

COVID-19: Frequently Asked Questions for Patients

Disease Basics

What is novel coronavirus 2019 (COVID-19)?

COVID-19 was first described in Wuhan, Hubei Province, China and has spread within China and many other countries. COVID-19 refers to the illness caused by the virus SARS-CoV-2.

How does the virus spread?

This virus likely originated from an animal source but now is spreading between people. We do not know how long the coronavirus lives on surfaces such as clothing, cardboard, and plastic, but the range is likely 1-3 days, unless the surface is disinfected. As with other coronaviruses, when person-to-person spread occurs it mainly happens when an infected person coughs or sneezes and their respiratory droplets come into contact with the eyes, nose, and mouth of other people who are nearby, similar to how influenza and other respiratory pathogens spread. There is also some possibility that this virus can spread from asymptomatic carriers.

What are the symptoms of COVID-19?

Patients with this virus have had mild to severe respiratory illness with symptoms that can include:

- Fever, cough, shortness of breath

Public Health Response and Current Situation

Have there been COVID-19 cases in the United States?

Yes. The first case of COVID-19 in the United States was reported on January 21, 2020. Initial cases of COVID-19 occurred in people with travel to high-risk areas or with known contact to someone with COVID-19. However, there is now documented evidence of community transmission, with many new cases in patients with no travel history or high-risk contacts. The current count of cases of COVID-19 in the United States is available on the Center for Disease Control's (CDC's) webpage: <https://www.cdc.gov/coronavirus/2019-ncov/cases-in-us.html>

Will more people in the U.S. be affected by COVID-19?

Yes. Given the evidence of community transmission, it is anticipated that more people in the U.S. will be affected by COVID-19.

The CDC continues to closely monitor the situation. This is a rapidly evolving situation and information may change daily. The latest updates are available on the CDC's website: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>

Prevention

How do I protect myself against COVID-19?

Unlike influenza, there is no vaccine to prevent COVID-19 infection.

The best way to prevent the spread of respiratory viruses, including COVID-19, is to avoid exposure. The CDC recommends the following general preventive measures to prevent the spread of respiratory infections:

- Wash your hands often with soap and warm water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Do not come to work, stay home and do not travel when you are sick.
- Cover your mouth and nose with a tissue when you cough or sneeze and throw the tissue in the trash. Then wash your hands with soap and water.
- Clean and disinfect frequently touched objects and surfaces.

In addition, the CDC is recommending putting distance between yourself and other people in areas where COVID-19 is spreading through the community. This includes avoiding crowded areas, especially enclosed spaces. If possible, plan any essential trips during times when stores or streets are less crowded.

Additional information on prevention measures can be found here ([Prevention for 2019 Novel Coronavirus](#)).

Should I start wearing a mask when I'm at work or out in public?

The CDC and San Francisco Department of Public Health do not recommend that people who are well wear facemasks to protect themselves from respiratory illnesses, including COVID-19. If you are sick you should cover your mouth with a tissue when you cough or sneeze, throw the tissue in the trash, and then wash your hands. Those with symptoms can wear a mask covering their nose and mouth when around other people.

Will I be safe in the hospital if UCSF Health is treating proven or suspected COVID-19 patients?

UCSF Health cares for patients with complex health conditions and has expertise in treating patients with infections and in infection prevention and control. We have taken measures to help ensure the safety of all patients at UCSF Health.

Our infection prevention practices and protocols are aimed at protecting our faculty, employees and contractors, as well as other patients and visitors.

Any patient with respiratory symptoms is immediately given a mask to wear as a way to contain their respiratory secretions and to prevent spread of infection to others.

Between our campuses at Parnassus and Mission Bay, we have over 40 special isolation rooms that can be used to safely isolate and care for patients with COVID-19. We also have the ability to adapt additional rooms and hospital areas to care for larger numbers of patients if needed.

Are there travel precautions?

The CDC recommends that older adults and people of any age with serious chronic medical conditions consider postponing nonessential travel to most global destinations. Others should avoid non-essential travel to areas with active and widespread community transmission (China, Iran, most European countries including the UK and Ireland and South Korea). While there are no official limitations to domestic travel, older adults and those with chronic medical conditions should avoid air travel if possible.

Check the State Department and CDC travel websites listed below for the most current recommendations: <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>

UCSF COVID BASICS MEDICAL INFORMATION FOR PATIENTS

Medical Information for Patients

What to do if you develop symptoms of respiratory infection?

If you have fever and cough follow the steps below to help limit spread of infection to people in your home and community:

- Stay home except to get medical care. You should not go to work, school, or public areas.
- Separate yourself at home as much as possible from family and pets.
- Cover your mouth and nose when coughing or sneezing.
- Wear a mask to cover your nose and mouth if you have cough and are around other people in your home or in public.
- Wash your hands after touching your face, before eating, after using the bathroom. If soap and water is not available, use hand sanitizer with >60% alcohol.
- Avoid sharing personal household items.
- Clean all high touch services every day such as counters, tabletops, doorknobs, phones, keyboards. Use a household cleaning spray or wipe according to label instructions.
- Monitor your symptoms. If you are feel your symptoms are worsening contact your healthcare provider.
- Check the CDC website for additional information: <https://www.cdc.gov/coronavirus/2019-ncov/about/steps-when-sick.html>

Who should be medically evaluated and tested for COVID-19?

- We are presently recommending evaluation if you develop a new or worsening cough, shortness of breath, fever, body aches or extreme fatigue.
- Please call your physician's office if you develop any of the above symptoms for further advice . You may also call the UCSF coronavirus information line at 415 514 7328.

Is there treatment for COVID-19?

Currently most patients with COVID-19 will not require treatment. For the minority of patients that become more ill, therapy is supportive. At this time, there is no specific treatment for COVID-19. Studies are under way to test antiviral medications and work is in progress to develop a vaccine.

UCSF COVID BASICS IMMUNOSUPPRESSED PATIENTS

Immunosuppressed Patients

Patients taking immunosuppressive medications

I am taking medications that suppress my immune system. Do I need to take special precautions?

Based on experience with other viral respiratory infections it is possible that COVID-19 will be more severe in the immunosuppressed population.

Immunosuppressed patients should follow the following precautions:

- Wash your hands often with soap and warm water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Do not come to work, stay home and do not travel when you are sick.
- Cover your mouth and nose with a tissue when you cough or sneeze and throw the tissue in the trash. Then wash your hands with soap and water.
- Clean and disinfect frequently touched objects and surfaces.
- Avoid crowded public spaces staying at least 6 feet away from persons coughing or appearing ill.

Should I continue to take my immunosuppressive medications?

- Continue to take your immunosuppressive medications if you are well.
- If you are sick with fever or respiratory symptoms, contact your provider for guidance on continuing your immunosuppressive medications.

UCSF COVID BASICS TRANSPLANT PATIENTS

Transplant Patients

I am taking medications that suppress my immune system. Do I need to take special precautions?

Based on experience with other viral respiratory infections it is possible that COVID-19 will be more severe in the immunosuppressed population.

Immunosuppressed patients should follow the following precautions:

- Wash your hands often with soap and warm water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Do not come to work, stay home and do not travel when you are sick.
- Cover your mouth and nose with a tissue when you cough or sneeze and throw the tissue in the trash. Then wash your hands with soap and water.
- Clean and disinfect frequently touched objects and surfaces.
- Avoid crowded public spaces staying at least 6 feet away from persons coughing or appearing ill.

Should I continue to take my immunosuppressive medications?

- Continue to take your immunosuppressive medications if you are well.
- If you are sick with fever or respiratory symptoms, contact your provider for guidance on continuing your immunosuppressive medications.

Will donor organs be safe?

Organ procurement organizations will screen donors for exposure and symptoms. Potential donors with suspected COVID-19, or contact with someone with COVID-19, will not be pursued. Donors with exposure risk and no symptoms may be considered on a case-by-case basis. This is a rapidly evolving situation and these guidelines may change in response to new information.

Will living organ donation be safe?

Living donors with travel to a high-risk area in the last 14 days should be deferred until 14 days from travel. Potential living donors can be advised to not travel to areas where local transmission is occurring and to report new onset cough and flu-like symptoms. Routine testing of living and deceased donors for COVID-19 is not suggested at this time. This may change over time as the situation evolves.

UCSF BASICS HIV POSITIVE PATIENTS

HIV positive patients

I am HIV positive. Do I need to take special precautions?

Currently there is little experience with COVID-19 in HIV positive patients. It is possible that patients with low CD4 counts and poorly controlled HIV infection will be more susceptible to COVID-19 and have more serious disease. All HIV positive patients should follow guidelines to decrease their chance of COVID -19 infection:

- Wash your hands often with soap and warm water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Do not come to work, stay home and do not travel when you are sick.
- Cover your mouth and nose with a tissue when you cough or sneeze and throw the tissue in the trash. Then wash your hands with soap and water.
- Clean and disinfect frequently touched objects and surfaces.

I am HIV positive. Do I need to contact my physician to obtain an extended supply of my antiretroviral medications?

Currently there are no expected medication shortages and obtaining an extended supply of antiretroviral medications beyond 90 days is not recommended.

UCSF COVID BASICS PREGNANT PATIENTS

Pregnant Patients

I am pregnant. Do I need to take special precautions?

Pregnant women experience immunologic and physiologic changes which might make them more susceptible to viral respiratory infections. Prior data have suggested that this is true for other coronavirus infections (SARS-CoV and MERS-CoV) and certain other respiratory infections, such as influenza. Based on limited data so far, this does NOT appear to be the case with COVID-19. At this time, there are no reported COVID-19 deaths in pregnant women. However, pregnant women should follow the same precautions as non-pregnant patients:

- Wash your hands often with soap and warm water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Do not come to work, stay home and do not travel when you are sick.
- Cover your mouth and nose with a tissue when you cough or sneeze and throw the tissue in the trash. Then wash your hands with soap and water.
- Clean and disinfect frequently touched objects and surfaces.

Are pregnant women with COVID-19 infection at increased risk of adverse pregnancy outcomes?

We do not have information on adverse pregnancy outcomes in pregnant women with COVID-19, as very few have been reported. Pregnancy loss, including miscarriage and stillbirth, did not occur more frequently in cases of infection with other related coronaviruses [SARS and MERS] during pregnancy. Whether high fevers during the first trimester of pregnancy increase the risk of certain birth defects is uncertain.

At this time, there is no information on long-term health effects on infants either with COVID-19, or those exposed to the virus that causes COVID-19 in utero.

Can pregnant women pass the virus to their baby during pregnancy and delivery?

The virus that causes COVID-19 is thought to spread mainly by close contact with an infected person through respiratory droplets. We are still collecting data, but currently, there is no evidence that novel coronavirus can be passed on to the baby in utero. One study found that among nine pregnant women with COVID-19 pneumonia, amniotic fluid, cord blood and breast milk samples all tested negative for the virus, as did throat swabs from the children following birth.

Can nursing women pass the virus to their baby during breast feeding?

COVID-19 has not been detected in breastmilk although data are limited. If mothers with COVID-19 are separated from their infants, they should express breastmilk but should wash their hands thoroughly and disinfect the pump and bottles after use. Someone who is healthy should feed the child. If an infected mother decides to breastfeed, she should wear a face mask and wash her hands. You can refer to the CDC website for additional information on pregnancy and COVID-19: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/pregnancy-guidance-breastfeeding.html>

UCSF COVID BASICS CHILDREN

Children

Are children more susceptible to the virus that causes COVID-19 compared with the general population and how can infection be prevented?

No, there is no evidence that children are more susceptible. Although infections in children have been reported, including very young children, most confirmed cases of COVID-19 have occurred in adults.

Infection among children was fairly uncommon during prior Severe Acute Respiratory Syndrome coronavirus (SARS-CoV) and Middle East respiratory syndrome coronavirus (MERS-CoV) outbreaks. Children should engage in usual preventive actions to avoid infection, including cleaning hands often using soap and water or alcohol-based hand sanitizer, avoiding people who are sick, and staying up to date on vaccinations, including influenza vaccine.

Does the clinical presentation of COVID-19 differ in children compared with adults?

Limited reports of children with COVID-19 in China have described cold-like symptoms, such as fever, runny nose, and cough. Gastrointestinal symptoms, particularly vomiting, as well as runny nose and sore throat may be more prominent in children than adults.

Are children at increased risk for severe illness, morbidity, or mortality from COVID-19 infection compared with adults?

There have been very few reports of the clinical outcomes for children with COVID-19 to date. Limited data from China suggest that children with confirmed COVID-19 may present with mild symptoms and though severe complications (acute respiratory distress syndrome, septic shock) have been reported, they appear to be uncommon. However, as with other respiratory illnesses, certain populations of children may be at increased risk of severe infection, such as children with underlying health conditions.

Are there any treatments available for children with COVID-19?

There are currently no antiviral drugs recommended or licensed by the U.S. Food and Drug Administration for COVID-19. Clinical management includes prompt implementation of [recommended infection prevention and control measures](#) in healthcare settings and supportive management of complications. See more information on CDC [Clinical Guidance for COVID-19](#). Children and their family members should engage in usual preventive actions to prevent the spread of respiratory infections, including covering coughs, cleaning hands often with soap and water or alcohol-based hand sanitizer, and staying up to date on vaccinations, including influenza.

Older Adults

Are older adults more susceptible to the virus that causes COVID-19 compared with the general population and how can infection be prevented?

Yes, there is evidence that older adults (Over 60) are more susceptible, and older adults have been identified by the CDC as persons at higher risk of getting very sick from this illness. People living in long-term care facilities are at particularly high risk due to the increased ability for viruses to spread rapidly in this environment. Please see the CDC's specific guidance for older and adults and people with chronic conditions like heart disease, lung disease and diabetes. The CDC also has a useful webinar for older adults on COVID-19.

Older adults with additional medical problems (heart disease, diabetes, lung problems and potentially dementia are at the highest risk), so it is important for you to understand your individual risk.

Older adults should engage in usual preventive actions to avoid infection, including cleaning hands often using soap and water or alcohol-based hand sanitizer, avoiding people who are sick, and staying up to date on vaccinations, including influenza vaccine.

In addition to these important preventive actions, older adults should stay at home as much as possible ("social distancing"), avoid crowds and stock up on necessary supplies/medications (try to recruit a friend or family member to help with this). Older adults should avoid all non-essential travel, including plane trips and cruises. Social distancing can lead to loneliness and isolation, which can also be detrimental to your health. It is critical to still connect with others (e.g. via telephone, video call, email, etc) to reduce loneliness. The Institute on Aging offers a free 24/7 Friendship Hotline: 1-800-971-0016. You may also go for a walk outside, in a non-crowded area, and should still try to stay active at home.

It is still OK to go get groceries and medications or ask to see if someone else can help you with this.

How should I manage my need for routine medical care for chronic conditions, during the COVID-19 pandemic?

UCSF and your providers are able to offer telehealth visits, in which you can interact with your provider via video and receive management recommendations without coming into the clinic. The first step to setting this up is to activate your MyChart account, and call your provider's clinic to set up the visit. At this time, we recommend video visits for routine, non-urgent medical visits. If you are unable to do a video visit, we recommend postponing non-urgent visits. Your clinical team is also available to respond to your questions via MyChart and

telephone. We can also see you in a face-to-face visit for urgent issues that cannot be resolved via telehealth, telephone or MyChart.

If possible we recommend keeping at least a 14 day supply of medications for chronic conditions. Your insurance company may limit the amount you can keep on hand (consider a mail order pharmacy). Keep over the counter home remedies available, if you need to treat fever at home. We recommend keeping acetaminophen at home, as this is safe for most older adults.

If you are caring for an older adult with dementia, the Alzheimer's Association provides useful tips and information here: [https://www.alz.org/help-support/caregiving/coronavirus-\(covid-19\)-tips-for-dementia-care](https://www.alz.org/help-support/caregiving/coronavirus-(covid-19)-tips-for-dementia-care)

Does the clinical presentation of COVID-19 differ in older adults compared with the general population?

The most common symptoms of COVID-19 are fever, cough and shortness of breath. Older adults may not have these typical symptoms, and may instead have more vague symptoms like malaise or confusion. In some cases, COVID-19 infection evolves into more severe symptoms, which can include shortness of breath, pain/pressure in the chest, new confusion/somnolence, or bluish lips/face. These are emergency warning signs for which you should seek emergency care.

Are older adults at increased risk for severe illness, morbidity, or mortality from COVID-19 infection compared with adults?

Reports suggest that older adults are at increased risk for severe illness, morbidity and mortality, and that risk increases with increasing age and certain comorbidities (other medical problems) like heart disease, lung disease and diabetes.