautions**

Because COVID-19 can be more serious in older adults and those with chronic medical conditions, people in these groups should talk to a healthcare provider and consider postponing travel to destinations with Level 2 travel notices.

- **Watch Level 1: Practice Usual Precautions**

CDC does not recommend canceling or postponing travel to destinations with Level 1 travel notices because the risk of COVID-19 is thought to be low.

If you must travel, take the following routine precautions:

- Avoid contact with sick people.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Clean your hands often by washing them with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains 60%–95% alcohol. Soap and water should be used if hands are visibly dirty.
 - It is especially important to clean hands after going to the bathroom; before eating; and after coughing, sneezing or blowing your nose. <https://www.cdc.gov/coronavirus/2019-ncov/travelers/faqs.html>

If you travel to a location with any level of travel advisory for COVID-19, when you return, you should remain alert for fever or respiratory symptoms (e.g., cough, shortness of breath) and [self-quarantine](#).

Is it safe to go on a cruise?

No. The CDC recommends all persons defer any travel on cruise ships, including river cruises, worldwide because of the increased risk of COVID-19 transmission onboard ships. Deferring travel is especially important for older adults and all people with serious chronic medical conditions (such as heart disease, diabetes or lung disease), because of their increased risk for severe disease. Cruises put large numbers of people, often from countries around the world, in frequent and close contact with each other. The proximity of passengers and crew on small ships and boats traveling on rivers may result in an even higher number of COVID-19 infections.

https://wwwnc.cdc.gov/travel/notices/warning/coronavirus-cruise-ship?deliveryName=USCDC_511-DM22941

Healthcare providers should:

- Advise patients to defer all cruise ship travel, including river cruises, worldwide.
- Explain that their return travel to the United States may be impacted, and formal quarantine procedures may be implemented if confirmed cases are identified on board.
- Explain that appropriate medical care or medical evacuation may not be available internationally.
- Explain that some countries may refuse docking or disembarkation if there are known or suspected cases on board.
- For patients who still intend to cruise, advise them to
 - Stay in their cabin and notify the onboard medical center immediately if they get sick with fever, new or worsening cough, or trouble breathing during their cruise.
 - Stay home for 14 days after returning from travel, practice social distancing, and monitor their health both during travel and after they return. Social distancing means staying out of crowded places, avoiding group gatherings, and maintaining distance (approximately 6 feet or 2 meters) from others, when possible.

What is the risk of getting COVID-19 on an airplane?

Because of how air circulates and is filtered on airplanes, most viruses and other germs do not spread easily on airplanes. Although the risk of infection on an airplane is low, travelers should try to avoid contact with sick passengers and wash their hands often with soap and water for at least 20 seconds or use hand sanitizer that contain 60%–95% alcohol. <https://www.cdc.gov/coronavirus/2019-ncov/travelers/faqs.html>

Are layovers included in CDC's recommendation to avoid nonessential travel?

Yes. Layovers at airports in destinations with level 3 travel notices are included in CDC's recommendation to avoid nonessential travel. If a layover is unavoidable, CDC recommends that travelers not leave the airport. Travelers with layovers may still be subject to screening and monitoring when entering the United States. For more information, visit <https://www.cdc.gov/coronavirus/2019-ncov/travelers/faqs.html>

What precautions should be taken by people who travel internationally?

People should avoid all travel to any locations for which the CDC has issued a Level 3 travel notice. Given the rapidly evolving outbreak and frequently changing travel advisories, people should also consider postponing any nonessential travel to countries with a Level 2 travel advisory. See CDC travel notice website <https://wwwnc.cdc.gov/travel/notices>

People who have returned from countries with a Level 3 travel advisory are advised to self-quarantine by staying home and monitoring their health for 14 days after returning to the United States (See [self-quarantine guidance](#)). Travelers from countries with a Level 2 level travel advisory are advised to monitor their health and limit interactions with others for 14 days after returning to the United States (See [self-observation guidance](#)).

If symptoms develop after travel to a country with a COVID-19 related travel advisory, the individual should:

- Take their temperature with a thermometer.
- Stay home and avoid close contact with other people.
- Seek health advice by phone from either a healthcare provider or the NH DPHS at 603-271-4496 (after hours 603-271-5300).
- Before going to a doctor's office or emergency room, the individual should call ahead and tell the provider or office about recent travel and symptoms.
- Practice strict respiratory etiquette and hand hygiene including covering the nose and mouth with a tissue when coughing or sneezing and washing hands often with soap and water for at least 20 seconds, or using an alcohol-based hand sanitizer if soap and water are not available.
- Symptomatic individuals should wear a surgical mask when traveling outside of the home (e.g., to a doctor's office) to protect others.

HEALTHCARE FACILITIES

How should visitors and staff be screened and protected upon entering a healthcare facility?

DHHS recommends that all visitors and staff entering a healthcare facility be screened for symptoms and be provided with a washable (reusable) cloth face covering to wear in order to reduce asymptomatic/pre-symptomatic transmission of COVID-19 while in the facility.

Is it better to wear a cloth face covering or commercial facemask?

- A commercial, disposable face mask is likely more effective for this purpose, so if supplies are adequate, a surgical mask can be used instead.
- Anyone wearing a cloth face covering must regularly perform hand hygiene and avoid touching their covering and face to avoid contaminating their hands and contaminating surfaces if they are pre- or asymptotically shedding virus.
- Clearly communicate that a cloth face covering is NOT personal protective equipment (PPE). It does not protect the wearer, but can protect others in case the wearer is pre-symptomatically or asymptotically shedding virus.

After they are worn, what should the healthcare facility do with the cloth face covering?

All cloths face coverings given out to visitors and staff by the facility should be collected upon exiting the facility for washing and re-use.

What type of PPE should a healthcare worker wear when caring for a patient with suspect/confirmed COVID-19?

The healthcare worker caring for a patient with suspect/confirmed COVID-19 should:

1. Remove their cloth mask.
2. Secure the cloth mask in a plastic bag.
3. Conduct hand hygiene.
4. Don usual COVID-19 PPE which includes (at a minimum): surgical face mask; eye protection; gown; and, gloves.
5. An N95 or higher level respirator should be used for patients undergoing aerosol-generating procedures.

How should I report positive COVID-19 test results?

All healthcare facilities and laboratories should be reporting positive test results to the New Hampshire Division of Public Health Services. Information on how to report is located here: <https://www.dhhs.nh.gov/dphs/cdcs/covid19/covid19-reporting-form.pdf>.

LONG-TERM CARE FACILITIES AND NURSING HOMES

Does DHHS provide guidance to long-term care facilities and nursing homes regarding the management of COVID-19?

Yes, DHHS has published its [COVID-19 Guidance for Long-Term Care Facilities](#). This guidance provides links to two (3) resources, which are updated as new information, evolves:

- [Centers for Medicare and Medicaid Services \(CMS\) Guidance for Nursing Homes](#)
- [CDC Guidance for Long Term Care Facilities](#)
- [COVID-19 Response Toolkit for Long Term Care Facilities](#)

DHHS recommends adherence to the CMS guidelines.

How should individuals with suspect COVID-19 be placed in quarantine?

Suspect or known COVID-19 patients in nursing homes should be placed in single person rooms with individual bathrooms, and the door should be closed. Facilities should adhere to the appropriate transmission-based precautions (meaning standard, contact, AND droplet precautions WITH eye protection).

Should individuals with confirmed or suspect COVID-19 be transferred to a hospital?

No. Transfer to a hospital is not recommended unless individuals require a higher level of clinical care or if the facility cannot adhere to the appropriate infection control procedures.

QUESTIONS FROM MEDICAL PROVIDERS

I am a medical provider and I want to get my patient tested for COVID-19. Where can I send them?

The NH DHHS has established new testing locations and a mobile testing team to increase the availability of COVID-19 testing in New Hampshire. The Community-Based COVID-19 Testing Program features fixed drive through testing locations in Claremont, Lancaster, Plymouth, Tamworth, Rochester, Concord, [Milford](#), [Keene](#), [Londonderry](#), [New Hampton](#), and [Portsmouth](#). You can order polymerase chain reaction (PCR) testing for any patient with COVID-19 symptoms (see below) at one of these stations by sending in a completed test requisition form to the NH DHHS COVID-19 Coordinating Office via fax (603-271-3001) or email (covidtesting@dhhs.nh.gov), or by having the patient complete the online [COVID-19 Test Request form](#).

- o The NH DHHS COVID-19 Coordinating Office will then call the patient directly to schedule an appointment at one of the fixed testing site locations.

o If a patient is unable to drive to one of the stations due to a disability or physical barrier, NH DHHS will schedule a visiting nurses association (VNA) to go to the patient's home to collect the specimen. Specimens collected at the fixed testing site locations will be sent to Quest Laboratories for processing.

To submit specimens to the NH PHL for COVID-19 testing:

1. Complete a [NH PHL Requisition](#). For shorter turnaround times, consider creating a PHL LabOnline account and filling out the on-line requisition. For more information, email PHL_LIMS_Group@dhhs.nh.gov
2. To send specimens to the NH PHL, collect NP/NS/OP swab and put into *viral transport media (VTM)* or *sterile saline*.

[CDC Interim Guidelines for Collecting, Handling, and Testing Clinical Specimens from Persons Under Investigation \(PUIs\) for Coronavirus Disease 2019 \(COVID-19\)](#)

How do I get test results from specimens submitted for testing by the NH Public Health Laboratories?

The NH PHL will not release any test results over the phone. All results will be faxed to the facility indicated in the Submitter Information section of the [NH PHL Requisition](#) as soon as they are finalized. Individuals should contact the healthcare provider who ordered the test to receive their results.

How are COVID-19 tests paid for?

NH has issued an order that requires health insurers to cover services associated with testing for COVID-19. Health insurance companies must provide coverage, prior to application of any deductible and without cost sharing, for the initial healthcare provider visit and test for their members who meet the CDC criteria for testing, as determined by the insured's healthcare provider. For more information visit <https://www.nh.gov/insurance/consumers/health-insurance-coronavirus-faq.htm>

Where can I access the latest COVID-19 Health Alert Network (HAN) Messages?

All COVID-19 HAN messages can be found on the [COVID-19 Healthcare Providers](#) webpage.

PUBLIC NOTIFICATIONS

None to report at this time.

NH DHHS, DIVISION OF PUBLIC HEALTH SERVICES (DPHS) RESPONSE

We care deeply about the health and wellbeing of the people of NH. We are committed to sharing accurate information with the public to ensure the optimal health and wellbeing of all NH residents while also ensuring we uphold the highest privacy standards for individual patients. As an organization we rely on the best available science and evidence-based practices. In rapidly evolving situations such as this we will provide updated information as it becomes available.

NH DPHS has been working closely with the CDC since the first case of COVID-19 was detected in the United States. We are working very closely with our healthcare and public health partners to ensure readiness to identify and respond to potential cases of COVID-19.

To date, NH DHHS key activities have included:

- Activation of our Incident Management Team to coordinate our public health response with emergency services, homeland security officials, and other public health partners.
- Identifying and investigating people with COVID-19 and their close contacts, including all those that an infected person may have come in contact with up to 48 hours before their symptoms began.
- Implementing illness monitoring and quarantine for travelers returning to New Hampshire.

- Preparing and shipping specimens to CDC for testing while simultaneously working with CDC to implement the testing locally here in the NH Public Health Laboratories.
- Providing technical guidance and information to healthcare and public health partners through health alerts, written guidance, and webinars.
- Continuing to prepare for and respond to ongoing community transmission in NH including addressing needs for medical surge, community mitigation, and providing housing, transportation, and wrap-around services (e.g., food) for people under isolation or quarantine due to illness or exposure.
- Maintaining situational awareness for COVID-19 across the globe and providing updates to stakeholders.
- Maintaining daily communications with federal partners including the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Assistant Secretary for Preparedness and Response, and other national organizations.
- Maintaining regular communications with other state agencies, local health departments, and other partners.
- Informing the public on respiratory disease prevention measures through media interviews and social media posts.

In outbreaks such as this, public health recommendations may change. We encourage you to check these key resources frequently for updates:

- [U.S. Centers for Disease Control and Prevention \(CDC\)](#)
- [NH Department of Health and Human Services \(NH DHHS\)](#)

KEY CONTACTS

| Topic/Inquiry | Contact | Phone/Email |
|--|--|--|
| <ul style="list-style-type: none"> ▪ General Information www.nh.gov/covid19 ▪ Patients without a primary care provider seeking assessment for COVID-19 testing | 2-1-1 New Hampshire | 1-866-444-4211 TTY: 603-634-3388 |
| <ul style="list-style-type: none"> ▪ Clinical Questions | Division of Public Health Services Bureau of Infectious Disease Control | 603-271-4496 |
| <ul style="list-style-type: none"> ▪ Healthcare Surge ▪ Personal Protective Equipment (PPE) Supply Issues | Requests for PPE need to be submitted electronically | mailto: https://prd.blogs.nh.gov/dos/hsem/?page_id=8673 |
| <ul style="list-style-type: none"> ▪ Media Inquiries ▪ Requests for Media Support | State of NH Joint Information Center | 603-223-6169 JIC@dos.nh.gov |
| <ul style="list-style-type: none"> ▪ Laboratory Courier Service | NH Public Health Laboratories | 603-271-0305 |
| <ul style="list-style-type: none"> ▪ Sampling Supplies | NH Public Health Laboratories | 603-271-4605 PHLClinicalKitOrders@dhhs.nh.gov |
| <ul style="list-style-type: none"> ▪ Physician ordered testing for any patient with COVID-19 symptoms | NH DHHS COVID-19 Coordinating Office | Fax requisition to 603-271-3001 or email covidtesting@dhhs.nh.gov |