

# COVID-19: What to Know and Do

Winter 2020-21

## Cover your mouth and nose with a cloth face cover when around others

The U.S. Centers for Disease Control and Prevention (CDC) and other health agencies have determined that COVID-19 spreads mainly through respiratory droplets. You exhale these especially when you cough, sneeze, talk, shout, or sing. These can land in mouths or noses of people who are near you or they may breathe these in. Masks help prevent this spread by reducing droplet spray when worn over your nose and mouth. A cloth mask protects you some, too. Wear a mask when you are indoors with people you do not live with. When possible keep about 6 feet between yourself and others—a disposable mask or cloth face cover is not a substitute for social distancing. Cloth face coverings should not be placed on children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated, or otherwise unable to remove the mask without assistance.

#### How the virus is spreading

The virus spreads mainly from respiratory droplets, especially between people who are in close contact with one another (within about 6 feet). It is spreading very easily between people, more so than influenza (flu). Studies have shown that COVID-19 can be spread by people who are not showing symptoms. People with COVID-19 may infect others more than 6 feet away in enclosed spaces with inadequate ventilation or if the infected person is breathing heavily (singing, exercising). Respiratory droplets can also land on surfaces and objects, but touching surfaces is not thought to be a common way that COVID-19 spreads. The risk of COVID-19 spreading from animals to people is considered low, but higher from people to animals.

### If you suspect surface contamination

Coronaviruses on surfaces can easily be cleaned with common household disinfectants that will kill it. Studies have shown that the COVID-19 virus can survive for up to 72 hours on plastic and stainless steel, less than 4 hours on copper, and less than 24 hours on cardboard. Research has yet to be done on the wide variety of surfaces where the virus might linger, but it seems to behave like other coronaviruses, persisting on surfaces for a few hours or up to several days, possibly varying by type of surface or temperature or humidity of the environment. As always, clean your hands with soap and water or an alcohol-based hand rub (greater than 60% alcohol) when water is not

available. If you must touch surfaces that may not be clean, avoid touching your eyes, mouth, or nose until you can wash your hands.

#### Who is more likely to be infected?

The risk for severe illness with COVID-19 increases with age, with older adults at highest risk. Eight of 10 COVID-19 deaths reported in the United States have been in adults age 65 and older. People of all ages are at increased risk if they have certain medical conditions. Proven to be at increased risk are individuals with cancer, chronic kidney disease, COPD, Down syndrome, heart conditions, weakened immune system from organ transplant, obesity, pregnancy, sickle cell disease, smoking, and Type 2 diabetes. Other conditions, such as asthma, hypertension or an immunocompromised state from other causes may pose increased risk. For everyone, the more people you interact with, the more closely you interact with them, and the longer the interaction, the higher your risk of getting and spreading COVID-19. If engaging in public activities, practice everyday preventive actions (mask, 6 feet apart, avoid crowds). Carry tissues and hand sanitizer. Avoid others who are not wearing masks or ask others around you to wear masks.

#### Variety of symptoms and when they appear

Symptoms may appear two to 14 days after exposure to the virus. Some people become infected but only have minor symptoms. People with these symptoms may have COVID-19: fever or chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, diarrhea. This list does not include all possible symptoms. Emergency warning signs include trouble breathing, persistent pain or pressure in the chest, new confusion, inability to wake or stay awake and bluish lips or face. If you have an emergency warning sign, get emergency medical care immediately. If you think you might have COVID-19, stay home and get care instructions from your healthcare provider and local health department. Monitor your symptoms, wear a mask, cover coughs and sneezes, wash hands often, avoid sharing personal household items and clean all high-touch surfaces every day. Do not go to work and stay away from others. Inform your workplace that you are not well; they should work with you to determine the best course of action to prevent you from bringing infection into the workplace.





#### **Purposes of available tests**

Viral tests reveal current infection; antibody tests reveal previous infection. An antibody test may not show current infection because it can take one to three weeks after infection to make antibodies. The CDC recommends using a viral (nucleic acid or antigen) test to diagnose acute infection. We do not know yet if having antibodies to the virus can protect someone from getting infected with the virus again or how long that protection might last.

#### When to get tested

People who should get tested for current infection are those who have:

- Symptoms of COVID-19
- Had close contact (within 6 feet for a total of 15 minutes or more) with someone with confirmed COVID-19.
- Taken part in activities that put them at higher risk for COVID-19 because they cannot socially distance as needed, such as travel, attending large social or mass gatherings, or being in crowded indoor settings.
- Been asked or referred to get testing by their healthcare provider, local or state health department.

Contact your healthcare provider to see if an at-home specimen collection kit or an at-home test is appropriate for you and available in your area. Same for an antibody test. Confirmed and suspected cases of reinfection have been reported, but remain rare.

#### How do I reduce risk at home?

Limit the number of visitors in your home and the time they spend inside. Ensure that everyone wears a mask while visitors are there. Open doors and windows as much as you can. Place a fan as close as possible to an open window to blow air outside. Even without an open window, fans and ceiling fans can improve air flow; point them away from people. Turn on the exhaust fan in your bathroom and kitchen and keep them on for an hour after your visitors leave. If your home has a central HVAC system, set the fan to the "on" position instead of "auto" when you have visitors. Use pleated filters: make sure they fit properly and change them according to the manufacturer's instructions. If you don't have an HVAC system or just want extra filtration, consider using a portable high-efficiency particulate air (HEPA) cleaner. Select the right size for the room(s). If your household includes one or more vulnerable individuals, everyone should act as if all are at higher risk. Choose one or two who are not at higher risk to run essential errands. In shared housing including apartments, wear masks around people who don't live in your household and maintain social distancing. When you see people in small areas such as stairwells and elevators, consider going one at a time.

#### Ways to cope with stress

Take care of yourself, your family, and your friends by coping with stress and helping to strengthen your community. Take breaks from watching, reading, or listening to news stories, including social media, as hearing about the pandemic repeatedly can be upsetting.

- Take care of your body
- Take deep breaths, stretch, or meditate
- Try to eat healthy, well-balanced meals
- Exercise regularly and get plenty of sleep
- Avoid alcohol and drugs
- Make time to unwind—try to do some other activities you enjoy
- Connect with others—talk with people you trust about your concerns and how you are feeling

TRSA staff document review by EHS staff, UniFirst Corp., Timothy Cosgrave, director, January 2021

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