COVID-19 Call Center Script

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General Call Center Guidelines

When answering a call for the ODH COVID-19 call center, please use the following greeting:

- “Ohio Department of Health COVID-19 information line, this is (YOUR NAME) how may I assist you?”

When concluding a call for the ODH COVID-19 call center, please use the following closing:

- “Is there any additional information that you need?” (answer the question or if none continue)
- “This is an evolving disease and information may change. If you have question after this call, please visit the Ohio Department of Health (ODH) coronavirus website (coronavirus.ohio.gov) and the Centers for Disease Control and Prevention (CDC) website (cdc.gov) for the most up-to-date information.”
- “Thank you for calling the Ohio Department of Health.”
At the end of each shift, provide a written summary of the most common questions and report them to the call center supervisor.

Calls Requiring Immediate Referral

1. A local school/business has a group that traveled to “China, South Korea, Italy, Iran, Japan or current list of affected countries”. They have symptoms of vomiting and diarrhea (or other non-respiratory symptoms). What do I do?

   During business hours, transfer to BID, 614-995-5599. Otherwise, transfer to call center supervisor.

2. Caller may have been exposed to COVID-19 because caller has traveled to “China, South Korea, Italy, Iran, Japan or current list of affected countries” and has symptoms: fever, cough, shortness of breath.

   Transfer to call center supervisor. If this is a traveler, he or she should be referred to their local health department.

   If this person is a healthcare provider calling on behalf of a patient, he or she should call their local health department.

   If this person is a local health department needing to evaluate a person for COVID-19, they should be transferred to the 24/7 infectious diseases line.

3. Caller was part of a group that travelled to “China, South Korea, Italy, Iran, Japan or current list of affected countries.” Multiple people in the group have respiratory symptoms. What should the travelers do?

   Transfer to call center supervisor.

4. Complaints regarding long-term care or non-long-term care facilities (for example: healthcare personnel not wearing PPE, people not washing their hands, abuse or general facility complaints, etc.):

   Please refer these callers to either the complaint line or the ODH website where the complaint form can be filled out electronically. The toll-free number for registering complaints is 1-800-342-0553. The complainant may choose to be anonymous. To file a complaint online please visit the complaints page at the following: https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/complaints-nursing-home-and-healthcare-facilities/complaints-hcf-nh

Disease Basics

5. What is novel coronavirus or COVID-19?

   A novel coronavirus means it is new. 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.
(Add only if the caller asks about other coronaviruses:) 229E, NL63, OC43, or HKU1 are common. Follow your care plan. Patients with COVID-19 will be evaluated and cared for differently than patients with common coronaviruses.


6. What is coronavirus disease 2019 (COVID-19)?

Coronavirus disease 2019 (COVID-19) is a respiratory illness. It can spread from person-to-person. It mainly spreads, by droplets from coughing and sneezing. The virus that causes COVID-19 is a novel (new). It was first identified during an outbreak in Wuhan, China in December 2019. The World Health Organization (WHO) named it. ‘CO’ stands for ‘corona,’ ‘VI’ for ‘virus,’ and ‘D’ for disease. Formerly, this disease was referred to as “2019 novel coronavirus” or “2019-nCoV.”


7. What are the symptoms?

Patients with COVID-19 have had mild to severe illness with symptoms of

- fever
- cough
- shortness of breath


8. How severe is COVID-19?

Experts are still learning about illnesses caused by COVID-19. Symptoms have ranged from those like a common cold to severe pneumonia. Some people have been hospitalized. Deaths have been reported mainly in older adults or those who have other health problems.


9. What are the severe complications?

Some patients have pneumonia in both lungs.


10. How soon do signs and symptoms develop after exposure?

The time between exposure and symptoms is 2-14 days. To be safe, exposed people are asked to stay away from others for 14 days.

11. **What is the name of the virus that causes COVID-19?**

The virus is called severe acute respiratory syndrome coronavirus 2, shortened to SARS-CoV-2.

(Add only if the caller asks for more detailed information) The International Committee on Taxonomy of Viruses (ICTV) names new viruses. On February 11, 2020, the ICTV, named the novel coronavirus, first identified in Wuhan, China, severe acute respiratory syndrome coronavirus 2, shortened to SARS-CoV-2. The virus is related to the SARS-associated coronavirus (SARS-CoV) that caused an outbreak of severe acute respiratory syndrome (SARS) in 2002-2003; however, it is not the same virus.


12. **What is the source of the virus that causes COVID-19?**

Coronaviruses are a large family of viruses. Some cause sickness in people, and others, such as canine and feline coronaviruses, only in animals. Rarely, animal coronaviruses can infect people. Once that happens the coronavirus can spread between people. This is suspected to have occurred for the virus that causes COVID-19.

(Add only if the caller asks for more detailed information) Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS) are two other examples of coronaviruses that originated in animals and then spread to people.


13. **Is the coronavirus that causes COVID-19 the same as MERS-CoV or SARS-CoV?**

COVID is one of a large family of viruses. COVID-19 is different than MERS-CoV or SARS-CoV.

The coronavirus most like the virus causing COVID-19 is SARS-CoV. There are ongoing investigations to learn more. The situation is changing, and information will be updated as it becomes available.


14. **My child, sister, brother, spouse, parent, significant other, etc. tested positive for Coronavirus (OC43, 229E, HKU1 or NL63), should I be worried?**

No. Coronaviruses are a large family of viruses. Coronavirus OC43, 229E, HKU1 or NL63 are common. They are not the new coronavirus that was first identified in Wuhan, Hubei Province, China.

SOURCE: [https://www.cdc.gov/coronavirus/types.html](https://www.cdc.gov/coronavirus/types.html)
COVID-19 Transmission and Prevention

15. How does COVID-19 spread?

The virus that causes COVID-19 probably started in animals and spread to people. Now it is spreading from person-to-person. It’s important to note that the chance of person-to-person varies depending on the person and disease. Some diseases are easily spread (like measles), while other diseases are less so.

Health experts are still learning the details about how COVID-19 spreads. Other coronaviruses spread from an infected person to others through:

- The air by coughing and sneezing.
- Close personal contact, such as touching or shaking hands.
- Touching an object or surface with the virus on it, then touching your mouth, nose, or eyes.
- In rare cases, contact with feces.

The virus that causes COVID-19 seems to be spreading easily and sustainably in the community (“community spread”) in some affected geographic areas.


16. Who is at risk for COVID-19?

There are confirmed cases in several states in the US, including Ohio. To slow the spread of the disease, health officials are working with healthcare providers to promptly identify and evaluate any suspected cases. In addition, most mass gatherings of people have been cancelled, postponed, or moved online. This limits any potential exposures to the virus. You can limit your risk by washing your hands frequently, avoid touching your face, and staying away from crowded areas.

Older adults and those with underlying health conditions are considered more at-risk and should take additional precautions to prevent infection. Source for high-risk individuals: [https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/high-risk-complications.html](https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/high-risk-complications.html)


17. What should those over age 65 do to prevent getting COVID-19?

Individuals who are age 65 and older should not leave their home unless absolutely necessary. They are considered to be at high-risk for COVID-19. If possible, seek help from family members, friends, or neighbors to get everyday items such as food, medications, and personal care items.

18. What should those with high-risk medical conditions such as heart disease, diabetes, obesity, young children with Cystic Fibrosis, those who are immunocompromised, and hemophilia do to prevent getting COVID-19?
Individuals who are in these high-risk categories should not leave their home unless absolutely necessary. If possible, seek help from family members, friends, or neighbors to get everyday items such as food, medications, and personal care items.

19. What should pregnant women do?

Pregnant women are encouraged to not leave their home unless absolutely necessary. They should consult with their doctor.

There is not currently information from published scientific reports about susceptibility of pregnant women to COVID-19. Pregnant women experience changes to their immune system which might make them more susceptible to viral respiratory infections, like COVID-19.

20. I think I have COVID-19 and I want to be tested. Can my LHD or healthcare provider do this?

Testing is limited and needs to be focused on those at highest risk of spreading the disease and those most severely ill. When you are sick, you need to stay home and not spread your illness to others. If your symptoms are severe enough to concern you, you should call your regular healthcare provider to see if you need to be evaluated in-person. The healthcare provider will make a determination over the phone as to whether an in-person assessment or testing is needed. People who are not exhibiting symptoms or are only mildly ill are not being tested for COVID-19.

If your healthcare provider decides testing is necessary, you may be referred to a community site that is doing evaluations for COVID-19. If such a site is not available in your area, you might be referred to an emergency department, or the healthcare professional might do the testing him or herself. If you are tested, you will need to self-isolate until you are informed of the testing results. You should NOT go to the emergency room to request testing unless directed to do so by your doctor.

21. I have no symptoms, but still would like to be tested for COVID-19. How can I get tested?

At this time, ODH is not testing asymptomatic people. You need an order from a healthcare provider to be tested.

Quest Diagnostics is now testing for COVID-19. This test is to be performed only using respiratory specimens collected from individuals who meet CDC clinical and/or epidemiological criteria for COVID-19 testing. Quest Diagnostics Patient Service Centers and other phlebotomy sites cannot collect specimens for this test.

SOURCE: www.questdiagnostics.com/home/Coronavirus/

22. How can I protect myself?

The best way to prevent infection is to avoid being exposed to the virus that causes COVID-19.

To lower your risk of catching any respiratory illness, remember to:

- Wash your hands for 20 seconds or more with soapy water. If unavailable, use hand sanitizer.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid contact with people who are sick.
• Stay home while you are sick (except to visit a healthcare professional) and avoid close contact with others.
• Cover your mouth/nose with a tissue or sleeve when coughing or sneezing.
• Get adequate sleep and eat well-balanced meals to ensure a healthy immune system.


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

It is unlikely. Coronaviruses are mostly spread by droplets. In general, coronaviruses do not live a long time 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 room temperatures. Currently, there are no known cases linked to imported goods. There have not been any cases of COVID-19 in the United States associated with imported goods.


24. I live in an apartment complex. The person above me was self-quarantining herself for 14 days due to return from Hong Kong. What precautions do I take in shared common spaces and is the HVAC system safe?

A person who is self-quarantining is a person who may have been exposed to a contagious disease but has not developed illness (symptoms) and who separates themselves from others who have not been exposed, in order to prevent the possible spread of that disease.

You cannot catch a disease from someone who does not have it. If they were sick, the chances of pathogens traveling through the HVAC would be very rare. You should follow the below precautions to limit the spread of infectious diseases in common areas:

• Perform hand hygiene frequently. Wash your hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer that contains 60 to 95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used preferentially if hands are visibly dirty.
• Avoid touching your eyes, nose, and mouth with unwashed hands.
• Clean all “high-touch” surfaces, such as counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables, every day. Also, clean any surfaces that may have blood, stool, or body fluids on them.
• Use a household cleaning spray or wipe, according to the 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.

25. Does ODH recommend wearing facemasks?
ODH follows CDC guidelines. The CDC does not recommend that healthy people wear a mask to protect themselves from illnesses, including COVID-19. You should only wear a mask if a healthcare professional recommends it. A facemask should be used by people who have COVID-19 and are showing symptoms. This is to protect others from the risk of getting infected. The use of facemasks also is crucial for health workers and other people who are taking care of someone infected with COVID-19 in close settings (at home or in a health care facility).


26. I heard men need to shave their beards to prevent COVID-19. Is this true?

No. The National Institute for Occupational Safety and Health (NIOSH) poster applies only to personal protective equipment worn in healthcare settings. The CDC does not recommend the routine use of respirators in the community.

(Add only if the caller asks for more information) The CDC guidelines and the graphic were originally posted as part of the “No-Shave November 2017” as advice to those wanting to grow beards during that month. It describes the beards that could cause problems with tight-fitting respirators e.g. those used in healthcare and not looser-fitting surgical masks.


27. Will warmer weather stop COVID-19?

We don’t know if weather or temperature change the spread of COVID-19. Some viruses, like the cold and flu, spread more during winter months. However, it is not hard to become sick with these viruses during other months. There is much more to learn about this new disease.


28. I heard the virus can pass from person-to-person, am I at risk?

To reduce the spread, health officials are working with healthcare providers to identify and evaluate suspected cases.

To lower your risk of catching any respiratory illness, remember to:

- Wash your hands for 20 seconds or more with soapy water. If unavailable, use hand sanitizer.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid contact with people who are sick.
- Stay home while you are sick (except to visit a healthcare professional) and avoid close contact with others.
- Cover your mouth/nose with a tissue or sleeve when coughing or sneezing.
- Get adequate sleep and eat well-balanced meals to ensure a healthy immune system.

29. Can someone with COVID-19 spread the virus to other people?

Someone who is sick with COVID-19 can spread the virus to others. CDC recommends that people who have COVID-19 be isolated either in the hospital or at home. The location depends on how sick they are. They are isolated until they are not at risk of infecting others.

The length of the illness is different for each person. When to release someone from isolation is made on a case-by-case basis. Healthcare providers, infection prevention and control experts, and public health officials consider disease severity, signs and symptoms, and laboratory test results for each patient.


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

No. Most individuals who are quarantined never develop illness. These are the individuals who are being monitored. If they do become sick, they are not considered under quarantine but will be isolated to prevent the spread of the illness. For COVID-19, 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 a risk for spreading the virus to others because they were not ill.


COVID-19 in Ohio, US and Other Countries

31. What is the situation in Ohio?

As of March 9, 2020, Ohio does have confirmed cases of COVID-19. Check ODH’s coronavirus website for up-to-date case counts.

For the most up to date numbers in Ohio, visit [www.coronavirus.ohio.gov](http://www.coronavirus.ohio.gov)
(Updated at 2 p.m. every weekday.)

32. What is difference between confirmed case and presumptive positive?

A presumptive positive has been identified by our lab as a positive case. All of our results are still sent to the lab for a “second check” and final confirmation by the CDC, which then becomes a confirmed case.

33. I heard there were confirmed cases of COVID-19 in Ohio. Where are they? Are we in danger?

On March 9, 2020 Ohio Governor Mike DeWine and Ohio Department of Health Director Amy Acton, M.D., MPH announced that three Ohioans tested positive for COVID-19. These were the first cases in Ohio. There have now been additional positive cases announced.

For an updated list of counties, view the footnotes under up-to-date case counts at [https://coronavirus.ohio.gov/wps/portal/gov/covid-19/](https://coronavirus.ohio.gov/wps/portal/gov/covid-19/)
For the latest information on COVID-19 and up-to-date case counts, visit coronavirus.ohio.gov.

Continue to follow standard precautions to help prevent the spread of infection:

- Wash your hands for 20 seconds or more with soapy water. If unavailable, use hand sanitizer with at least 60-95% alcohol.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid contact with people who are sick.
- Stay home if you are sick (except to visit a healthcare professional) and avoid close contact with others.
- Cover your mouth/nose with a tissue or sleeve when coughing or sneezing.
- Get adequate sleep and eat well-balanced meals to ensure a healthy immune system.

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

Yes. The first case of COVID-19 in the United States was reported on January 21, 2020. The current count of cases of COVID-19 in the United States is available on CDC’s webpage.


35. Why is ODH not releasing information on the location of the PUIs in Ohio?

We do not want to give away any personal, identifiable information about citizens who may be under investigation. Anyone exposed to a PUI will be contacted and may be quarantined. Local health districts and ODH are committed to monitoring and promoting the public health and welfare. As local health districts monitor situations of infectious disease in the community, information will be shared as is necessary to protect the public while also considering the rights of any ill individual to privacy.

36. How are local health departments and healthcare facilities preparing for the virus?

Refer them to their local health department.

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

There is community spread of COVID-19 in many parts of the world and United States. To reduce the spread, health officials are working with healthcare providers to identify and evaluate suspected cases.

To lower your risk of catching any respiratory illness, remember to:

- Wash your hands for 20 seconds or more with soapy water. If unavailable, use hand sanitizer.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid contact with people who are sick.
- Stay home while you are sick (except to visit a healthcare professional) and avoid close contact with others.
- Cover your mouth/nose with a tissue or sleeve when coughing or sneezing.
- Get adequate sleep and eat well-balanced meals to ensure a healthy immune system.

38. Where in the United States have there been confirmed cases?

The CDC website has a map of “Confirmed and Presumptive Positive Cases of COVID-19” available on their website, which they update regularly.


39. Where in the world have there been confirmed cases?

There are confirmed cases of COVID-19 in many countries. As of March 10, 2020, 115 countries have reported cases. For the latest information, visit: https://coronavirus.jhu.edu/map.html or https://www.cdc.gov/coronavirus/2019-ncov/locations-confirmed-cases.html


Voting

40. Will voting still take place?

No, voting will not take place on March 17. ODH Director Dr. Amy Acton filed a Public Health order March 16, 2020 to postpone voting.

Voting locations would have increased the risk of spreading COVID-19 amongst the general public. This order will remain in effect until stated otherwise. There will be announcements made at a later time about the new time and date for voting.

Travel

41. I am planning to travel to country “X”. Should I postpone my travel?

Check the CDC website if you are planning to travel. CDC has three levels; warning, alert and watch.

Warning Level 3 means: travelers should avoid all nonessential travel to the area.

Alert Level 2 means: these destinations are experiencing sustained community transmission of respiratory illness caused by the novel coronavirus (COVID-19). The virus can spread from person to person. Older adults and those with chronic medical conditions should consider postponing nonessential travel.

Watch Level 1 means: CDC does not recommend canceling or postponing travel. Travelers should practice usual precautions. (Check website for most up-to-date recommendations and relay to caller.)

Right now, elderly adults and those with underlying medical conditions are advised to postpone or cancel all cruise travel and any travel with long plane rides to prevent their risk of infection.
42. We have a cruise coming up. Should we consider cancelling our trip due to COVID-19?

The CDC is recommending that all travelers, especially those with chronic or underlying medical conditions, defer all cruise ship travel worldwide. Cruise ship passengers are at increased risk of person-to-person spread of infectious diseases, including COVID-19, due to passengers being in such close proximity to each other.

The U.S. Department of State also recommends against cruise ship travel. Those traveling by ship may be impacted by travel restrictions affecting their ability to disembark or may be subject to quarantine procedures implemented by the local authorities.

If you do decide to travel by cruise ship, follow the following precautions to protect yourself and others:

- Standard precautions like:
  - Wash your hands for 20 seconds or more with soapy water. If unavailable, use hand sanitizer with at least 60-95% alcohol.
  - Avoid touching your eyes, nose, or mouth with unwashed hands.
  - Avoid contact with people who are sick.
  - Stay home if you are sick (except to visit a healthcare professional) and avoid close contact with others.
  - Cover your mouth/nose with a tissue or sleeve when coughing or sneezing.
  - Get adequate sleep and eat well-balanced meals to ensure a healthy immune system.
- If you get sick with fever or new or worsening cough or difficulty breathing during your cruise, stay in your cabin and notify the onboard medical center immediately.

43. Should I cancel my trip if we are going somewhere in the U.S., and not a country with a travel advisory?

Older Ohioans and those with underlying health conditions, like heart disease or diabetes, have been found to be more at-risk for complications associated with COVID-19. These individuals should avoid situations that put them at increased risk of catching an infectious disease, including cruises or long plane trips.

Cases of COVID-19 have been reported across the nation, and multiple states are reporting deaths associated with the virus. Person-to-person spread of COVID-19 is occurring and countries are reporting both travel-related cases and community spread of the disease. As the outbreak of COVID-19 continues, there remains a risk of infected travelers and crew. So Ohioans should weigh the risks for travel.

44. I have a trip scheduled for China. Should I go?


The CDC has issued a Warning Level 3 travel notice. This means all people should avoid nonessential travel to China. The situation is evolving. Stay up to date with CDC’s travel health notices related to this outbreak. These notices will be updated as more information becomes available.


45. I travelled to China, but I did not get/lost my Travel Health Alert Notice at the airport. What should I do?


46. I travelled to S. Korea, Italy, Iran, Japan or Hong Kong. I was not screened at the airport upon my return. I did not receive a card with instructions.
47. I am not sick. If you travelled to a country with a level 3 advisory or widespread incidence of the virus you should:
   - Stay home for 14 days after returning to the United States and practice social distancing.
   - Check your temperature twice a day, morning and evening
   - Monitor yourself for symptoms

48. What do I do if I get sick?

If you spent time in an affected area in the past 14 days and feel sick with fever, cough, or difficulty breathing:
   - Seek medical advice. Call ahead before going to a doctor’s office or emergency room. Tell them about your recent travel an area with community spread of coronavirus, and your symptoms.
   - Avoid contact with others.
   - Do not travel while sick.
   - Cover your mouth and nose with a tissue or your sleeve (not your hands) when coughing or sneezing.
   - Clean your hands by washing them with soap and water for at least 20 seconds or using an alcohol-based hand sanitizer that contains 60%–95% alcohol immediately after coughing, sneezing, or blowing your nose. Soap and water should be used if hands are visibly dirty.
Clinician Information

- Healthcare providers should obtain a detailed travel history for patients with fever or acute respiratory symptoms. For patients with these symptoms who were in an affected area and had onset of illness within 2 weeks of leaving, consider novel coronavirus infection and notify infection control personnel and your local health department immediately.


49. Which airports in Ohio are screening?

No airports in Ohio are screening travelers. Travelers are screened at point-of-entry airports. A list of the US airports that are screening are available at: https://www.cdc.gov/coronavirus/2019-nCoV/summary.html#cdc-response.


I Am Worried

50. I have respiratory symptoms, but I have not traveled to any country with a warning or alert. I now heard it travels from person-to-person. Do I have novel coronavirus?

To lower your risk of catching any illness, remember to:

- Wash your hands for 20 seconds or more with soapy water. If unavailable, use hand sanitizer.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid contact with people who are sick.
- Stay home while you are sick (except to visit a healthcare professional) and avoid close contact with others.
- Cover your mouth/nose with a tissue or sleeve when coughing or sneezing.
- Get adequate sleep and eat well-balanced meals to ensure a healthy immune system.

Remember, currently you are more likely to catch the flu or a common cold, which show the some of the same symptoms. If you continue to feel sick, call your healthcare provider.


51. A school calls. One of the student’s father worked in a country with widespread community transmission. The father’s coworker is a confirmed case of COVID-19. Does the school need to exclude the student?

No, the student should not be excluded from school. COVID-19 cannot be caught from someone who does not have it. As of end of day March 16, 2020 all schools in Ohio are on an “extended Spring Break” to prevent the further spread of the virus in Ohio. The schools will be closed for three weeks. The Governor and ODH Director Dr. Amy Acton will reevaluate the situation and decide if the schools need to be closed for longer as the situation evolves.
52. I am worried I can’t get my medications for medication assisted treatment (MAT). How can I get suboxone from Lifesprings?

Medications for MAT are available at many facilities across Ohio. If Lifesprings closes or is closed, then please call our helpline for a referral to another opiate use disorder treatment provider. If someone is looking for a treatment provider, they can call the OhioMHAS bridge line Monday – Friday from 8:30AM to 5:00PM, or they can search on-line at FindTreatment.gov.

53. Am I at risk for novel coronavirus if I received imported goods from China or another country with widespread community transmission and now have a stiff neck and congestion?

Currently, there are no known cases linked to imported goods. If you have symptoms that are worrying you, contact your healthcare provider.


54. An event will be held in my area where they are expecting 5,000 attendees from all over the world. What guidance does ODH have for them?

ODH and Ohio Governor Mike DeWine have ordered that all gatherings with more than 100 attendees are prohibited throughout the state.

This order takes effect immediately on March 12, 2020 and will remain in full force until the State of Emergency declared by Governor DeWine no longer exists, or Director Acton rescinds or modifies it.

Mass gatherings are considered as any event involving more than 100 people in a single room or space at the same time, such as an auditorium, stadium, arena, large conference room, meeting hall, theater, or any other confined indoor or outdoor space.

People attending any gathering, even one with fewer than 100 people, should still maintain social distancing (approximately six feet away from others) whenever possible, and continue to follow other precautions to prevent the spread of infection.

This would also include parades, fairs, and festivals.

This does not apply to normal operations at airports, bus and train stations, medical facilities, libraries, shopping malls and centers, or other spaces where 100 or more persons may be in transit. It also does not apply to office environments, school, restaurants, factories, or retail or grocery stores- where large numbers of people may be present, but not within an arm’s reach of each other.

Athletic and other events do not need to be cancelled or postponed if spectators and other attendees are excluded. Immediate family members of participants in the event, or necessary members for the event, are still permitted.

This order does not apply to media.

This order does not apply to religious gatherings, gatherings for the expression of First Amendment protected speech, weddings or funerals.
55. I am planning an event with international attendees. How should I address concerns about COVID-19?

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SOURCE: Press Conference on OhioChannel.org on March 12, 2020

56. I am breastfeeding my nine-month-old, and I am pregnant. Am I and my child more likely to get COVID-19?

There is not currently information from published scientific reports about susceptibility of pregnant women to COVID-19. Pregnant women experience changes to their immune system which might make them more susceptible to viral respiratory infections, like COVID-19.

In limited studies on women with COVID-19 and another coronavirus infection, Severe Acute Respiratory Syndrome (SARS-CoV), the virus has not been detected in breast milk; however we do not know whether mothers with COVID-19 can transmit the virus via breast milk. The World Health Organization says women can breastfeed if diagnosed with COVID-19 or under quarantine as a PUI, but should wash her hands before feeding and wear a facemask to limit the spread of respiratory droplets during the feeding.

SOURCE: Press Conference on OhioChannel.org on March 12, 2020
If expressing breast milk with a manual or electric breast pump, the mother should wash her hands before touching any pump or bottle parts and follow recommendations for proper pump cleaning after each use. If possible, consider having someone who is well care for and feed the expressed breast milk to the infant.

There is no evidence that children are more likely to catch COVID-19. Most confirmed cases of COVID-19 reported from China have occurred in adults; however, infections in children have been reported. There is an ongoing investigation to determine more about this outbreak.

Breastfeeding information: [https://www.bfmed.org/abm-statement-coronavirus](https://www.bfmed.org/abm-statement-coronavirus)

57. What is the difference between isolation and quarantine?

Both isolation and quarantine mean to separate an individual. Isolation is for ill people. Quarantine is for well people. Isolation is if someone is sick. Your local health department will review your risk and symptoms to determine if either of these apply to you.


58. My facility is unable to use alcohol-based hand sanitizers because our residents/patients would drink it. Is Purell, a non-alcohol foam-based hand sanitizer, appropriate?

ODH is not aware of any studies addressing hand sanitizers and the 2019 novel Coronavirus (COVID-19). Alcohol-based hand rub and soap and water are the only two hand hygiene products mentioned on CDC’s website.


59. What are the approved disinfectants for objects and surfaces?

You can find a list of selected disinfectants and antimicrobial products registered with the Environmental Protection Agency here: [https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2](https://www.epa.gov/pesticide-registration/list-n-disinfectants-use-against-sars-cov-2).

60. What can I do to get mental health help?

You can find mental health help from various sources including the following:

**Disaster Distress Helpline**
*Available 24 hours a day, 7 days a week, year-round*

1-800-985-5990

1-800-846-8517 TTY

Text "TalkWithUs" to 66746

Spanish-speakers: Text "Hablanos" to 66746
Ohio Crisis Text Line
Text keyword "4HOPE" to 741 741
to quickly start a dialogue about your mental health needs

OhioMHAS Help Line
1-877-275-6364
available Monday through Friday from 9 a.m. to 4 p.m. to talk with a person, get questions answered, and pointed to local treatment options

Find Addiction and Mental Health Treatment in your local community
https://findtreatment.gov
searchable database on mental health and addiction services in local communities

National Suicide Prevention Lifeline
1-800-273-8255

61. How can I get suboxone from facilities?
Medications for MAT are available at many facilities across Ohio. If a facility closes or is closed, then please call the OhioMHAS helpline for a referral to another opiate use disorder treatment provider. If someone is looking for a treatment provider, they can call the OhioMHAS bridge line Monday-Friday from 8:30 a.m. to 5 p.m., or they can search online at www.findtreatment.gov.

62. Should staff at residential addiction facilities go to work?
All organizations should develop responsible policies and procedures for persons diagnosed with COVID-19 or who are suspected to have COVID-19. Limiting entry of visitors and guests is key in these cases as well as following other ODH advice about facility, staff, and resident cleanliness. COVID-19 guidance for behavioral health providers can be found on the COVID-19 website of mha.ohio.gov.

63. Can family members visit their loved ones at group homes?
During this time, some group homes may be enforcing extraordinary measures in an effort to reduce risk of residents being exposed to COVID-19. However, all clients have basic rights. If you are concerned that a client’s rights have been violated please contact your local ADAMH Board. Also, talk with the group home operator to see if you an establish alternatives to face-to-face visitation (virtual visitation).


The OhioMHAS Consumer and Family Toll-Free Bridge (TFB) line provides referral and resource information for callers regarding addiction and mental health services, supports and organizations
statewide. TFB staff members are peers who often work to help callers find the resources they need, learn about the referral process to access those resources, and understand consumer rights and responsibilities. The goal of this free telephone service is to promote advocacy, independence and recovery for Ohioans with behavioral health issues.

Other resources:

- 877-275-6364
- 888-636-4889 TTY
- 614-466-7228 (local)

64. What should a mental health agency do if a person comes in with a suspected case of COVID-19?

If a behavioral health treatment provider believes that a patient could have COVID19, they should contact their local health department.

65. How should someone be handled if turned away from a mental health facility?

If someone is looking for a treatment provider, they can call the OhioMHAS bridge line Monday – Friday from 8:30AM to 5:00PM, or they can search online at FindTreatment.gov.

The Ohio Department of Mental Health and Addiction Services (OhioMHAS) provides a variety of advocacy services for consumers and families, including but not limited to sharing mental illness and addiction resources, and providing assistance to resolve complaints and grievances. OhioMHAS collaborates with regional psychiatric hospitals, community boards, treatment providers and stakeholders to address advocacy issues, client rights, allegations of abuse or neglect, and respond to larger systems issues.


The OhioMHAS Consumer and Family Toll-Free Bridge (TFB) line provides referral and resource information for callers regarding addiction and mental health services, supports and organizations statewide. TFB staff members are peers who often work to help callers find the resources they need, learn about the referral process to access those resources, and understand consumer rights and responsibilities. The goal of this free telephone service is to promote advocacy, independence and recovery for Ohioans with behavioral health issues.

Other resources:

- 877-275-6364
- 888-636-4889 TTY
- 614-466-7228 (local)
- Email: ask@ODMH@mh.ohio.gov

66. If a state mental health hospital employee is concerned about another employee being exposed to COVID-19 what should they do?
Stigma and COVID-19

Some people who have been exposed to COVID-19, such as returning travelers or emergency responders, are facing stigma in their communities. Some people of Chinese and Asian decent are facing stigma in their communities, regardless of whether they been exposed to COVID-19.

67. What is stigma?

Stigma is stereotyping and discriminating against a group of people, a place, or a nation.

Stigma can occur when people associate an infectious disease, such as COVID-19, with a population, even though not everyone in that population or from that region is at risk for the disease (for example, Chinese Americans living in the United States).


68. Why might COVID-19 stigma happen in the United States?

- A lack of knowledge about how COVID-19 is spread.
- A need to blame someone for COVID-19.
- Gossip that spreads rumors, myths, and fears about COVID-19.
- Fear about disease and death.
- History has seen many instances of societies excluding, blaming, or devaluing those feared to have a disease.
  - Examples include the Ebola, HIV, and influenza pandemics of the past where fear led to stigma and discrimination.
  - In many instances, discrimination caused the health problem to get worse because those who felt stigmatized avoided the health care and information they need.

- Examples of stigma include:
  - Making negative comments in-person or online about a group of people and COVID-19.
  - Treating people of Chinese or Asian descent differently, or assuming they must have or can spread COVID-19.
  - Avoiding businesses, such as restaurants or shops, owned by people of Chinese or Asian descent because of fear of COVID-19 infection.


69. How can I prevent stigma?

Know the FACTS
FACT #1:
People who have returned from China more than 14 days ago and do not have symptoms of coronavirus do not put others at risk.
- Based on current evidence, symptoms of COVID-19 may appear in as few as 2 days or as many as 14 days after exposure.
- To stay updated, visit CDC’s COVID-19 Situation Summary page.

FACT #2:
The risk of getting coronavirus in the US is low.
- Some people who have traveled to places where many people have gotten sick with COVID-19 may be monitored by health officials to protect their health and the health of other people in the community.

FACT #3:
Viruses can make anyone sick regardless of their race or ethnicity. Your risk of getting COVID-19 is the same as Chinese Americans and people of Asian descent living in the US
- People of Asian descent, including Chinese Americans, are not more likely to get coronavirus than any other Americans.
- Help fight fear by letting people know that being of Asian descent does not increase the chance of getting or spreading COVID-19.

FACT #4:
You can help make sure COVID-19 is stopped by knowing the signs and symptoms:
- Fever
- Cough
- Shortness of breath

Seek medical advice if you have traveled to China in the past 14 days and feel sick. Call ahead before you go to a doctor’s office or emergency room. Tell them about your recent travel and your symptoms.

FACT #5:
- There are simple things you can do to help keep yourself and others healthy.
- Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.


70. Is it safe to eat at a Chinese Restaurant?
Yes, it is safe to eat at Chinese restaurants. No cases of COVID-19 have been reported from eating food.


### 71. Is there any guidance on preventing discrimination against Chinese students/restaurants?

COVID-19 can only be transmitted by a person who has the virus. No individual who is free from infection with COVID-19 poses a risk to the public. ODH encourages compassion during these difficult situations and to allow science to inform our messaging.


### Influenza

#### 72. What is Influenza?

Influenza (flu) is a contagious respiratory illness caused by influenza viruses. It can cause mild to severe illness. Serious outcomes of flu infection can result in hospitalization or death. Some people, such as older people, young children, and people with certain health conditions, are at high risk of serious flu complications.

There are two main types of influenza (flu) virus: Types A and B. The influenza A and B viruses that routinely spread in people (human influenza viruses) are responsible for seasonal flu epidemics each year.

SOURCE: [https://www.cdc.gov/flu/about/index.html](https://www.cdc.gov/flu/about/index.html)

#### 73. How can I protect myself from getting the flu?

You can protect yourself from getting the flu by getting vaccinated. The flu shot is the safest and most effective way to prevent influenza. Other important things you can do to protect yourself from getting influenza are:

- Avoiding close contact with those who are sick. Likewise, when you are sick, keep your distance from others to protect them from getting sick as well. This includes staying home from work, school, or running errands when you are sick.
- Cover your nose and mouth when you cough or sneeze as these spreads infectious droplets into the air. It is best to cover your nose and mouth with a tissue when coughing or sneezing or doing so into your elbow instead of your bare hands.
- Wash your hands frequently, especially after touching contaminated surfaces or after coughing or sneezing.
- Avoid touching your eyes, nose, and 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.
• Practice other good habits. 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.

SOURCE: [https://www.cdc.gov/flu/prevent/actions-prevent-flu.htm](https://www.cdc.gov/flu/prevent/actions-prevent-flu.htm)

74. What are the symptoms of the flu?

Flu is different from a cold. Flu usually comes on suddenly. People who have flu often feel some or all of these symptoms:

• Fever* or feeling feverish/chills
• Cough
• Sore throat
• Runny or stuffy nose
• Muscle or body aches
• Headaches
• Fatigue (tiredness)
• Some people may have vomiting and diarrhea, though this is more common in children than adults.

*It’s important to note that not everyone with flu will have a fever.

SOURCE: [https://www.cdc.gov/flu/symptoms/symptoms.htm](https://www.cdc.gov/flu/symptoms/symptoms.htm)

75. When should I see a physician?

If you get sick with flu symptoms and are at high risk of flu complications or you are concerned about your illness, call your healthcare provider for advice.

SOURCE: [https://www.cdc.gov/flu/treatment/takingcare.htm](https://www.cdc.gov/flu/treatment/takingcare.htm)

Prevention

76. How can I help protect myself?

To lower your risk of catching any respiratory illness, remember to:

• Wash your hands for 20 seconds or more with soapy water. If unavailable, use hand sanitizer.
• Avoid touching your eyes, nose, or mouth with unwashed hands.
• Avoid contact with people who are sick.
• Stay home while you are sick (except to visit a healthcare professional) and avoid close contact with others.
• Cover your mouth/nose with a tissue or sleeve when coughing or sneezing.
• Get adequate sleep and eat well-balanced meals to ensure a healthy immune system.

Remember, currently you are more likely to catch the flu or a common cold, which show the some of
the same symptoms. If you continue to feel sick, reach out to your healthcare provider.


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

If you have had close contact with a person confirmed, or under evaluation COVID-19 infection,

- Contact your local health department
- Watch for symptoms
  - Fever
  - Cough
  - Problems breathing
- Take your temperature (normal is under 100.4)
- Call ahead if you need to go to a healthcare provider


78. What can private businesses do to help?

- Ensure that your sick leave policies are flexible and consistent with public health guidance and that employees are aware of these policies
- Separate sick employees. For respiratory illness, provide them with a mask and send them home.
- Actively encourage sick employees to stay home
- Promote respiratory etiquette and hand hygiene by all employees:
  - Provide tissues and no-touch trash cans
  - Ask employees to clean their hands often with an alcohol-based hand sanitizer that contains at least 60-95% alcohol or wash their hands with soap and water for at least 20 seconds. Soap and water should be used preferentially if hands are visibly dirty.
  - Provide soap and water and alcohol-based hand rubs in the workplace. Ensure that adequate supplies are maintained. Place hand rub in multiple locations or in conference rooms to encourage hand hygiene.
- Perform routine environmental cleaning, including all frequently touched surfaces in the workplace, such as workstations, countertops, and doorknobs.
- Advise employees to follow CDC’s travel guidance
- If an employee is confirmed to have COVID-19, employers should inform fellow employees of their possible exposure to COVID-19 in the workplace but maintain confidentiality as required by the Americans with Disabilities Act (ADA). Employees exposed to a co-worker with confirmed COVID-19 should refer to CDC guidance for how to conduct a risk assessment of their potential exposure.

Colleges, Schools with Traveling Students and Boarding Schools

79. How can college campuses protect students?

On March 10th, Governor DeWine asked all universities and colleges in Ohio to screen students returning to school from international travel or cruises, including, but not limited to, students returning from spring break travel. Governor DeWine also asked that any university-sponsored international travel, non-essential travel, and large gatherings be canceled or postponed. Higher education institutions should also consider offering online/remote learning.

Administrators of colleges and universities should take the following actions to plan and prepare for what to do if a COVID-19 outbreak occurs in your community or school:

- Review and update your emergency operations plan. Focus on components that address infectious disease outbreaks.
- Encourage students and staff to take everyday preventive actions to prevent the spread of respiratory illnesses.
  - Stay home when sick
  - Cover coughs and sneezes
  - Clean and disinfect frequently touched surfaces
  - Wash hands often with soap and water for at least 20 seconds
- Monitor and plan for absenteeism.
  - Review the usual absenteeism patterns at your school among both students and staff, so you can identify if the rate of absenteeism increases.
  - Make accommodations (e.g., extended due dates, electronic submission of assignments) for students if they become sick.
- Plan for alternative coverage by cross-training staff and faculty.
- Alert local health officials about increases in absences, particularly those that appear due to respiratory illnesses.


80. What if my students traveled to a country with COVID-19 community spread and got sick?

If students traveled to an area with community spread, advise them to seek medical care if they feel sick with fever, cough, or difficulty breathing. Before going to a healthcare provider, be sure to call and tell them about recent travel and your symptoms. Screen all students returning from international travel and cruise ships in your health center.

Review updated CDC information for travelers, including FAQ for travelers, and consult with state and local health officials.


81. I ate civet cat in Hong Kong; or I ate fugu in Shanghai, or I ate pangolin in Vietnam, am I at risk?

No. No cases have been reported from consuming food.


82. We have an international school here. My students from China are all wearing surgical masks. I am afraid the media is going to show up at my door and ask, “What is going on?”

Culturally, some individuals wear masks in their home countries, and they continue this practice when they are in Ohio. You cannot get COVID-19 from someone who does not have it. ODH follows CDC guidelines.

(Add only if the caller asks for more information) CDC does not recommend that healthy people wear a mask to protect themselves from illnesses, including COVID-19. You should only wear a mask if a healthcare professional recommends it. A facemask should be used by people who have COVID-19 and are showing symptoms. This is to protect others from the risk of getting infected. The use of facemasks also is crucial for health workers and other people who are taking care of someone infected with COVID-19 in close settings (at home or in a health care facility).


83. How can students, faculty and staff protect themselves?

Advise anyone traveling to a country with community spread of COVID-19 to follow the Center for Disease Control and Prevention’s (CDC) Traveler’s Health guidance. As of March 10, 2020, the CDC has issued a Warning Level 3 Travel Notice for China, Iran, South Korea, and Italy. This means do not travel to these countries. The situation is evolving, so please check the CDC Traveler’s Health page for the most up-to-date information.

To help prevent infection with COVID-19, students, faculty, and staff should take the same steps they already take to prevent exposure to flu and the common cold. To prevent infection:

• Wash your hands for 20 seconds or more with soapy water. If unavailable, use hand sanitizer.
• Avoid touching your eyes, nose, or mouth with unwashed hands.
• Avoid contact with people who are sick.
• Stay home while you are sick (except to visit a healthcare professional) and avoid close contact with others.
• Cover your mouth/nose with a tissue or sleeve when coughing or sneezing.
• Get adequate sleep and eat well-balanced meals to ensure healthy immune system.

Currently, there are no vaccines available to prevent COVID-19 infections.

Animals

84. What about animals or animal products imported from China?

CDC does not have any evidence to suggest that animals or animal products imported from China 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 United States Department of Agriculture regulates the importation of animals and animal products, and CDC regulates the importation of animals and animal products capable of spreading human disease.


85. Should I be concerned about pets or other animals and COVID-19?

While this virus seems to have emerged from an animal source, it is now spreading from person-to-person in China. There is no reason to think that any animals including pets in the United States might be a source of infection with this new coronavirus. To date, CDC has not received any reports of pets or other animals becoming sick with COVID-19. At this time, there is no evidence that companion animals including pets can spread COVID-19. However, since animals can spread other diseases to people, it’s always a good idea to wash your hands after being around animals.


86. Should I avoid contact with pets or other animals if I am sick?

At this time, there is no evidence that companion animals including pets can be infected with or spread COVID-19. Although there have been no 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 virus. When possible, have another member of your household care for your animals while you are sick. If you must care for your pet while you are sick [with COVID-19], wear a facemask and wash your hands before and after interacting with your pet and avoid petting, snuggling, being licked, and sharing food.


Medical Information

87. What are 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, cough, and difficulty breathing.


88. How is COVID-19 treated?
There are no medications specifically approved for COVID-19. Most people with mild coronavirus illness will recover on their own by drinking plenty of fluids, resting, and taking pain and fever medications. However, some people develop pneumonia and require medical care or hospitalization.


### 89. Should I be tested for COVID-19?

If you develop a fever and symptoms of respiratory illness, such as cough or shortness of breath, within 14 days after travel from China or other country with known community spread, you should call ahead to a healthcare professional and mention your recent travel or close contact. If you have had close contact with someone showing these symptoms who has recently traveled from this area, you should call ahead to a healthcare professional and mention your close contact and their recent travel.

If you are concerned about symptoms (i.e. cough, fever, shortness of breath), first isolate, then call the doctor you normally see. (For medical emergencies, call 9-1-1) Remember that the primary reason for testing to determine if a person needs to be hospitalized or if they have been in contact with high risk individuals. Some people will never be tested because their doctor will determine that testing is not necessary.

When you are sick, you need to stay home and not spread your illness to others. If your symptoms worsen after you’ve talked with your doctor initially, particularly if you have difficulty breathing, or excessive fatigue or fever, you should call the doctor again.

If your doctor writes an order for you to be tested, you will need to receive instructions from the doctor about the location to go to for testing. You should NOT go to the emergency room to request testing unless directed to do so by your doctor.

The reason tests are being collected this way is to have patients work with testing sites who are trained to collect a useable sample. Tests are generally used for higher risk patients, or those at greatest risk for spreading disease. Even without test a doctor can give you the best advice about how to manage your health at home.

Your healthcare professional will work with your local health department and CDC to determine if you need to be tested for COVID-19. You need an order from a healthcare provider to be tested.

### 90. I don’t have symptoms and I’m not sick, but I want to be tested for COVID-19. Where can I find out about how to be tested?

At this time, ODH is not testing asymptomatic people. You need an order from a healthcare provider to be tested.

Quest Diagnostics is now testing for COVID-19. This test is to be performed only using respiratory specimens collected from individuals who meet CDC clinical and/or epidemiological criteria for COVID-19 testing. Quest Diagnostics Patient Service Centers and other phlebotomy sites cannot collect specimens for this test.
91. How can you tell the difference between COVID-19 and flu/other pneumonia?

You cannot tell the difference. If you are worried see your healthcare provider who may order testing to determine the cause of the illness.


92. Should I postpone my surgery or procedure?

Please consult with your health care provider. Governor DeWine requested that dentists and veterinarians postpone elective surgeries. Governor DeWine explained that his health advisory group is in the process of developing guidelines for doctors for postponing elective surgeries that will not put patients at risk.

Local Health Departments, LTC Facilities, and Healthcare Providers

93. I am a health department and I am monitoring travelers. I know I must monitor them for 14 days. How do you count the days?

The day the person left the country is day 0 (zero).

![Symptoms Chart]


94. (ONLY FOR HEALTHCARE GROUPS/PROVIDERS) I work in a healthcare facility and need personal protective equipment (PPE). Can you give us some?

Advise them to look within their systems to see if other providers/facilities in their networks may have any.
If not, they should call their Regional Healthcare Coordinator. The number can be found by looking under Find My Healthcare Coalition at the following web address:
https://odh.ohio.gov/wps/portal/gov/odh/about-us/offices-bureaus-and-
departments/bhp/resources/hospital-preparedness-program

If the Regional Healthcare Coordinator is unable to provide the requested PPE, they will advise on next steps forward.

95. My patient has had pneumonia since October and has a travel history to a country without community transmission of COVID-19, I want him tested. How do I go about testing?

Contact your local health department to determine if the patient meets the criteria for a patient under investigation (PUI) for 2019 novel Coronavirus (COVID-19). Travelers who have returned from countries with community spread in the last 14 days and who have fever, cough or difficulty breathing meet the PUI definition. Only specimens from PUIs can be collected for COVID-19 testing.

96. I/My patient traveled on a plane with someone under investigation for COVID-19. What should I advise him/her?

Just as with influenza and other illnesses, you can help protect yourself and others from infection by doing the following:

- Wash your hands for 20 seconds or more with soapy water. If unavailable, use hand sanitizer.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid contact with people who are sick.
- Stay home while you are sick (except to visit a healthcare professional) and avoid close contact with others.
- Cover your mouth/nose with a tissue or sleeve when coughing or sneezing.
- Get adequate sleep and eat well-balanced meals to ensure a healthy immune system.

If you suspect your patient may have been exposed to COVID-19, contact your local health department and let them know you or your patient may have been exposed to COVID-19.


97. I/My patient traveled on a plane with someone under investigation for COVID-19; the person under investigation subsequently tested negative (no COVID-19 found). Should my patient monitor their temperature?

No. You cannot contract COVID-19 from someone who does not have it. 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.
98. What should healthcare professionals tell patients who call with symptoms of COVID-19 and related risk factors?

Ask the patient to let you know when they arrive so you can arrange for them to wear a facemask and wait in a room separate from other patients. If such a room is not available, another option would be to ask the patient to wait in the car.

99. How should healthcare professionals respond to patients with possible or confirmed COVID-19?

Patients should receive any interventions they would normally receive as standard of care. Patients with suspected or confirmed COVID-19 should be asked to wear a surgical mask as soon as they are identified and be evaluated in a private room (ideally an airborne infection isolation room, if available) with the door closed. They also could be asked to wait in the car.

Healthcare personnel entering the room should use standard precautions, contact precautions, airborne precautions, and eye protection (e.g., goggles or a face shield).

Clinicians should also notify infection control personnel at their healthcare facility and their local health department if you suspect the patient could have COVID-19.

100. I am a healthcare provider; how do I order a test? (General Information – no actual case)

Contact your local health department to determine if the patient meets the criteria for a patient under investigation (PUI) for 2019 novel Coronavirus (COVID-19). Only specimens from PUIs can be sent for COVID-19 testing.

101. When should I test for COVID-19?

Clinicians should use their judgment to determine if a patient has signs and symptoms compatible with COVID-19 and whether the patient should be tested. Decisions should be based on the local epidemiology of COVID-19, as well as the clinical course of illness. Most patients with confirmed COVID-19 have developed fever and/or symptoms of acute respiratory illness (e.g., cough, difficulty breathing). Clinicians are strongly encouraged to test for other causes of respiratory illness, including infections such as influenza.

Epidemiologic factors that may help guide decisions on whether to test include: any persons, including healthcare workers, who have had close contact with a laboratory-confirmed COVID-19 patient within 14 days of symptom onset, or a history of travel from affected geographic areas within 14 days of symptom onset.

Currently, affected geographic areas are China, Iran, Italy, Japan, and South Korea. Updates can be found under the “healthcare professionals” section at https://www.cdc.gov/coronavirus.

If COVID-19 is suspected immediately notify your local health department.

102. How do I test?

The ODH lab and some commercial laboratories are able to perform tests. If COVID-19 is suspected, immediately notify your local health department.
Collect upper respiratory tract specimens (nasopharyngeal AND oropharyngeal swabs). Testing lower respiratory tract specimens, if available. For patients who develop a productive cough, sputum should be collected and tested. The induction of sputum is not recommended. For patients for whom it is clinically indicated (e.g., those receiving invasive mechanical ventilation), a lower respiratory tract aspirate or bronchoalveolar lavage sample should be collected and tested as a lower respiratory tract specimen. Specimens should be collected as soon as possible once a person with possible COVID-19 is identified, regardless of the time of symptom onset.

103. I work in a lab. How/Where can I send my COVID-19 test specimen?

You should first consult with your local health department. They will help determine if the specimen needs to be sent to be tested.

104. (For healthcare providers ONLY (General Information – no actual case) When can patients with confirmed COVID-19 be released from isolation.

Current CDC guidance to release someone from isolation is made on a case-by-case basis and includes meeting all the following requirements:

- The patient is free from fever without the use of fever-reducing medications.
- The patient is no longer showing symptoms, including cough.
- The patient has tested negative on at least two consecutive respiratory specimens collected at least 24 hours apart.

Someone who has been released from isolation is not considered to pose a risk of infection to others.


105. I work in a laboratory; I do not have any travel information. Can I send a specimen? (General Information – no actual case)

No. Local and state public health staff will determine if the patient meets the criteria for a patient under investigation (PUI) for 2019 novel coronavirus (COVID-19). Only specimens from PUI investigations can be sent.

SOURCE: Original FAQ

106. How do you test a person for COVID-19? (General Information – no actual case)

(General Public Answer) A healthcare provider will rub a swab inside the patient’s nose and throat and send the swab for testing. Or, a healthcare provider will ask the person to cough and spit into a clean cup.
(Physician or Laboratory Answer) Clinical specimens should be collected from PUIs for routine testing for other respiratory pathogens. COVID-19 testing is performed only at CDC. Guidance on collecting and transporting clinical specimens is available on CDC’s website:

For more information on specimen collection see CDC Information for Laboratories.


107. What should healthcare professionals and health departments do?

For recommendations and guidance on patients under investigation; infection control, including personal protective equipment guidance; home care and isolation; and case investigation, see Information for Healthcare Professionals. For information on specimen collection and shipment, see Information for Laboratories.


108. I am at a healthcare facility; I do not have anyone trained to ship Category B substances. How can I get training/ship specimens to ODH Lab?

Pack and ship all specimens in accordance with the US Department of Transportation’s Hazardous Materials Regulations (DOT 49 CFR Parts 171-180) and with the International Air Transport Association’s Dangerous Goods Regulations (IATA). Additional packaging information is available at: [https://www.cdc.gov/smallpox/lab-personnel/specimen-collection/pack-transport.html](https://www.cdc.gov/smallpox/lab-personnel/specimen-collection/pack-transport.html) (Please note: Diagnostic specimens are shipped as Category B Biological Specimens. This webpage has instructions for both Category A and Category B – Depending on your browser, you may need to scroll down to see the category B shipping picture.)


109. What samples should be collected from PUIs?

CDC recommends collecting and testing upper respiratory (nasopharyngeal AND oropharyngeal swabs), and lower respiratory (sputum, if possible) for those patients with productive coughs. Induction of sputum is not recommended. Specimens should be collected as soon as possible once a PUI is identified, regardless of the time of symptom onset. Maintain proper infection control when collecting specimens.


110. I hear a lot about standard, contact, droplet and airborne precautions. What are they?

Standard Precautions are used for all patient care. They are based on the way diseases are spread. They use common-sense practices and personal protective equipment. They protect healthcare providers
from infection and prevent the spread of infection from patient to patient. Standard precautions include things like handwashing, glove and gown use when exposure to body fluids are expected. Transmission-based precautions include contact, droplet and airborne precautions. They are also used in healthcare. They apply, not only when exposure to body fluids are expected, but also, whenever healthcare workers enter the patient’s room.

Contact precautions say the healthcare worker will wear gloves and gown.

Droplet precautions say the healthcare worker will wear a mask and eye protection.

Airborne precautions say the healthcare worker will wear a special mask and the patient will be in a room with special air circulation.

Additional information can be found by going to:
https://www.cdc.gov/infectioncontrol/basics/standard-precautions.html and
https://www.cdc.gov/infectioncontrol/basics/transmission-based-precautions.html

111. My facility has a shortage of PPE. What should we do?
- Work with your normal supplier
- Contact your regional healthcare coordinator
- Review the National Institute for Occupational Safety and Health (NIOSH) guidance for extended use and limited reuse of PPE in healthcare settings. See: https://www.cdc.gov/niosh/topics/hcwcontrols/recommendedguidanceextuse.html

112. My health department has a shortage of PPE. What should we do?
- Work with your normal supplier
- Contact your county Emergency Management Agency (EMA)
- Review the National Institute for Occupational Safety and Health (NIOSH) guidance for extended use and limited reuse of PPE in healthcare settings. See: https://www.cdc.gov/niosh/topics/hcwcontrols/recommendedguidanceextuse.html
- If no gowns or masks are available, see CDC’s “considerations for selecting protective clothing used in healthcare for protection against microorganisms in blood and body fluids” : https://www.cdc.gov/niosh/npptl/topics/protectiveclothing/

113. I work in a long-term care facility. How can I help prevent the spread of COVID-19?
Guidance for Infection Control and Prevention of Coronavirus in Nursing Homes can be found on the Centers for Medicare and Medicaid Services (CMS) website, under memo QSO-20-14-NH, in the Quality and Safety Oversite section:


114. Should I go into work if I work at a residential addiction facility?

All organizations should develop responsible policies and procedures for persons diagnosed with COVID-19 or who are suspected to have COVID-19. Limiting entry of visitors and guests is key in these cases as well as following other ODH advice about facility, staff, and resident cleanliness. Coronavirus related guidance for Behavioral Health Providers can be found on the Coronavirus page of mha.ohio.gov.

115. I want to visit my son/daughter/friend at a group home and I’m being denied access. Why?

During this time, some group homes may be enforcing extraordinary measures in an effort to reduce risk of residents being exposed to Coronavirus. However, all clients have basic rights. If you are concerned that a client’s rights have been violated please contact your local ADAMH Board. Also, talk with the group home operator to see if you an establish alternatives to face-to-face visitation (virtual visitation).

List by County of Board Client Rights Officers and Provider Crisis Contacts.

The OhioMHAS Consumer and Family Toll-Free Bridge (TFB) line provides referral and resource information for callers regarding addiction and mental health services, supports and organizations statewide. TFB staff members are peers who often work to help callers find the resources they need, learn about the referral process to access those resources, and understand consumer rights and responsibilities. The goal of this free telephone service is to promote advocacy, independence and recovery for Ohioans with behavioral health issues.

877-275-6364
888-636-4889 TTY
614-466-7228 (local)

116. What do we do at our mental health agency if we think a client has COVID-19?

If a behavioral health treatment provider believes that a patient could have COVID19, they should contact their local health department.

117. How do we handle someone turned away from a mental health facility?

If someone is looking for a treatment provider, they can call the OhioMHAS bridge line Monday – Friday from 8:30AM to 5:00PM, or they can search on-line at FindTreatment.gov

The Ohio Department of Mental Health and Addiction Services (OhioMHAS) provides a variety of advocacy services for consumers and families, including but not limited to sharing mental illness and addiction resources, and providing assistance to resolve complaints and grievances. OhioMHAS
collaborates with regional psychiatric hospitals, community boards, treatment providers and stakeholders to address advocacy issues, client rights, allegations of abuse or neglect, and respond to larger systems issues.

List by County of Board Client Rights Officers and Provider Crisis Contacts

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877-275-6364
888-636-4889 TTY
614-466-7228 (local)
Or click to email

118. Our state mental health hospital employee is picking up their kid from a school that was closed due to a suspected case. Should they come back to work?

If this is a state employee, please have them contact their hospital CEO to discuss any concern. OhioMHAS' state run psychiatric hospitals are implementing specialized guidance and screening protocols to mitigate risk and limit exposure to Coronavirus.

119. Is there a vaccine for COVID-19?

Currently, no vaccine is available for COVID-19 infection. Information is available at https://www.cdc.gov/coronavirus/2019-nCoV/clinical-criteria.html

National and State Recommendations/Orders

120. What is the travel ban people are talking about?

President Donald Trump announced additional travel restrictions on March 11, 2020.

The U.S. has now suspended all travel from Europe to the United States for the next 30 days, starting midnight the night of March 13, 2020. These will be adjusted as the situation evolves. These restrictions are currently not applied to the United Kingdom.

The travel restriction applies to foreign nationals who have been in 26 European countries, which make up the Schengen Area, with open borders agreements, in the last 14 days.

The areas impacted include: Austria, Belgium, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Italy, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Slovakia, Slovenia, Spain, Sweden, and Switzerland.
Those exempt from these restrictions, such as U.S. citizens, will be directed to limited airports where screening can take place.

121. Is this a national emergency?

On March 13, 2020 President Donald Trump declared a national emergency in the country’s response against COVID-19.

122. What does the state of emergency on Ohio mean?

The state of emergency allows state departments and agencies to better, and more quickly, coordinate and respond in their response to the COVID-19 outbreak. Governor DeWine also partially activated the state Emergency Operations Center March 9, 2020 to better allow state and local partners to coordinate their response efforts.

The state of emergency currently does not change day-to-day activities of the general public. Governor DeWine has announced additional recommended precautions to prevent the spread of infection in the state.

123. Where can we find all the orders from the Governor and Dr. Acton?

All orders, once completed and finalized, are available on our website coronavirus.ohio.gov under public health orders. They provide more detail.

Listed: https://coronavirus.ohio.gov/wps/portal/gov/covid-19/home/Public-Health-Orders

124. What is the Governor suggesting for the general public?

ODH and the Governor suggest standard precautions to help prevent the spread of any disease. With positive cases in Ohio, the Governor has suggested more advanced measures to help prevent the spread of COVID-19.

We should all practice social distancing. We should limit our attendance to large or crowded gatherings. We should all practice good hand hygiene. We should stay away from others if we are sick, and avoid others who may be sick. If you have to be around others, try to keep a distance of 6-feet away from each other. If you can telecommute, you should.

125. What has the State of Ohio recommended for mass gatherings?

According to an order announced by the Governor and ODH Director Amy Acton, M.D., MPH, mass gatherings in the State of Ohio are now prohibited. This order takes effect immediately and will remain in full force until the State of Emergency declared by Governor DeWine no longer exists, or Director Acton rescinds or modifies it. On March 16, Governor DeWine reduced the number of people that constitutes a mass gathering to 50. Later in the day, President Donald Trump recommended that across the country that number be reduced to 10 people.

Mass gatherings are considered as any event involving more than 50 people in a single room or space at the same time, such as an auditorium, stadium, arena, large conference room, meeting hall, theater, or any other confined indoor or outdoor space.
People attending any gathering, even one with fewer than 100 people, should still maintain social distancing (approximately six feet away from others) whenever possible, and continue to follow other precautions to prevent the spread of infection.

This would also include parades, fairs, and festivals.

This does not apply to normal operations at airports, bus and train stations, medical facilities, libraries, shopping malls and centers, or other spaces where 50 or more persons may be in transit. It also does not apply to office environments, school, factories, or retail or grocery stores—where large numbers of people may be present, but not within an arm’s reach of each other.

Athletic and other events do not need to be cancelled or postponed if spectators and other attendees are excluded. Immediate family members of participants in the event, or necessary members for the event, are still permitted.

This order does not apply to media.

This order does not apply to religious gatherings, gatherings for the expression of First Amendment protected speech, weddings or funerals.

On March 17, the Governor made additional recommendations for weddings and funerals. For weddings, we ask you to figure out a way to celebrate your wedding but postpone the large gathering. For funerals, we suggest holding a small, private memorial, but do the large service later. These are requests, but not orders.

126. What has the Governor recommended for athletic events?

For indoor events, we are asking for no events with spectators other than the athletes, parents, and others essential to the game.

Right now, outdoor events can continue, as long as there are fewer than 100 people there if they are in a confined space.

127. What has the Governor recommended for religious institutions?

The Governor recommends that religious institutions consider limiting practices that could cause the spread of germs. If you are considered high-risk, please think about staying home.

128. What has the Governor recommended for nursing homes?

The Governor has asked nursing homes eliminate visitors in an effort to protect the at-risk populations residing there. Each essential individual, employee or vendor will be screened for signs of illness and must submit to a temperature reading to gain entrance. All facilities will be required to keep a log of all who are admitted access, and all visitors must provide their name, ID, phone numbers, and addresses.
The Director of ODH and Governor released an order March 12, 2020 to limit long-term care facilities to no visitors to help limit their exposure to illnesses. Exceptions can be made for end-of-life cases.

The order also recommends limiting points of entry to only one entrance for each facility. This does not apply to emergencies.

Residents will be able to discharge from homes at any time, but will be subject to the ordered assessments and directives.


129. What about senior centers and adult daycare facilities?

The Governor announced March 15, 2020 that we will be issuing guidance shortly to close Ohio’s senior centers and adult daycare facilities. We aren’t ordering that today, but it will be coming up. We will work to ensure all elderly adults continue to receive meals.

130. What has the Governor recommended for corrections facilities?

The Governor’s Office has ended prison visitation for the time being to Ohio’s prison system. There is also an order expected for community jails and community corrections facilities throughout the state prohibiting visitation. Other protocols to screen vendors, contractors, etc. will be put into place as well.

131. What has the Governor recommended for colleges and universities?

The Governor has recommended colleges and universities:

- Screen students returning from international travel or cruise ships
- Eliminate international travel for students and staff
- Cancel/postpone university-sponsored travel and large meetings
- Move toward online/remote learning

132. What has the Governor recommended for K-12 schools?

Children around the world have not experienced complications like the elderly when dealing with this illness, and appear to bounce back well, but they are still carriers of the disease.

Governor DeWine announced March 12, 2020 that all Ohio schools, public and private, will be closed to limit the spread of this virus. This closure will begin at the end of the school day Monday, March 16, 2020 and they will remain closed for three weeks. The closure will be re-evaluated as the situation progresses. There are no exceptions to this order. All physical school buildings are closed to students from kindergarten through 12th grade.

We expect schools to keep learning going, and many schools have plans for online learning. There are a wealth of free, online resources, such as Kahn Academy, that schools and educators can share with students. You can also sign some children up for the Governor’s Imagination Library to receive free books up to age five.
In response to school closures, the Columbus Metropolitan Library announced they are closing all locations from March 13, 2020 until April 6, 2020 to promote social distancing. Library sources can still be accessed online at columbuslibrary.org

133. How will kids get food while schools are closed if they rely on school for meals daily?

The state is working to make sure meal services will be able to continue for kids who rely on their school system for these provisions. The US Department of Agriculture approved two of Ohio’s waiver requests to keep school breakfast and lunch programs going while schools are closed. During closure, schools will be able to provide every child under 18 with “grab and go” meals, ensuring that no child goes hungry while school is out. Some school districts also now have the unprecedented ability to deliver a healthy meal right to a student’s home. The Ohio Department of Education will be sharing additional information with schools shortly.

134. What about childcare?

The school closure order does not apply to childcare facilities, but Governor DeWine said it may happen sometime in the future depending on how this virus progresses. Childcare facilities can include those that care for children between the ages of infant up to age 13 years. But, these areas are not without risk.

On March 13, 2020 during a press conference, the Governor encouraged those who are able to remove their children from daycare to do so. If you are working from home, please consider caring for your child to lessen the burden on childcare centers. For those of you who can’t, start thinking about what you would do for childcare if they did close down.

If you normally rely on elderly grandparents to provide emergency childcare, please consider alternative options since older Ohioans are considered high risk. This is the time where we look to neighbors and friends to provide support.

The Governor signed an executive order that will provide temporary relief to childcare providers regarding teacher to student ratios. These will apply to preschool and school-aged children.

The Department of Jobs and Family Services will work with our publicly-funded childcare providers to make sure they continue to receive payments when a child is absent, or if they need to close due to COVID-19. They have also provided guidance to make sure facilities are as clean as possible to prevent the spread of infection.

135. Are bars and restaurants closing?

Governor DeWine and Dr. Acton have ordered all restaurants and bars to close, except for carry-out and delivery services.

This order takes place the night of March 15, 2020 at 9:00 pm. This begins ahead of the St. Patrick’s Day holiday that has the potential to bring out thousands of people - and beyond - to gather.

NOTE: Ireland also intends to close pubs through the end of March to promote social distancing.

136. Does this apply to university dining halls?
At this time, university dining halls should also only provide carryout or delivery service, and close dine-in options too.

137. Does this apply to cafeterias at medical facilities?

This order does not apply to food service in healthcare facilities.

138. Does this order apply to services in VFWs?

Gathering of more than 50 individuals in indoor and outdoor spaces are now prohibited. The Order prohibiting the consumption of food and beverages in bars and restaurants is a further refinement of the mass gathering order. Bars and restaurants are prohibited from allowing patrons to eat or drink on the premises—it is carryout only as permitted by law. Both taken together are designed to eliminate large numbers of people gathering together as a way to reduce the likelihood of infection.

139. Does this apply to food and bar services at weddings or funerals?

This order does not apply to catering at weddings or funerals.

On March 17, the Governor made additional recommendations for weddings and funerals. For weddings, we ask you to figure out a way to celebrate your wedding but postpone the large gathering. For funerals, we suggest holding a small, private memorial, but do the large service later. These are requests, but not orders.

140. How will we help small businesses and wait staff who are hurt by this order?

You can support these businesses by still ordering carryout and delivery from these locations. Continue to use these services, while practicing social distancing.

To assist Ohio workers directly impacted by the COVID-19 health emergency, Governor DeWine announced he will issue an executive order that makes several changes to Ohio’s unemployment law and state agency policy.

The order will broaden current state policy to clarify that individuals that are quarantined by a health professional or by their employer are considered to be unemployed and will not be subject to requirements to actively seek work during the period of emergency. This also applies to companies that determine it is necessary to temporarily shut down operations due to the current emergency.

Ohio currently has a one week waiting period before an individual can receive unemployment. In order to expedite the payments to impacted Ohioans, they are waiving the waiting week so that workers eligible for unemployment benefits will receive them for the first week of unemployment. For future taxes, the costs of these additional benefits will be mutualized.

More questions can be pointed to 1-877-644-6562.

ODJFS will also waive employer penalties for late reporting and payments for the next quarter to assist employers impacted by lack of staff availability. The Governor’s Office is also working with the federal government to allow small businesses and non-profits to apply for low-interest loans to pay for certain expenses incurred by COVID-19.
To ensure the process of qualifying the state is done as quickly as possible, we are asking any small business owner who has been impacted by this public health crisis to send their contact information to BusinessHelp@Development.Ohio.Gov. Once received, Development Director Lydia Mihalik and her team will work quickly to follow-up and gather the needed information.

Additional information on the SBA’s Economic Injury Disaster Loan program is available at SBA.gov/disaster or by contacting the SBA disaster assistance customer service center by calling 1-800-659-2955 (TTY: 1-800-877-8339).

141. Are fitness centers, gyms, bowling alleys, REC centers, movie theaters, indoor water parks, or trampoline parks closing?

Governor DeWine and Dr. Acton have ordered these facilities to close. This order will take place on March 16, 2020.

142. How are we addressing the personal protective equipment (PPE) shortage and demand?

The State of Ohio has requested access to the national stockpile of personal protective equipment. The Governor has asked Ohioans to cancel any upcoming elective or outpatient surgeries to help preserve the PPE for those who really need it to care for sick patients.

ODH follows CDC guidelines. The CDC does not recommend that healthy people wear a mask to protect themselves from illnesses, including COVID-19. You should only wear a mask if a healthcare professional recommends it. A facemask should be used by people who have COVID-19 and are showing symptoms. This is to protect others from the risk of getting infected. The use of facemasks also is crucial for health workers and other people who are taking care of someone infected with COVID-19 in close settings (at home or in a health care facility).


143. President Trump and Vice President Pence requested construction sites donate N-95 masks to hospitals. The Governor and Dr. Acton requested professionals donate PPE if they can afford to. How do we do that?

If you’re a professional who has surplus PPE that you’re able to donate, please first reach out to your county Emergency Management Agency (EMA), who will then coordinate next steps to ensure PPE is available to those that need it. Please do not deliver PPE directly to the agency.

The President also asked that they avoid making additional orders.

144. Elective procedures have been rescheduled and delayed. What will continue to happen?

All non-elective surgeries can continue, since they are not optional. This would include surgeries that are life-saving, a procedure that saves an organ, or a surgery that prevents the progression of disease.

More guidance will come shortly.

145. How will I know if my procedure is cancelled?

Your healthcare provider will contact you directly.
146. What did Dr. Acton mean when she said 100,000 Ohioans are infected?

Public health experts have estimated up to 1% of the population could be infected after identifying multiple cases of community spread of coronavirus. We now have multiple cases identified in Ohio.

The estimates consider that:

- Testing is limited.
- Most individuals that have the disease are asymptomatic or have mild symptoms.
- The incubation period can be up to 14 days so people are incubating the illness and aren’t showing symptoms.
- We know that this virus is highly transmissible.

Based on how quickly the virus multiplies and infects people and based on the modeling, we can figure that there are thousands of Ohioans who may already have been infected.

We know that sounds extremely scary but please consider:

- The majority of people who have this illness will experience mild or moderate symptoms. They won’t require testing. And they will be prescribed treatment to help ease their symptoms. For fever, we will give Tylenol or acetaminophen. For coughs, they likely will take cough medicine and cough drops.

A smaller number of cases will have severe infections that will require hospitalization. That’s why individuals need to be vigilant in monitoring symptoms and reach out to a healthcare provider if symptoms worsen. Individuals with shortness of breath or a high fever should see a provider.

That healthcare provider will use clinical judgment combined with a medical evaluation and history to decide if testing is necessary. Testing requires a doctor’s order.

Find out more at www.coronavirus.ohio.gov

147. How will all this be enforced?

The law requires all citizens to obey orders issued by the Director of Health (Revised Code Section 3701.352). Boards of health of a general or city health district, health authorities and officials, police officers, and sheriffs among others can enforce orders and rule of the department of health (Ohio Revised Code Sections 3701.56 and 3701.57). A violation of a 3701.352 is a second degree misdemeanor (Revised Code 3701.99) and law enforcement can issue citations to the business owner and the patrons violating the orders. Finally, law enforcement can issue a citation to anyone who fails to disperse when ordered to do so by law enforcement. (Revised Code 2917.04).

If you can confirm the caller is law enforcement or a prosecutor, it is ok to share the general number for the Office of General Counsel and one of the ODH attorneys can work with the caller. That number is 614-466-4882

If the caller is a citizen and is reporting a violation advise them to contact their local health department and/or the non-emergency number for local law enforcement to report the violation.

148. What is the state doing about price gauging?
The Governor has talked to Ohio Attorney General Dave Yost, and he is ready to take action against price gauging in this time of worry, to make sure Ohioans are not charged more than fair price for items they need.