

COVID-19 Resources



Introduction

This interim guidance is based on what is currently known about the coronavirus disease 2019 (COVID-19). The Centers for Disease Control and Prevention (CDC) will update this interim guidance as needed and as additional information becomes available.

CDC is working across the Department of Health and Human Services and across the U.S. government in the public health response to COVID-19. Much is unknown about how the virus that causes COVID-19 spreads. Current knowledge is largely based on what is known about similar coronaviruses.

Coronavirus

Coronaviruses are a large family of viruses that are common in humans and many different species of animals, including camels, cattle, cats and bats. Rarely, animal coronaviruses can infect people and then spread between people, such as with MERS-CoV and SARS-CoV. The virus that causes COVID-19 is spreading from person to person in China and some limited person-to-person transmission has been reported in countries outside China, including the United States. However, respiratory illnesses like seasonal influenza, are currently widespread in many U.S. communities.

The following interim guidance may help prevent workplace exposures to acute respiratory illnesses, including COVID-19, in non-healthcare settings. The guidance also provides planning considerations if there are more widespread, community outbreaks of COVID-19.

To prevent stigma and discrimination in the workplace, use only the guidance described below to determine risk of COVID-19. Do not make determinations of risk based on race or country of origin and be sure to maintain confidentiality of people with confirmed COVID-19.

There is much more to learn about the transmissibility, severity and other features of COVID-19, and investigations are ongoing. Updates are available on CDC's webpage at www.cdc.gov/coronavirus/covid19.

Important considerations for creating an infectious disease outbreak response plan:

During a COVID-19 outbreak, all sick employees should stay home and away from the workplace, respiratory etiquette and hand hygiene should be encouraged, and routine cleaning of commonly touched surfaces should be performed regularly.

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Wash Your Hands Often to Stay Healthy

You can help yourself and your loved ones stay healthy by washing your hands often, especially during these key times when you are likely to get and spread germs:

- **Before, during, and after** preparing food
- **Before** eating food
- **Before** and **after** treating a cut or wound
- **After** using the toilet
- **After** blowing your nose, coughing, or sneezing
- **After** touching an animal, animal feed, or animal waste
- **After** handling pet food or pet treats
- **After** touching garbage



Follow Five Steps to Wash Your Hands the Right Way

Washing your hands is easy, and it's one of the most effective ways to prevent the spread of germs. Clean hands can stop germs from spreading from one person to another and throughout an entire community—from your home and workplace to childcare facilities and hospitals.

Follow these five steps every time.

1. **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
2. **Lather** your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
3. **Scrub** your hands for at least 20 seconds. Need a timer? Hum the “Happy Birthday” song from beginning to end twice.
4. **Rinse** your hands well under clean, running water.
5. **Dry** your hands using a clean towel or air dry them.

Use Hand Sanitizer When You Can't Use Soap and Water



You can use an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available.

Washing hands with soap and water is the best way to get rid of germs in most situations. If soap and water are not readily available, you can use an alcohol-based hand sanitizer that contains at least 60% alcohol. You can tell if the sanitizer contains at least 60% alcohol by looking at the product label.

Sanitizers can quickly reduce the number of germs on hands in many situations. However,

- Sanitizers do **not** get rid of all types of germs.
- Hand sanitizers may not be as effective when hands are visibly dirty or greasy.
- Hand sanitizers might not remove harmful chemicals from hands like pesticides and heavy metals.

Caution! Swallowing alcohol-based hand sanitizers can cause alcohol poisoning if more than a couple of mouthfuls are swallowed. Keep it out of reach of young children and supervise their use.

How to use hand sanitizer

- Apply the gel product to the palm of one hand (read the label to learn the correct amount).
- Rub your hands together.
- Rub the gel over all the surfaces of your hands and fingers until your hands are dry. This should take around 20 seconds.

Clean & Disinfect

Recommendations for US Households with Suspected/Confirmed Coronavirus Disease 2019

Background

There is much to learn about the novel coronavirus that causes coronavirus disease 2019 (COVID-19). Based on what is currently known about the novel coronavirus and similar coronaviruses that cause SARS and MERS, spread from person-to-person with these viruses happens most frequently among close contacts (within about 6 feet). This type of transmission occurs via respiratory droplets. On the other hand, transmission of novel coronavirus to persons from surfaces contaminated with the virus has not been documented. Transmission of coronavirus occurs much more commonly through respiratory droplets than through fomites. Current evidence suggests that novel coronavirus may remain viable for hours to days on surfaces made from a variety of materials. Cleaning of visibly dirty surfaces followed by disinfection is a best practice measure for prevention of COVID-19 and other viral respiratory illnesses in households and community settings.

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Purpose

This guidance provides recommendations on the cleaning and disinfection of households where persons under investigation (PUI) or those with confirmed COVID-19 reside or may be in self-isolation. It is aimed at limiting the survival of the virus in the environments. These recommendations will be updated if additional information becomes available.

These guidelines are focused on household settings and are meant for the general public.

- **Cleaning** refers to the removal of germs, dirt, and impurities from surfaces. Cleaning does not kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.
- **Disinfecting** refers to using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs, but by killing germs on a surface *after* cleaning, it can further lower the risk of spreading infection.

General Recommendations for Routine Cleaning and Disinfection of Households

Community members can practice routine cleaning of frequently touched surfaces (for example: tables, doorknobs, light switches, handles, desks, toilets, faucets, sinks) with household cleaners and EPA-registered disinfectants that are appropriate for the surface, following label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.

Face Masks/ Cloth Face Coverings

Wearing a face mask helps protect you from spreading to others. Wear a face mask when you cannot socially distance (standing apart from another person six feet). Wear indoors, except when eating or drinking in galley.

- CDC recommends that people wear cloth face coverings in public settings and when around people who don't live in your household, especially when other [social distancing](#) measures are difficult to maintain.
- Cloth face coverings may help prevent people who have COVID-19 from spreading the virus to others.
- Cloth face coverings are most likely to reduce the spread of COVID-19 when they are widely used by people in public settings.

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- Cloth face coverings should NOT be worn by children under the age of 2 or anyone who has trouble breathing, is unconscious, incapacitated, or otherwise unable to remove the mask without assistance. General Recommendations for Cleaning and Disinfection of Households with People Isolated in Home Care (e.g. Suspected/Confirmed to have COVID-19)
 - Household members should educate themselves about COVID-19 symptoms and preventing the spread of COVID-19 in homes.
 - **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)**
 - In the bedroom/bathroom dedicated for an ill person: consider reducing cleaning frequency to **as-needed** (e.g., soiled items and surfaces) to avoid unnecessary contact with the ill person.
 - As much as possible, an ill person should stay in a specific room and away from other people in their home, following home care guidance.
 - The caregiver can provide personal cleaning supplies for an ill person's room and bathroom, unless the room is occupied by child or another person for whom such supplies would not be appropriate. These supplies include tissues, paper towels, cleaners and EPA-registered disinfectants (examples at [this linkpdf iconexternal icon](#)).
 - If a separate bathroom is not available, the bathroom should be cleaned and disinfected after each use by an ill person. If this is not possible, the caregiver should wait as long as practical after use by an ill person to clean and disinfect the high-touch surfaces.
 - Household members should follow home care guidance when interacting with persons with suspected/confirmed COVID-19 and their isolation rooms/bathrooms.

How to clean and disinfect:

Surfaces

- Wear disposable gloves when cleaning and disinfecting surfaces. Gloves should be discarded after each cleaning. If reusable gloves are used, those gloves should be dedicated for cleaning and disinfection of surfaces for COVID-19 and should not be used for other purposes. Consult the manufacturer's instructions for cleaning and disinfection products used. Clean hands immediately after gloves are removed.
- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common EPA-registered household disinfectants should be effective.
- Diluted household bleach solutions can be used if appropriate for the surface. Follow manufacturer's instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any

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other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted.

- Prepare a bleach solution by mixing:
 - 5 tablespoons (1/3rd cup) bleach per gallon of water or
 - 4 teaspoons bleach per quart of water
- [Products with EPA-approved emerging viral pathogens claims pdf icon external icon](#) are 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.).
- For soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces. After cleaning:
- Launder items 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, or Use products with the EPA-approved emerging viral pathogens claims (examples at [this link pdf icon external icon](#)) that are suitable for porous surfaces.

Clothing, towels, linens and other items that go in the laundry

- Wear disposable gloves when handling dirty laundry from an ill person and then discard after each use. If using reusable gloves, those gloves should be dedicated for cleaning and disinfection of surfaces for COVID-19 and should not be used for other household purposes. Clean hands immediately after gloves are removed.
 - If no gloves are used when handling dirty laundry, be sure to wash hands afterwards.
 - If possible, do not shake dirty laundry. This will minimize the possibility of dispersing virus through the air.
 - Launder items 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.
 - Clean and disinfect clothes hampers according to guidance above for surfaces. If possible, consider placing a bag liner that is either disposable (can be thrown away) or can be laundered.

Hand hygiene and other preventive measures

- Household members should clean hands often, including immediately after removing gloves and after contact with an ill person, by washing hands with soap and water for 20 seconds. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used. However, if hands are visibly dirty,

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- always wash hands with soap and water.
- Household members should follow normal preventive actions while at work and home including recommended hand hygiene and avoiding touching eyes, nose, or mouth with unwashed hands.
 - Additional key times to clean hands include:
 - After blowing one's nose, coughing, or sneezing
 - After using the restroom
 - Before eating or preparing food
 - After contact with animals or pets
 - Before and after providing routine care for another person who needs assistance (e.g. a child)

Other considerations

- The ill person should eat/be fed in their room if possible. Non-disposable food service items used should be handled with gloves and washed with hot water or in a dishwasher. Clean hands after handling used food service items.
- If possible, dedicate a lined trash can for the ill person. Use gloves when removing garbage bags, handling, and disposing of trash. Wash hands after handling or disposing of trash.
- Consider consulting with your local health department about trash disposal guidance if available.

Clinical evaluation of suspect cases

Identifying and isolating passengers and crew with possible symptoms of COVID-19 as soon as possible is needed to minimize transmission of this virus.

Symptoms may include fever, cough, and shortness of breath. Patients have a fever if they feel warm to the touch, give a history of feeling feverish, or have a measured temperature of 100.4°F (38°C) or higher. COVID-19 infections have ranged from little-to-no symptoms to severe illness and death. The incubation period is believed to be 2–14 days.

Although routes of transmission have yet to be definitively determined, CDC recommends a cautious approach to interacting with patients under investigation.

- Ask such patients to wear a facemask (a surgical mask, not N-95) as soon as they are identified.
- Evaluate patients in a private room with the door closed, ideally an airborne infection isolation room, if available.

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- Staff entering the room should use Standard Precautions, Contact Precautions, and Airborne Precautions, and use eye protection (such as goggles or a face shield).
- Because the signs and symptoms of COVID-19 are non-specific, people onboard who have fever or acute respiratory illness should be tested for influenza. CDC's influenza website also includes recommendations for the clinical use of influenza diagnostic tests, information on available tests, specimen collection, and guidance on interpreting influenza testing results.

Managing sick passengers or crew when boarding and onboard

Deny boarding of a passenger or crew member who is suspected to have COVID-19 infection based on signs and symptoms plus travel history in China or other known exposure at the time of embarkation.

Isolate passengers or crew onboard who are suspected of having COVID-19 infection in a single-occupancy cabin with the door closed until symptoms are improved. Discontinuing isolation precautions is made on a case-by-case basis, in consultation with CDC.

Ideally, medical follow-up should occur in the isolated person's cabin. Coordinate visits to the onboard medical center in advance, if needed, with medical staff. Have the sick person wear a facemask before leaving their cabin.

Managing passengers and crew after exposure

Refer to [CDC guidance](#) for information about assessing exposure risk and recommended public health management. CDC is available for consultation on risk assessment and management of exposed passengers and crew. For consultation, contact the CDC Emergency Operations Center at 770-488-7100 or eocreport@cdc.gov.

Passengers and crew members who have had high-risk exposures to a person suspected of having COVID-19 should be quarantined in their cabins. All potentially exposed passengers, should self-monitor under supervision until 14 days after the last possible exposure.

Preventing infection in crew members

Ensure your crew members are aware of the

- Global risk of COVID-19 during international travel
- Signs and symptoms that may indicate a sick traveler has COVID-19
- Requirement for the ship's medical unit to report a traveler with suspected or known COVID-

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- 19 to CDC, if ship is destined for a US port
- Importance of not working on a ship while sick with fever or acute respiratory symptoms

CDC recommends that crew members who self-report or appear to have fever or acute respiratory symptoms (such as cough or shortness of breath) be immediately evaluated.

In addition to annual influenza vaccination, have crew members follow these recommendations when their work activities involve contact with passengers and other crew members who have fever or acute respiratory illness.

- Ask the sick person to wear a facemask if tolerated, any time they leave their cabin or interact with other people.
- Maintain a distance of 6 feet from the sick person while interviewing, escorting, or providing other assistance.
- Keep interactions with sick people as brief as possible.
- Limit the number of people who interact with sick people. To the extent possible, have a single person give care and meals to the sick person.
- Avoid touching your eyes, nose, and mouth.
- Wash your hands often with soap and water. If soap and water are not available and if hands are not visibly soiled, use a hand sanitizer containing 60%-95% alcohol.
- Provide tissues and access to soap and water and ask the sick persons to:
 - Cover their mouth and nose with a tissue (or facemask) when coughing or sneezing.
 - Throw away used tissues immediately in a disposable container (e.g., plastic bag) or a washable trash can.
 - Wash their hands often with soap and water for 20 seconds. If soap and water are not available and hands are not visibly soiled, the sick person should use a hand sanitizer containing 60%-95% alcohol.
- If soap and water are not available and hands are not visibly soiled, the sick person should use a hand sanitizer containing 60%-95% alcohol.

Quarantine and Isolation Procedures Onboard Vessel:

When the individual has been identified as having the COVID-19, all appropriate isolation and quarantine procedures should be implemented per CDC guidance. As a minimum, vessel Master and shore side management should reference CDC's Interim Guidance for Ships on Managing Suspected Coronavirus Disease 2019

Potentially infected personnel should be isolated as completely as possible, restricted to a single cabin or area of the vessel. Precautions should be implemented to prevent airborne spread including (to the extent possible) sealing off the cabin from connected spaces and creating negative air

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pressure within the space. Cross connections in ventilation should be closed and the use of High-Efficiency Particulate Absorbing (HEPA) equipment, such as portable air filtration units should be as an additional precaution. Contact between vessel personnel and potentially infected individuals should be kept at an absolute minimum, following additional guidance as outlined within CDC guidance for Management of Ill Passengers/Crew for COVID-19 and similarly transmitted diseases.

Quarantine should be maintained until the infected individual is removed from the vessel. Discontinuing quarantine precautions for any other reason should only be made during emergency situations or in consultation with, and following the explicit approval of, the CDC and USCG.

Safety and Protection of All Personnel during Transit:

In order to ensure the continued health of the vessel's crew, crew members and other personnel onboard should be regularly screened and results/responses recorded. Screening questionnaires should focus on symptoms listed in CDC guidance, COVID-19 Symptoms and Testing, with particular attention to the listed "emergency warning signs." Responses should be recorded appropriately and stored in personnel records onboard.

If crew members onboard begin showing symptoms of illness during transit, similar quarantine procedures described above should be followed. Isolating these individuals as soon as possible can minimize even further transmission of this virus. The USCG is currently taking the approach that there is no such thing as over-reporting of illnesses but is likewise aware of the possibility of overwhelming existing response capabilities. Records of regular screenings, temperature readings, specific symptoms, and any relevant medical information should be relayed to the COTP and each case will be addressed on a case by case basis.

Arrival in Port Carrying Potentially Infected Personnel

Illness of a person onboard a vessel that may adversely affect the safety of a vessel or port facility is a hazardous condition per 33 C.F.R. 160.216 and must be immediately reported to the USCG COTP. During transport, regular status reports should be provided to the relevant USCG COTP including patient condition and vessel Estimated Time of Arrival (ETA). If the COTP cannot be reached prior to arrival, USCG district maritime emergency contact details may be found at District and Regional Command Center Contact Information.

Personnel Transfer from the Vessel to Shore-side Parties – Procedures and Precautions

When disembarking a potentially infected individual, similar precautions should be taken as observed during embarkation. The individual being transferred to shore should be accompanied by one (1) or more assistants to ensure safety. If possible, these assistants should be from the shore-side medical facility, transportation entity, or other responsible party rather than vessel crew. If required, vessel crew participating in transfer operations should don appropriate medical PPE. Once the individual has disembarked the route(s), surfaces, paperwork and other materials contacted by the individual and assistants should be disinfected in the same manner as when they were brought on board. Area(s) used for quarantine/isolation should be decontaminated as noted below.

Disinfecting and Cleaning of Vessels in Port

Cleaning and disinfecting of the vessel in general and the affected areas specifically will be required, in all cases, but the extent of these activities will need to be determined. The whole vessel may need to be decontaminated unless the individual in question was successfully isolated to specific areas and such isolation is explicitly documented.

Those areas to which the individual was exposed should be thoroughly cleaned and disinfected in accordance with available industry practices, such as World Health Organization's Guide to Ship Sanitation and CDC guidance including the "Recommendations – Environmental Services" section of Guidelines for Environmental Infection Control in Health-Care Facilities. Until such procedures are performed other personnel should be restricted from entering those areas. Personnel performing cleaning tasks should take all necessary safety precautions including donning all proper safety gear and protective equipment using guidance provided in Procedures and Precautions, above.