



COVID-19

FREQUENTLY ASKED QUESTIONS

Updated March 12, 2020

Due to the rapidly evolving nature of the situation, information below is subject to change. The [Nevada Division of Public and Behavioral Health \(DPBH\)](#) will be updating information as frequently as possible.

For the most current information, visit [Nevada Health Response](#) and the [Center for Disease Control and Prevention \(CDC\) website for Coronavirus Disease 2019 \(COVID-19\)](#).

Q: What is a novel coronavirus?

A: 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. COVID-19 causes illnesses that can range from the mild to more severe.

Q: How does the virus spread?

A: The virus is most likely to spread through:

- close contact with an infectious person.
- respiratory droplets produced when an infectious person coughs or sneezes.
- touching an object or surface with the virus on it, then touching your mouth, nose or eyes.

Q: How severe is the virus?

A: Experts are still learning about the range of illness from this virus. Reported cases have ranged from mild illness (similar to a common cold) to severe pneumonia that requires hospitalization. So far, deaths have been reported mainly in older adults with prior health conditions.

Q: What are the symptoms of COVID-19?

A: Most patients with COVID-19 have reportedly had mild to severe respiratory illness. Symptoms can include:

- Fever
- Cough
- Shortness of breath, difficulty breathing

At this time, the CDC believes that symptoms of COVID-19 may appear in as few as two days or as long as 14 days after exposure.

Q: Who is at risk for COVID-19?

A: According to the [CDC](#), for the majority of people, the immediate risk of being exposed to the virus that causes COVID-19 is thought to be low. The CDC's current risk assessment includes:

- People in places where ongoing community spread of the virus that causes COVID-19 has been reported are at elevated risk of exposure, with increase in risk dependent on the location.
- Healthcare workers caring for patients with COVID-19 are at elevated risk of exposure.
- Close contacts of persons with COVID-19 also are at elevated risk of exposure.
- Travelers returning from affected international locations where community spread is occurring also are at elevated risk of exposure, with increase in risk dependent on location.

According to the [CDC](#), early information out of China, where COVID-19 first started, shows that some people are at higher risk of getting very sick from this illness. This includes:

- Older adults
- People who have serious chronic medical conditions like:
 - Heart disease
 - Diabetes
 - Lung disease

For more information visit the [CDC's website](#).

Q: Are there underlying medical conditions that may increase the risk of serious illness from COVID-19 for individuals of any age?

A: According to the CDC's "[Implementation of Mitigation Strategies for Communities with Local COVID-19 Transmission](#)" guidance, the following underlying medical conditions may increase the risk of serious COVID-19 in individuals of any age:

- **Blood disorders** (e.g., sickle cell disease or on blood thinners)
- **Chronic kidney disease** as defined by your doctor (e.g., the patient has been told to avoid or reduce the dose of medications because of kidney disease, or is under treatment for kidney disease, including receiving dialysis).
- **Chronic liver disease** as defined by your doctor (e.g., cirrhosis, chronic hepatitis; patient has been

told to avoid or reduce the dose of medications because of liver disease or is under treatment for liver disease).

- **Compromised immune system (immunosuppression)** (e.g., seeing a doctor for cancer and treatment such as chemotherapy or radiation, received an organ or bone marrow transplant, taking high doses of corticosteroids or other immunosuppressant medications, HIV or AIDS).
- **Current or recent pregnancy** in the last two weeks.
- **Endocrine disorders** (e.g., diabetes mellitus).
- **Metabolic disorders** (such as inherited metabolic disorders and mitochondrial disorders).
- **Heart disease** (such as congenital heart disease, congestive heart failure, and coronary artery disease).
- **Lung disease** including asthma or chronic obstructive pulmonary disease (chronic bronchitis or emphysema) or other chronic conditions associated with impaired lung function or that require home oxygen.
- **Neurological and neurologic and neurodevelopmental conditions** [including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy (seizure disorders), stroke, intellectual disability, moderate to severe developmental delay, muscular dystrophy, or spinal cord injury].

Q: What is close contact?

A: When a person has been within approximately 6 feet of a person with COVID-19 for a prolonged period of time. The definition of “close contact” used in Nevada is the same as the [CDC definition](#).

Q: What should I do if I have symptoms?

A: Call your health care provider to identify the safest way to receive care. Let them know if you have traveled to an affected area within the last 14 days or have been in close contact with a person known to have COVID-19.

In order to prevent health care facilities throughout Nevada from being inundated with calls and patients arriving at their locations without prior appointments, local health districts are urging residents to only contact your medical professional if it is a serious situation. Currently, medical providers in Nevada have the most concern for residents who:

- Traveled to areas that have widespread/sustained community transmission such as China, Italy, South Korea, Iran and Japan ([See CDC list here.](#))
- Have had direct contact with someone who has

been suspected or confirmed to have COVID-19.

- Have had severe illness requiring hospitalization for a viral respiratory disease that has no other known cause.

Q: Should I be tested for COVID-19?

A: Call your health care professional if you feel sick with fever, cough or difficulty breathing, have been in close contact with a person known to have COVID-19, or if you live in or have recently traveled from an area with ongoing spread of COVID-19. Your health care professional will work with the local health district, DHHS and the CDC to determine if you need to be tested for COVID-19, according to the most current CDC guidelines.

Q: What is the treatment for COVID-19?

A: There are no medications specifically approved for COVID-19. Most people with illnesses due to common coronavirus infections recover on their own by drinking plenty of fluids, resting, and taking pain and fever medications. For patients who are more severely ill, medical care or hospitalization may be required. The medical community is continuing to learn more about COVID-19, and treatment may change over time.

Q: What is a PUI (person under investigation)?

A: A PUI is an individual with COVID-19 symptoms, but not necessarily the virus, who may have been exposed through close contact with a confirmed case, recent travel to an affected region, who has severe respiratory illness requiring hospitalization with no more likely diagnosis and no source of exposure has been identified, or who is suspected to have COVID-19 based on symptoms which do not have any other likely cause. PUI determinations are made in accordance with CDC guidelines.

Q: What is a PUM (person under monitoring), otherwise known as an Individual under public health supervision?

A: A PUM is an individual who does not have COVID-19 symptoms but who may have been exposed through close contact with a confirmed case or from recent travel to an affected region. PUM determinations are made in accordance with CDC guidelines.

Q: What is the difference between a confirmed and a presumptive positive result?

A presumptive positive result is when a patient has tested positive by a public health laboratory, but results are pending confirmation at the CDC. A confirmed result has been verified by the CDC.

Q: How is testing for COVID-19 conducted in Nevada?

A: Nevada has two designated public laboratories for COVID-19 testing, the State Public Health Laboratory located in Northern Nevada and the Southern Nevada Health District Public Health Laboratory located in Las Vegas.

Recently, the CDC confirmed that commercial labs have been provisionally approved to begin testing for COVID-19 in Nevada:

- LabCorp began testing in Nevada the first week of March. For more information from LabCorp on testing for COVID-19, [click here](#).
- Quest Diagnostics began testing for COVID-19 on March 9th. For more information from Quest on testing for COVID-19, [click here](#).

Q: How is the testing information shared?

A: Test results from both Nevada public health laboratories are immediately reported to the Nevada Division of Public and Behavioral Health (DPBH) and the specific local health authority, as well as the ordering clinician. A positive test result is acted on immediately and potential contacts are identified and evaluated. Decisions regarding quarantine of those that may have been exposed are assessed individually and made on a case-by-case basis depending upon each individual risk.

Q: How much do these tests cost?

A: Public health laboratories are not charging patients for these tests.

Q: Who can get tested for the virus that causes COVID-19 and why?

A: Not everyone needs to be tested. Testing decisions are made on a case-by-case basis depending upon symptoms and potential exposures. The decision to test is made by both the health care provider and public health departments.

Q: Should I be tested for COVID-19?

A: Call your health care professional if you feel sick with fever, cough, or difficulty breathing, have been in close contact with a person known to have COVID-19, or if you live in or have recently traveled from an area with ongoing spread of COVID-19 (e.g., China, Iran, Italy, Japan or South Korea). Your health care professional will work with the local health district, DHHS and the CDC to determine if you need to be tested for COVID-19.

Q: What if I have symptoms of COVID-19 but have not been around anyone who has been diagnosed with COVID-19?

A: If you have a fever, cough or shortness of breath but have not been around anyone you know with COVID-19, call your health care provider and ask if you need to be evaluated in person.

Q: How can I protect myself and my family?

A: There is currently no vaccine to prevent COVID-19. The best way to prevent infection is to take precautions to avoid exposure to this virus, which are similar to the precautions you take to avoid the flu:

- Avoid close contact with people who are sick.
- When you are sick, keep your distance from others.
- If possible, stay home from work, school, and errands when you are sick. This will help prevent spreading your illness.
- Cover your mouth and nose with a tissue when coughing or sneezing. Serious respiratory illnesses are spread by cough, sneezing or unclean hands.
- Washing your hands often will help protect you from germs and will protect other people if you are ill. If soap and water are not available, use an alcohol-based hand rub.
- Avoid touching your eyes, nose, or mouth. Germs are often spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth.
- Clean and disinfect frequently touched surfaces at home, work, or school--especially when someone is ill. Get plenty of sleep, be physically active, manage your stress, drink plenty of fluids, and eat nutritious food.

Q: Should I wear a face mask?

A: The CDC is currently not recommending face masks for the general public. Face masks should be used by people who show symptoms of COVID-19 to help prevent spread of the disease and by health care workers and others taking care of someone in a close-contact setting.

Q: What travel advisories are recommended?

A: CDC Travel Health Notices inform travelers and clinicians about current health issues that impact travelers' health, like disease outbreaks, special events or gatherings, and natural disasters, in specific international destinations. For updated CDC guidance on current travel advisories, visit the [CDC Coronavirus Disease 2019 Information for Travel](#) page.

Q: How do I plan ahead for COVID-19?

A: Make an emergency plan of action with your household members, relatives, and friends. [Visit Preventing COVID-19 Spread in Communities Resources for Households](#) for more information. In addition:

- If the disease starts spreading in your area, health officials might recommend closing schools or canceling events and encouraging people to work remotely to slow the spread of the disease.
- Make plans for alternative arrangements for your child or yourself in the case of a school or university dismissal or shutdown. Also, make plans for your elders and your pets, as needed.
- Check in with your work about your sick leave and telework options should you need to stay home to care for a household member.
- Make a list of your emergency contacts—family, friends, neighbors, carpool drivers, healthcare providers, teachers, employers, local public health department, and community resources.
- Gather extra supplies, such as soap, tissues, and alcohol-based hand sanitizer. If you or one of your household members have a chronic condition and regularly take prescription drugs, talk to your health provider, pharmacist and insurance provider about keeping an emergency supply of medications at home.

Q: What happens if someone with a confirmed case of COVID-19 may have been in close contact to a student or employee?

A: Decisions about the implementation of community measures, including closure of schools, will be made by the local health district in consultation with local, state and federal officials, as appropriate, and based on the scope of the outbreak and the severity of illness. The local health districts will follow guidelines from the CDC.

Additional Information:

- [Guidance from the U.S. Department of Education](#)
- [CDC—Administrators of U.S. Childcare Programs and K-12 Schools](#)
- [CDC—Community and Faith-Based Organizations](#)
- [CDC—Businesses and Employers to Plan and Respond COVID-19](#)
- [CDC—Resources for Households](#)

Q: What is the difference between Isolation and Quarantine?

A: Quarantine is for people who are not currently showing symptoms but are at increased risk for having been exposed to an infectious disease.

Quarantine is for people who could become sick and spread the infection to others.

Isolation is used for people who are currently ill and able to spread the disease and who need to stay away from others in order to avoid infecting them.

Q: Why can't I know the identity of a presumptive case, PUI, PUM, or those who may be part of a contact investigation?

A: State and federal law protect the privacy and confidentiality of individuals' health information (commonly known as protected health information or PHI). Recognizing the legitimate need for public health authorities and others responsible for ensuring the public's health and safety to have access to PHI, state and federal law permit certain entities to disclose protected health information only to entities who are legally authorized to receive such reports for the purpose of preventing or controlling disease.

Q: What should I do if I don't have insurance or a health care provider?

A: Medically uninsured patients seeking care are encouraged to visit a Federally Qualified Health Center (FQHC) in their community. FQHCs are defined by the Health Resources and Services Administration as providing comprehensive, culturally competent, quality primary health care services to medically underserved communities and vulnerable populations. To find an FQHC near you, please visit <https://www.nvpca.org>.

Q: What can I do to help?

A: The news of this disease outbreak is concerning to all of us, but especially impacts communities who have family or other close connections in China or the greater Asian continent. We should all do our part not to make assumptions by discriminating, spreading misinformation, or harassing individuals, families and communities that have made Nevada their home. Just because a disease originates within a certain area of the world does not mean that every person who has an association with that country is ill or has the potential to contract the virus.

It's currently flu and respiratory disease season and health officials recommend getting a flu vaccine if you haven't done so yet, taking everyday preventive actions to help stop the spread of germs (staying away from others when sick, washing hands frequently, avoiding touching your face, mouth, or eyes), and taking flu antivirals if prescribed.

If you are a healthcare provider caring for a novel coronavirus patient, please take care of yourself and follow recommended infection control procedures.

Q: Will warm weather stop the outbreak of COVID-19?

A: It is not known if weather and temperature impact the spread of COVID-19. Some other viruses, like 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. At this time, it is not known whether the spread of COVID-19 will decrease when weather becomes warmer.

Q: Where can I get the most current information about the COVID-19 outbreak?

A: Information is available through the following resources:

- [The Nevada Division of Public and Behavioral Health](#)
- [Southern Nevada Health District](#)
- [Washoe County Health District](#)
- [Carson City Health and Human Services](#)
- [Centers for Disease Control and Prevention \(CDC\)](#)

You can also call the Southern Nevada Health District's Information Line at 702-759-INFO for updated information about the COVID-19 outbreak.