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](https://www.cdc.gov/coronavirus/types.html) and cause mild illness, like the common cold. A diagnosis with coronavirus 229E, NL63, OC43, or HKU1 is not the same as a COVID-19 diagnosis. Patients with COVID-19 will be evaluated and cared for differently than patients with common coronavirus diagnosis.

Why is the disease being called coronavirus disease 2019, COVID-19?

On February 11, 2020 the World Health Organization [announced](https://twitter.com/DrTedros/status/1227297754499764230) an official name for the disease that is causing the 2019 novel coronavirus outbreak, first identified in Wuhan China. The new name of this disease is coronavirus disease 2019, abbreviated as COVID-19. In COVID-19, ‘CO’ stands for ‘corona,’ ‘VI’ for ‘virus,’ and ‘D’ for disease. Formerly, this disease was referred to as “2019 novel coronavirus” or “2019-nCoV”.

What types of coronavirus are there?

There are [many types](https://www.cdc.gov/coronavirus/2019-ncov/index.html) of human coronaviruses including some that commonly cause mild upper-respiratory tract illnesses. COVID-19 is a new disease, caused be a novel (or new) coronavirus that has not previously been seen in humans. The name of this disease was selected following the World Health Organization (WHO) [best practiceexternal icon](https://www.who.int/topics/infectious_diseases/naming-new-diseases/en/) for naming of new human infectious diseases.

Why might someone blame or avoid individuals and groups (create stigma) because of COVID-19?

People in the U.S. may be worried or anxious about friends and relatives who are living in or visiting areas where COVID-19 is spreading. Some people are worried about the disease. Fear and anxiety can lead to social stigma, for example, towards Chinese or other Asian Americans or people who were in quarantine. Stigma is discrimination against an identifiable group of people, a place, or a nation. Stigma is associated with a lack of knowledge about how COVID-19 spreads, a need to blame someone, fears about disease and death, and gossip that spreads rumors and myths. Stigma hurts everyone by creating more fear or anger towards ordinary people instead of the disease that is causing the problem.

How can people help stop stigma related to COVID-19?

People can fight stigma and help, not hurt, others by providing social support. Counter stigma by learning and sharing facts. Communicating the facts that viruses do not target specific racial or ethnic groups and how COVID-19 actually spreads can help stop stigma.

What is the source of the virus?

Coronaviruses are a large family of viruses. Some cause illness in people, and others, such as canine and feline coronaviruses, only infect animals. Rarely, animal coronaviruses that infect animals have emerged to infect people and can spread between people. This is suspected to have occurred for the virus that causes COVID-19. Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS) are two other examples of coronaviruses that originated from animals and then spread to people.

How does the virus spread?

This virus was first detected in Wuhan City, Hubei Province, China. The first infections were linked to a live animal market, but the virus is now spreading from person-to-person. It’s important to note that person-to-person spread can happen on a continuum. Some viruses are highly contagious (like measles), while other viruses are less so. The virus that causes COVID-19 seems to be spreading easily and sustainably in the community (“community spread”) in [some affected geographic areas](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html). Community spread means people have been infected with the virus in an area, including some who are not sure how or where they became infected.

Why are we seeing a rise in cases?

The [number of cases of COVID-19](https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html) being reported in the United States is rising due to [increased laboratory testing](https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/testing-in-us.html) and reporting across the country. The growing number of cases in part reflects the rapid spread of COVID-19 as many U.S. states and territories experience community spread. More detailed and accurate data will allow us to better understand and track the size and scope of the outbreak and strengthen prevention and response efforts.

Can someone who has had COVID-19 spread the illness to others?

The virus that causes COVID-19 is [spreading from person-to-person](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html). Someone who is actively sick with COVID-19 can spread the illness to others. That is why CDC recommends that these patients be isolated either in the hospital or at home (depending on how sick they are) until they are better and no longer pose a risk of infecting others.

How long does covid-19 last?

How long someone is actively sick can vary so the decision on when to release someone from isolation is made on a case-by-case basis in consultation with doctors, infection prevention and control experts, and public health officials and involves considering specifics of each situation including disease severity, illness signs and symptoms, and results of laboratory testing for that patient. Current [CDC guidance for when it is OK to release someone from isolation](https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-hospitalized-patients.html) is made on a case by case basis and includes meeting all of the following requirements: (1) The patient is free from fever without the use of fever-reducing medications. (2) The patient is no longer showing symptoms, including cough. (3) The patient has tested negative on at least two consecutive respiratory specimens collected at least 24 hours apart.

Can someone who has been quarantined for COVID-19 spread the illness to others?

Quarantine means separating a person or group of people who have been exposed to a contagious disease but have not developed illness (symptoms) from others who have not been exposed, in order to prevent the possible spread of that disease. Quarantine is usually established for the incubation period of the communicable disease, which is the span of time during which people have developed illness after exposure. For COVID-19, the period of quarantine is 14 days from the last date of exposure, because 14 days is the longest incubation period seen for similar coronaviruses. Someone who has been released from COVID-19 quarantine is not considered a risk for spreading the virus to others because they have not developed illness during the incubation period.

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

Coronaviruses are generally thought to be spread from person-to-person through respiratory droplets. Currently there is no evidence to support transmission of COVID-19 associated with food. Before preparing or eating food it is important to always wash your hands with soap and water for 20 seconds for general food safety. Throughout the day wash your hands after blowing your nose, coughing or sneezing, or going to the bathroom. In general, because of poor survivability of these coronaviruses on surfaces, there is likely 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.

Can covid-19 be spread through surfaces or objects?

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

Will warm weather stop the outbreak of COVID-19?

It is not yet known whether 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.  There is much more to learn about the transmissibility, severity, and other features associated with COVID-19 and investigations are ongoing.

What is community spread?

Community spread means people have been infected with the virus in an area, including some who are not sure how or where they became infected.

What temperature kills the virus that causes COVID-19?

Generally coronaviruses survive for shorter periods of time at higher temperatures and higher humidity than in cooler or dryer environments. However, we don’t have direct data for this virus, nor do we have direct data for a temperature-based cutoff for inactivation at this point. The necessary temperature would also be based on the materials of the surface, the environment, etc. Regardless of temperature please follow [CDC’s guidance for cleaning and disinfection](https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/checklist-household-ready.html).

Can mosquitoes or ticks spread the virus that causes COVID-19?

At this time, CDC has no data to suggest that this new coronavirus or other similar coronaviruses are spread by mosquitoes or ticks. The main way that COVID-19 spreads is from person to person.

Am I at risk for COVID-19 in the United States?

This is a rapidly evolving situation and the [risk assessment](https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/summary.html#risk-assessment) may change daily. The latest updates are available on CDC’s Coronavirus Disease 2019 (COVID-19) website.

Has anyone in the United States gotten infected?

Yes. There have been cases of COVID-19 in the U.S. related to travel and through close contact. U.S. case counts are updated regularly Mondays through Fridays. See the [current U.S. case count of COVID-19](https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/cases-in-us.html).

How can I help protect myself?

Visit the [COVID-19 Prevention and Treatment](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html) page to learn about how to protect yourself from respiratory illnesses, like COVID-19.

What should I do if I had close contact with someone who has COVID-19?

There is information for [people who have had close contact](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html) with a person confirmed to have, or being evaluated for, COVID-19 available online.

Who is at higher risk for serious illness from COVID-19?

**Older adults and people of any age who have serious underlying medical conditions** may be at higher risk for more serious complications from COVID-19. **People who have serious underlying medical conditions** like: heart disease, diabetes or lung disease.

What should people at higher risk of serious illness with COVID-19 do?

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; and 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.

Does CDC recommend the use of facemask to prevent COVID-19?

In light of new data about how COVID-19 spreads, along with evidence of widespread COVID-19 illness in communities across the country, CDC recommends that people wear a [cloth face covering](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cloth-face-cover.html) to cover their nose and mouth in the community setting. This is an additional public health measure people should take to reduce the spread of COVID-19 in addition to (not instead of) social distancing, frequent hand cleaning and other everyday preventive actions. A cloth face covering is not intended to protect the wearer, but may prevent the spread of virus from the wearer to others. This would be especially important in the event that someone is infected but does not have symptoms. A cloth face covering should be worn whenever people must go into public settings (grocery stores, for example). Medical masks and N-95 respirators are reserved for healthcare workers and other first responders, as recommended by current CDC guidance.

Am I at risk for COVID-19 from a package or products shipping from China?

There is still a lot that is unknown about the newly emerged COVID-19 and how it spreads. Two other coronaviruses have emerged previously to cause severe illness in people (MERS-CoV and SARS-CoV). The virus that causes COVID-19 is more genetically related to SARS-CoV than MERS-CoV, but both are betacoronaviruses with their origins in bats. While we don’t know for sure that this virus will behave the same way as SARS-CoV and MERS-CoV, we can use the information gained from both of these earlier coronaviruses to guide us. In general, because of poor survivability of these coronaviruses on surfaces, there is likely very low risk of spread from products or packaging that are shipped over a period of days or weeks at ambient temperatures. Coronaviruses are generally thought to be spread most often by respiratory droplets. Currently there is no evidence to support transmission of COVID-19 associated with imported goods and there have not been any cases of COVID-19 in the United States associated with imported goods. Information will be provided on the [Coronavirus Disease 2019 (COVID-19) website](https://www.cdc.gov/coronavirus/2019-nCoV/index.html) as it becomes available.

Is it okay for me to donate blood?

In healthcare settings all across the United States, donated blood is a lifesaving, essential part of caring for patients. The need for donated blood is constant, and blood centers are open and in urgent need of donations. CDC encourages people who are well to continue to donate blood if they are able, even if they are practicing social distancing because of COVID-19. CDC is supporting blood centers by providing recommendations that will keep donors and staff safe. Examples of these recommendations include spacing donor chairs 6 feet apart, thoroughly adhering to environmental cleaning practices, and encouraging donors to make donation appointments ahead of time.

What is the risk of my child becoming sick with COVID-19?

Based on available evidence, children do not appear to be at higher risk for COVID-19 than adults. While some children and infants have been sick with COVID-19, adults make up most of the known cases to date. You can learn more about who is most at risk for health problems if they have COVID-19 infection on CDC’s current [Risk Assessment](https://www.cdc.gov/coronavirus/2019-ncov/cases-updates/summary.html#risk-assessment) page.

How can I protect my child from COVID-19 infection?

You can encourage your child to help stop the spread of COVID-19 by teaching them to do the same things everyone should do to stay healthy. (1) Clean hands often using soap and water or alcohol-based hand sanitizer. (2) Avoid people who are sick (coughing and sneezing). (3) Clean and disinfect high-touch surfaces daily in household common areas (e.g. tables, hard-backed chairs, doorknobs, light switches, remotes, handles, desks, toilets, sinks). (4) Launder items including washable plush toys as appropriate in accordance with the manufacturer’s instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry from an ill person can be washed with other people’s items.

Are the symptoms of COVID-19 different in children than in adults?

No. The symptoms of COVID-19 are similar in children and adults. However, children with confirmed COVID-19 have generally presented with mild symptoms. Reported symptoms in children include cold-like symptoms, such as fever, runny nose, and cough. Vomiting and diarrhea have also been reported. It’s not known yet whether some children may be at higher risk for severe illness, for example, children with underlying medical conditions and special healthcare needs. There is much more to be learned about how the disease impacts children.

Should children wear masks?

CDC recommends that everyone 2 years and older wear a cloth face covering that covers their nose and mouth when they are out in the community. Cloth face coverings should NOT be put on babies or children younger than 2 because of the danger of suffocation. Children younger than 2 years of age are listed as an exception as well as anyone who has trouble breathing or is unconscious, incapacitated, or otherwise unable to remove the face covering without assistance. Wearing cloth face coverings is a public health measure people should take to reduce the spread of COVID-19 in addition to (not instead of) social distancing, frequent hand cleaning, and other everyday preventive actions. A cloth face covering is not intended to protect the wearer but may prevent the spread of virus from the wearer to others. This would be especially important if someone is infected but does not have symptoms. Medical face masks and N95 respirators are still reserved for healthcare personnel and other first responders, as recommended by current CDC guidance.

What steps can my family take to reduce our risk of getting COVID-19?

Avoid close contact with people who are sick. Stay home when you are sick, except to get medical care. Cover your coughs and sneezes with a tissue and throw the tissue in the trash. Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food. 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. Clean and disinfect frequently touched surfaces and objects (e.g., tables, countertops, light switches, doorknobs, and cabinet handles). Launder items, including washable plush toys, as appropriate and in accordance with the manufacturer’s instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry from an ill person can be washed with other people’s items.

What should I do if someone in my house gets sick with COVID-19?

Most people who get COVID-19 will be able to recover at home. Stay home when you are sick, except to get medical care. If you develop **emergency warning signs** for COVID-19 get **medical attention immediately**. Emergency warning signs include: Trouble breathing, Persistent pain or pressure in the chest, New confusion or inability to arouse, or Bluish lips or face. Use a separate room and bathroom for sick household members (if possible). Clean hands regularly by handwashing with soap and water or using an alcohol-based hand sanitizer with at least 60% alcohol. Provide your sick household member with clean disposable facemasks to wear at home, if available, to help prevent spreading COVID-19 to others. [Clean the sick room and bathroom](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfection.html), as needed, to avoid unnecessary contact with the sick person. Avoid sharing personal items like utensils, food, and drinks.

How can I prepare in case my child’s school, child care facility, or university is dismissed?

Talk to the [school or facility](https://www.cdc.govhttps/www.cdc.gov/coronavirus/2019-ncov/community/schools-childcare/guidance-for-schools.html) about their emergency operations plan. Understand the plan for continuing education and social services (such as student meal programs) during school dismissals. If your child attends a [college or university](https://www.cdc.gov/coronavirus/2019-ncov/community/colleges-universities/index.html), encourage them to learn about the school’s plan for a COVID-19 outbreak.

How can I prepare for COVID-19 at work?

Plan for potential changes at your workplace. Talk to your employer about their emergency operations plan, including sick-leave policies and telework options. [Learn how businesses and employers can plan for and respond to COVID-19.](https://www.cdc.govhttps/www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html)

Should I use soap and water or a hand sanitizer to protect against COVID-19?

Handwashing is one of the best ways to protect yourself and your family from getting sick. Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food. If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol.

What cleaning products should I use to protect against COVID-19?

Clean and disinfect frequently touched surfaces such as tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, and sinks.  If surfaces are dirty, clean them using detergent or soap and water prior to disinfection. To disinfect, most common EPA-registered household disinfectants will work. See CDC’s recommendations [for household cleaning and disinfection](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/cleaning-disinfection.html).

Should I make my own hand sanitizer if I can’t find it in the stores?

CDC does not encourage the production and use of homemade hand sanitizer [products because of concerns over the correct use of the ingredientsexternal icon](https://www.fda.gov/media/136118/download) and the need to work under sterile conditions to make the product. Local industries that are looking into producing hand sanitizer to fill in for commercial shortages can refer to the [World Health Organization guidancepdf iconexternal icon](https://www.who.int/gpsc/5may/Guide_to_Local_Production.pdf).

What should I do if there is an outbreak in my community?

Stay home if you are sick. Keep away from people who are sick. Limit close contact with others as much as possible (about 6 feet). **Stay informed about the local COVID-19 situation**. Be aware of temporary school dismissals in your area, as this may affect your household’s daily routine. **Continue practicing everyday preventive actions.**Cover coughs and sneezes with a tissue and wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, use a hand sanitizer that contains 60% alcohol. Clean frequently touched surfaces and objects daily using a regular household detergent and water. **Notify your workplace as soon as possible if your regular work schedule changes.** Ask to work from home or take leave if you or someone in your household gets sick with [COVID-19 symptoms](https://www.cdc.gov/coronavirus/2019-ncov/about/symptoms.html), or if your child’s school is dismissed temporarily. [Learn how businesses and employers can plan for and respond to COVID-19.](https://www.cdc.govhttps/www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html) **Stay in touch with others by phone or email.**If you have a chronic medical condition and live alone, ask family, friends, and health care providers to check on you during an outbreak. Stay in touch with family and friends, especially those at increased risk of developing severe illness, such as older adults and people with severe chronic medical conditions.

How do I prepare my children in case of COVID-19 outbreak in our community?

Outbreaks can be stressful for adults and children. Talk with your children about the outbreak, try to stay calm, and reassure them that they are safe. If appropriate, explain to them that most illness from COVID-19 seems to be mild. [Children respond differently to stressful situations than adults](https://www.cdc.gov/childrenindisasters/helping-children-cope.html).

What steps should parents take to protect children during a community outbreak?

This is a new virus and we are still learning about it, but so far, there does not seem to be a lot of illness in children. Most illness, including serious illness, is happening in adults of working age and older adults. If there cases of COVID-19 that impact your child’s school, the school may dismiss students. Keep track of school dismissals in your community. Read or watch local media sources that report school dismissals. If schools are dismissed temporarily, use alternative childcare arrangements, if needed.If your child/children become sick with COVID-19, notify their childcare facility or school. Talk with teachers about classroom assignments and activities they can do from home to keep up with their schoolwork.

Discourage children and teens from gathering in other public places while school is dismissed to help slow the spread of COVID-19 in the community.

Will schools be dismissed if there is an outbreak in my community?

Depending on the situation, public health officials may recommend community actions to reduce exposures to COVID-19, such as school dismissals. Read or watch local media sources that report school dismissals or and watch for communication from your child’s school. If schools are dismissed temporarily, discourage students and staff from gathering or socializing anywhere, like at a friend’s house, a favorite restaurant, or the local shopping mall.

Should I go to work if there is an outbreak in my community?

Follow the advice of your local health officials. Stay home if you can. Talk to your employer to discuss working from home, taking leave if you or someone in your household gets sick with [COVID-19 symptoms](https://www.cdc.gov/coronavirus/2019-ncov/about/symptoms.html), or if your child’s school is dismissed temporarily. Employers should be aware that more employees may need to stay at home to care for sick children or other sick family members than is usual in case of a community outbreak.

Will businesses and schools close or stay closed in my community and for how long? Will there be a “stay at home” or “shelter in place” order in my community?

CDC makes recommendations, shares information, and provides guidance to help slow down the spread of COVID-19 in the U.S. including guidance for schools and businesses. CDC regularly shares information and provides assistance to state, local, territorial, and tribal health authorities. These local authorities are responsible for making decisions including  “stay at home” or “shelter in place.” What is included in these orders and how they are implemented are also decided by local authorities. These decisions may also depend on many factors such as how the virus is spreading in a certain community.

Please [contact your local health department](https://www.cdc.gov/publichealthgateway/accreditation/departments.html) to find out more.

What are the symptoms and complications that COVID-19 can cause?

Current symptoms reported for patients with COVID-19 have included mild to severe respiratory illness with fever[1](https://www.cdc.gov/coronavirus/2019-ncov/faq.html#footnote1), cough, and difficulty breathing. Read about [COVID-19 Symptoms](https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html).

Where can I get tested for COVID-19?

The process and locations for testing vary from place to place. Contact your state, local, tribal, or territorial department for more information, or reach out to a medical provider. State and local public health departments have received tests from CDC while medical providers are getting tests developed by commercial manufacturers. While supplies of these tests are increasing, it may still be difficult to find someplace to get tested.

Can a person test negative and later test positive for COVID-19?

Using the CDC-developed diagnostic test, a negative result means that the virus that causes COVID-19 was not found in the person’s sample. In the early stages of infection, it is possible the virus will not be detected.

For COVID-19, a negative test result for a sample collected while a person has symptoms likely means that the COVID-19 virus is not causing their current illness.

Why might someone blame or avoid individuals and groups (create stigma) because of COVID-19?

People in the U.S. may be worried or anxious about friends and relatives who are living in or visiting areas where COVID-19 is spreading. Some people are worried about the disease. Fear and anxiety can lead to social stigma, for example, towards Chinese or other Asian Americans or people who were in quarantine. Stigma is discrimination against an identifiable group of people, a place, or a nation. Stigma is associated with a lack of knowledge about how COVID-19 spreads, a need to blame someone, fears about disease and death, and gossip that spreads rumors and myths. Stigma hurts everyone by creating more fear or anger towards ordinary people instead of the disease that is causing the problem.

How can people help stop stigma related to COVID-19?

People can fight stigma and help, not hurt, others by providing social support. Counter stigma by learning and sharing facts. Communicating the facts that viruses do not target specific racial or ethnic groups and how COVID-19 actually spreads can help stop stigma.

Who is at higher risk for serious illness from COVID-19?

**COVID-19 is a new disease and there is limited information regarding risk factors for severe disease. Based on currently available information and clinical expertise, older adults and people of any age who have serious underlying medical conditions might be at higher risk for severe illness from COVID-19.** **Based upon available information to date, those at high-risk for severe illness from COVID-19 include:** People aged 65 years and older People who live in a nursing home or long-term care facility, People with chronic lung disease or moderate to severe asthma, People who have heart disease with complications, People who are immunocompromised including cancer treatment, People of any age with severe obesity (body mass index [(BM]I)≥40) or certain underlying medical conditions, particularly if not well controlled, such as those with diabetes, renal failure, or liver disease might also be at risk. People who are pregnant should be monitored since they are known to be at risk with severe viral illness, however, to date data on COVID-19 has not shown increased risk

What about underlying medical conditions that are not included on this list?

Based on available information, adults aged 65 years and older and people of any age with underlying medical conditions included on this list are at higher risk for severe illness and poorer outcomes from COVID-19. CDC is collecting and analyzing data regularly and will update the list when we learn more. People with underlying medical conditions not on the list might also be at higher risk and should consult with their healthcare provider if they are concerned.

What does well controlled mean?

Generally, well-controlled means that your condition is stable, not life-threatening, and laboratory assessments and other findings are as similar as possible to those without the health condition. You should talk with your healthcare provider if you have a question about your health or how your health condition is being managed.

What does more severe illness mean?

Severity typically means how much impact the illness or condition has on your body’s function.  You should talk with your healthcare provider if you have a question about your health or how your health condition is being managed.

Are people with disabilities at higher risk?

Most people with disabilities are not inherently at higher risk for becoming infected with or having severe illness from COVID-19.  Some people with physical limitations or other disabilities might be at a higher risk of infection because of their underlying medical condition. People with certain disabilities might experience higher rates of chronic health conditions that put them at higher risk of serious illness and poorer outcomes from COVID-19. You should talk with your healthcare provider if you have a question about your health or how your health condition is being managed.

Am I at risk if I go to a funeral or visitation service for someone who died of COVID-19?

There is currently no known risk associated with being in the same room at a funeral or visitation service with the body of someone who died of COVID-19.

Am I at risk if I touch someone who died of COVID-19 after they have passed away?

COVID-19 is a new disease and **we are still learning how it spreads.** The virus that causes COVID-19 is thought to mainly spread from close contact (i.e., within about 6 feet) with a person who is currently sick with COVID-19. The virus likely spreads primarily through respiratory droplets produced when an infected person coughs or sneezes, similar to how influenza and other respiratory infections spread. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. This type of spread is not a concern after death. People should consider not touching the body of someone who has died of COVID-19. Older people and people of all ages with severe underlying health conditions are at higher risk of developing serious COVID-19 illness. There may be less of a chance of the virus spreading from certain types of touching, such as holding the hand or hugging after the body has been prepared for viewing.

What do Funeral Home Workers need to know about handling decedents who had COVID-19?

A funeral or visitation service can be held for a person who has died of COVID-19. Funeral home workers should follow their routine infection prevention and control precautions when handling a decedent who died of COVID-19. If it is necessary to transfer a body to a bag, follow [Standard Precautions](https://www.cdc.gov/infectioncontrol/basics/standard-precautions.html), including additional personal protective equipment (PPE) if splashing of fluids is expected. For transporting a body after the body has been bagged, disinfect the outside of the bag with a [product with EPA-approved emerging viral pathogens claimspdf iconexternal icon](https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf) expected to be effective against COVID-19 based on data for harder to kill viruses. Follow the manufacturer’s instructions for all cleaning and disinfection products (e.g., concentration, application method and contact time, etc.). Wear disposable nitrile gloves when handling the body bag. Decedents with COVID-19 can be buried or cremated, but check for any additional state and local requirements that may dictate the handling and disposition of the remains of individuals who have died of certain infectious diseases.

What should I do if my family member died from COVID-19 while overseas?

When a US citizen dies outside the United States, the deceased person’s next of kin or legal representative should notify US consular officials at the Department of State. Consular personnel are available 24 hours a day, 7 days a week, to provide assistance to US citizens for overseas emergencies. If a family member, domestic partner, or legal representative is in a different country from the deceased person, he or she should call the Department of State’s Office of Overseas Citizens Services in Washington, DC, from 8 am to 5 pm Eastern time, Monday through Friday, at 888-407-4747 (toll-free) or 202-501-4444. For emergency assistance after working hours or on weekends and holidays, call the Department of State switchboard at 202-647-4000 and ask to speak with the Overseas Citizens Services duty officer. In addition, the [US embassyexternal icon](https://www.usembassy.gov/) closest to or in the country where the US citizen died can provide assistance.

My family member died from COVID-19 while overseas. What are the requirements for returning the body to the United States?

CDC does not require an autopsy before the remains of a person who died overseas are returned to the United States. Depending on the circumstances surrounding the death, some countries may require an autopsy. Sources of support to the family include the local consulate or embassy, travel insurance provider, tour operator, faith-based and aid organizations, and the deceased’s employer. There likely will need to be an official identification of the body and official documents issued by the consular office. CDC requirements for importing human remains depend upon if the body has been embalmed, cremated, or if the person died from a [quarantinable communicable disease](https://www.cdc.gov/quarantine/aboutlawsregulationsquarantineisolation.html).

Can I get COVID-19 from my pets or other animals?

There is no reason at this time to think that any animals, including pets, in the United States might be a source of infection with this new coronavirus that causes COVID-19. To date, CDC has not received any reports of pets or other animals becoming sick with COVID-19 in the United States.

Do I need to get my pet tested for COVID-19?

No. At this time, routine testing of animals for COVID-19 is not recommended.

Can animals carry the virus that causes COVID-19 on their skin or fur?

At this time, there is no evidence that the virus that causes COVID-19 can spread to people from the skin or fur of pets.

Talk to your veterinarian about the best ways to care for your pet.

Should I avoid contact with pets or other animals if I am sick with COVID-19?

You should restrict contact with pets and other animals while you are sick with COVID-19, just like you would around other people. Although there have not been reports of pets or other animals becoming sick with COVID-19, it is still recommended that people sick with COVID-19 limit contact with animals until more information is known about the new coronavirus. When possible, have another member of your household care for your animals while you are sick. If you are sick with COVID-19, avoid contact with your pet, including petting, snuggling, being kissed or licked, and sharing food. 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.

Are pets from a shelter safe to adopt?

There is no reason to think that any animals, including shelter pets, in the United States might be a source of COVID-19.

What about imported animals or animal products?

CDC does not have any evidence to suggest that imported animals or animal products pose a risk for spreading COVID-19 in the United States. This is a rapidly evolving situation and information will be updated as it becomes available. The U.S. Centers for Disease Control and Prevention (CDC), the U. S. Department of Agriculture (USDA), and the U.S. Fish and Wildlife Service (FWS) play distinct but complementary roles in regulating the importation of live animals and animal products into the United States. [CDC regulates](https://www.cdc.gov/importation/index.html) animals and animal products that pose a threat to human health, [USDA regulatesexternal icon](https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/animal-and-animal-product-import-information/ct_animal_imports_home) animals and animal products that pose a threat to agriculture; and [FWS regulatesexternal icon](https://www.fws.gov/le/businesses.html) 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.

Can I travel to the United States with dogs or import dogs into the United States during the COVID-19 outbreak?

Please refer to [CDC’s requirements for bringing a dog to the United States](https://www.cdc.gov/importation/bringing-an-animal-into-the-united-states/index.html). The current [requirements for rabies vaccination](https://www.cdc.gov/importation/bringing-an-animal-into-the-united-states/rabies-vaccine.html) apply to dogs imported from China, a high-risk country for rabies.

What precautions should be taken for animals that have recently been imported from outside the United States (for example, by shelters, rescues, or as personal pets)?

Imported animals will need to meet [CDC](https://www.cdc.gov/importation/bringing-an-animal-into-the-united-states/index.html) and [USDAexternal icon](https://www.aphis.usda.gov/aphis/ourfocus/animalhealth/animal-and-animal-product-import-information/live-animal-imports/import-live-animals) requirements for entering the United States. At this time, there is no evidence that companion animals, including pets and service animals, can spread COVID-19. As with any animal introduced to a new environment, animals recently imported should be observed daily for signs of illness. If an animal becomes ill, the animal should be examined by a veterinarian. Call your local veterinary clinic before bringing the animal into the clinic and let them know that the animal was recently imported from another country.

While school’s out, can my child hang out with their friends?

Avoid large and small gatherings in private places and public spaces, such a friend’s house, parks, restaurants, shops, or any other place. This advice applies to people of any age, including teens and younger adults. Make sure children practice [everyday preventive behaviors](https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/prevention.html), such as washing their hands often with soap and water. Remember, if children meet outside of school in bigger groups, it can put everyone at risk

While school’s out, how can I help my child continue learning?

* + Many schools are offering lessons online (virtual learning). Review assignments from the school, and help your child establish a reasonable pace for completing the work. You may need to assist your child with turning on devices, reading instructions, and typing answers. Create a schedule and routine for learning at home, but remain flexible. Have consistent bedtimes, and get up at the same time, Monday through Friday. Structure the day for learning, free time, healthy meals and snacks, and physical activity.