1. WHAT IS A CORONAVIRUS?
   A coronavirus describes a large number of viruses that usually cause mild respiratory illness. There are coronaviruses that have caused more severe illness, such as severe acute respiratory syndrome (SARS) and Middle East respiratory syndrome (MERS). Novel coronavirus 2019 is a new coronavirus and can cause pneumonia. Other terms you may see used to name this virus include: COVID-19, SARS-CoV-2, or 2019-nCoV.

2. WHAT ARE SYMPTOMS OF CORONAVIRUS?
   This is a respiratory illness. Symptoms include cough, fever, sore throat, and/or difficulty breathing. The degree of severity of these symptoms varies. There have been deaths from this illness. However, most cases (80%) do not appear to be severe. People may experience symptoms similar to a cold or the flu, like fever, cough, shortness of breath, headache, sore throat, or altered or lost sense of smell and/or taste.

3. WHERE DID THIS VIRUS COME FROM AND HOW IS IT SPREAD?
   Like MERS and SARS, COVID-19 closely resembles coronaviruses found in bats but not humans. Scientists believe that the bat virus had a change in its genes that permitted it to spread to humans, possibly via an intermediate carrier (snakes) in an animal market in Wuhan, China.

   The virus can be transmitted from person to person via droplets that come from the nose or mouth when we cough or sneeze. Human coronaviruses most commonly spread from an infected person to others through: the air by coughing and sneezing, close personal contact like shaking hands, or touching a surface with the virus on it and then touching your mouth, nose or eyes before washing your hands.

4. WHAT ARE RISKS FOR GETTING THE VIRUS?
   The potential public health threat posed by COVID-19 is high, both globally and to the United States. However, individual risk is dependent on exposure. People who are close contacts of someone with a confirmed case of the 2019 novel coronavirus are at higher risk.
Close contacts of a confirmed case should stay home and remain quarantined there for 14 days to monitor for symptoms. If they develop symptoms or if symptoms worsen, they should contact their medical provider by phone or online.

Due to the increasing number of cases, our disease investigators are no longer able to contact every close contact. We are still contacting all confirmed cases, which includes anyone who has a positive test result as well as anyone who is a close contact of a confirmed case and develops symptoms.

When someone is contacted, they receive guidance from our public health staff as well as an official letter from the Snohomish Health District to provide to close contacts with notification of exposure and instructions. If you receive a message by phone, email or mail that you are a close contact of someone with a confirmed case of COVID-19, it is important that you follow the instructions.

If a confirmed case identifies close contacts in a high-risk category, the District may also reach out individually to those contacts. High-risk categories include: healthcare workers, first responders, and individuals who are 60 years or older, have underlying health conditions or compromised immune systems, or are pregnant.

Workplaces may be notified by an employee that they are a confirmed case or close contact. A table with general guidance for isolation and quarantine is available online. The employer should work with that employee to ensure needed support, such as sick leave benefits or remote work options. Additional notification may be sent to other employees in the workplace at the employer’s discretion, while respecting the medical privacy of the affected employee.

5. **How Many COVID-19 Cases Are There in Snohomish County?**

   Our daily update on case counts is issued at approximately 2 p.m. on our case counts page.

   Please be aware, as more testing has become available, we are getting increased numbers of reports from laboratories and other facilities. It takes time to reconcile data in order to report numbers accurately. Additionally, employers, the media, or others may hear directly about cases or deaths before the Health District has the information and a chance to reconcile the data.

   Due to the increased numbers of cases and the amount of data, we are no longer able to provide specific information about all cases as we did earlier in this outbreak. We provide overall demographic data.

   If there is a case in someone at a workplace or other facility, there may be additional communication from the affected facility to notify staff and families. The Health District is coordinating with local partners to help provide accurate information and guidance.

   The tally of confirmed cases is not the full picture. There are likely additional cases who do not have symptoms or have mild symptoms and have not been identified through testing. Although this illness can be severe, the majority of cases appear to
be mild or moderate.

The Snohomish Health District receives reports of deaths associated with COVID-19 from a number of sources. These include hospitals or healthcare facilities, other state or local health jurisdictions, the Snohomish County Medical Examiner’s Office, or through case investigations.

All death data provided are confirmed either through test results done before or after a death. There could be underlying health conditions, but COVID-19 is still considered a contributing factor. Note that county-level death data will likely not match numbers provided by the Washington State Department of Health or the Snohomish County Medical Examiner’s Office. We provide numbers for Snohomish County residents with deaths associated with COVID-19. If a resident died in a hospital or facility in another county, they would still be included in our numbers. Numbers can also vary based on the time of day when reports are run.

6. ISN’T THIS VIRUS BASICALLY JUST THE FLU?
No. It is true that we lose lives every year during flu season, and that many of the same strategies for preventing the spread of flu – washing hands, disinfecting surfaces, staying home while ill – are helping us fight COVID-19. But it’s crucial that you don’t mix up COVID-19 and the flu.

We know the measures being taken to reduce the spread of this illness are causing hardship, and they are far beyond what is done during flu season. There’s a reason for that: This is not the flu. COVID-19 is a new virus, and it is significantly more deadly. The measures are in place to save lives.

Current data indicate COVID-19 is at least 10 times more deadly than the average annual flu outbreak. We know a lot about the flu, and there’s a vaccine and treatment. COVID-19 is new, and there is not yet a vaccine or proven treatment. Both are respiratory illnesses and spread in a similar way, but risk of spreading COVID-19 is higher. Our community is not immune to this disease. Twice as many Snohomish County residents died of COVID-19 in six weeks than died during the worst of our recent flu seasons, which last for months.

7. WHAT IS THE STATUS WITH SCHOOL CLOSURES?
Governor Jay Inslee announced Thursday, March 12, that schools in Snohomish, King, and Pierce counties are required to remain closed and provide remote learning through the end of this school year (2019-20).

We know that this has a tremendous impact on our community. Plans are in place and continue to be updated to provide educational resources and lessons to all students as well as meals to students who need them. Students and families should continue to monitor communications from their local school districts.

While the impacts of closing schools are significant, this measure is being done to help reduce the spread of COVID-19. Though school-age children are not considered a
high-risk group for severe illness from the virus, they can spread the virus and they have contact with others in the community who are at high risk.

8. ARE PUBLIC GATHERINGS BEING CANCELED?
Yes. Governor Jay Inslee on March 23 announced the “Stay Home, Stay Healthy” order, and he extended the order on April 2. At least until May 31, 2020, people in Washington are required to stay home unless they are:
- Doing an essential activity like shopping for groceries or going for a medical appointments
- Getting take-out food. Restaurants may also deliver.
- Going to work at an essential business. More information on what is an essential business is available at https://coronavirus.wa.gov.
- Going outside for walks or exercise, as long as social distancing (at least 6 feet from other people) is maintained.

Gatherings of people for social, spiritual and recreational purposes are prohibited, both public and private. Dr. Chris Spitters, health officer for the Snohomish Health District, also issued an order on March 17 that outlines the steps all businesses and organizations must take, even if they are essential and continuing operations.
- Older adults or people with underlying conditions are encouraged not to attend
- Social distancing recommendations are in place. People should avoid being within 6 feet of each other for longer than momentary or minimal contact.
- Employees are screened for coronavirus symptoms each day and excluded if symptomatic
- Proper hand hygiene and sanitation must be readily available to all attendees and employees
- Environmental cleaning guidelines from the U.S. Centers for Disease Control and Prevention are followed, including more cleaning and disinfecting of high-touch surfaces at least daily.

People who are at higher risk from COVID-19 and should take extra precautions include those who:
- are over 60 years of age
- have an underlying medical condition, like heart disease, lung disease or diabetes.
- have weakened immune systems
- or are pregnant.

If you have questions about whether you or your child is at higher risk from COVID-19, ask your health care provider.

9. WHAT ARE THE RULES FOR BUSINESSES AND ORGANIZATIONS?
Under the governor’s order, businesses that are not considered essential can continue remote operations (employees working from home) but must shut down in-person operations during the Stay Home, Stay Healthy order. Businesses providing essential
services still must ensure proper health and safety measures to prevent the spread of illness.

More information on what is considered an essential service, as well as tools to clarify whether a business is essential or to report a possible violation of the order, are available at: https://coronavirus.wa.gov/business-workers.

Restaurants may continue to provide take-out and delivery but cannot allow on-site dining. Grocery stores and pharmacies are allowed to continue operations. Child care, banks, convenience stores, and school food programs also are among the activities that are allowed to continue under this order.

The goal of these measures is to reduce the spread of this illness in the community, and it is vital that people follow them.

The Health District encourages people to support local businesses. Order take-out or delivery from local eateries or check out online or phone options offered by local businesses. A fund has also been set up to help with the impacts of COVID-19 in Snohomish County, and people can donate at www.cf-sc.org.

10. WHAT IS SOCIAL DISTANCING?
It's a common strategy for reducing the spread of disease. The closer the contact between people – and the more people in a group – the greater the risk of passing along viruses.

Try to keep at least 6 feet away from others. Avoid handshakes and hugs – use smiles and “hellos” instead. If you want some kind of physical contact, go for fist or elbow bumps.

Stay home aside from essential trips like medical appointments while the Stay Home, Stay Healthy order is in effect, as well as if you have a compromised immune system; are pregnant; have a serious condition such as diabetes, heart disease or lung disease; or have a cough, fever, and/or difficulty breathing. People older than 60 are especially vulnerable to the COVID 19 virus. Consider having groceries and supplies delivered.

11. DOES THE HEALTH OFFICER REALLY HAVE THE AUTHORITY TO RESTRICT ACTIVITIES?
A combination of Health Officer’s Orders and Governor’s Orders have been issued during this response. The Governor can issue orders for the state – including Snohomish County – and the Health Officer also has the authority to issue orders specifically for Snohomish County.

First, we do not take these measures lightly. They are carefully considered and based on the best information we have about this virus and the ability to reduce transmission. We know these rules have a large impact on our communities. However, they are
crucial for the preservation of lives.

In Washington, the state Legislature enacts statutes, the Governor and state agencies enforce laws and promulgate regulations, and the courts interpret the laws.

**RCW 70.05.070** lays out the powers and duties of a local health officer. This includes: “Take such action as is necessary to maintain health and sanitation supervision over the territory within his or her jurisdiction.” These measures are put in place to maintain the health of the people of Snohomish County.

12. **WHO SHOULD BE TESTED?**
There are currently no restrictions for who can be tested for COVID-19 in Washington. However, Department of Health [guidance to healthcare providers](https://www.doh.wa.gov/COVID19) directs them to focus testing on people with COVID-19 symptoms, such as fever, cough, or shortness of breath.

People should contact their medical provider if they are ill in order to be evaluated for testing. It is not absolutely necessary for everyone with a cold to be tested for coronavirus. Your medical provider may want to monitor your illness or test you for something other than COVID-19, such as influenza.

The Snohomish Health District operated a community drive-thru testing site for more than three weeks and tested 2,347 people. Additional mobile drive-thru testing locations in different parts of the county are being announced as they are available. Check [www.snohd.org/drive-thru-testing](http://www.snohd.org/drive-thru-testing) for updates. Targeted testing also is being done at long-term care facilities.

Those who are being tested for COVID-19 are to remain isolated at home while results are pending. Others who live with them but are not ill will only be required to quarantine if the test results are positive.

It is important that people who are not ill do not go to the clinic or hospital seeking coronavirus testing. If you are ill and believe you may have been exposed to coronavirus [call ahead](https://www.snohd.org/) to your medical provider before coming in.

13. **WHAT IF I CAN’T GET AN APPOINTMENT WITH MY PROVIDER?**
The response to COVID-19 is demanding a tremendous amount from our health care system. The role of the healthcare system in this response is diagnosis, treatment, ongoing care, and addressing individual health concerns.

Healthcare and dental providers may ask you to postpone non-urgent visits or procedures. They may also be providing tele-health options (consultations by phone or online).

For people with non-COVID health needs that are urgent, such as signs of stroke or heart attack or serious chronic conditions that require care, they should continue
appointments with their medical provider and should not be afraid to seek emergency care at a hospital. Hospitals are taking measures to keep all patients healthy and safe and to prevent spread of COVID-19 to any other patients.

If your symptoms worsen, call your healthcare provider for further instructions. If you are experiencing a life-threatening situation, call 911. If you have a mask, try to put that on before first responders arrive.

14. HOW LONG IS SOMEONE CONTAGIOUS?
Based on our current understanding of this disease, symptoms may appear 2 to 14 days after exposure, and people are believed to be contagious up to two days before they become ill. Someone who is infected is most likely to spread the illness when they are actively coughing or sneezing.

It is possible for people to spread the illness when they have mild symptoms or no symptoms. It is also possible that an undetected case who self-isolates because they were exposed or are not feeling well could be contagious after their symptoms go away.

Maintaining at least six feet of distance from other people and wearing a cloth face cover in public locations where you may not be able to do so, like walking in a park or going to the grocery store, can help prevent unintended spread of the virus from people who have mild symptoms or no symptoms.

15. IS THERE A VACCINE FOR 2019 CORONAVIRUS?
At this time, there is no vaccine for coronavirus. Efforts are underway to develop a vaccine. However, that process could take 12-18 months at the soonest.

You can help prevent the spread of illness by washing hands often with soap and running water, staying home if you are sick, avoiding close contact with others who are sick, covering your coughs or sneezes with a tissue, and cleaning and disinfecting objects and surfaces frequently with EPA approved cleaners.

16. WHAT SHOULD I DO IF I GET SICK?
If you feel sick with fever, cough, or difficulty breathing, immediately self-isolate. Stay home and away from others. Call your health care provider before going to get care and tell them about your symptoms as well as any recent travel or contact with someone who has COVID-19. They can provide you instructions for seeking care so that you do not expose others.

Your health care provider may want to monitor your symptoms or test you for COVID-19 or other illnesses like influenza. There are many causes of fevers, coughs, and other respiratory symptoms. Clinics may have masks patients are asked to wear while in the clinic. Please protect others and wear a mask if asked. Wash your hands. Cover your cough or sneeze. If you are ill, stay home.
17. HOW IS THIS VIRUS TREATED?
The vast majority (at least 80%) of people with COVID-19 recover just with their own immune response. Treatment is supportive care for symptoms, fluid intake, and isolation/observation. About 10-20% of cases appear to have severe enough disease to require hospitalization. Those patients also receive supportive care and treatment for complications of the infection (pneumonia, problems breathing, etc.). Other treatment options are being studied, but there is no proven treatment yet.

18. WHAT CAN I DO TO PREVENT THE SPREAD?
We cannot emphasize enough the importance of standard prevention steps for respiratory illness. Continue to practice those. Increase frequency of handwashing, make sure you are cleaning and disinfecting high-touch surfaces, and stay home – even from essential work or errands – if you are ill. All of these are key for slowing the spread of illness.

The CDC has stated that cloth face coverings are recommended as a voluntary public health measure, especially in places with high rates of community transmission. Maintaining a 6-foot distance between you and other people (social distancing) continues to be essential, and distance should be maintained even while wearing a mask. The cloth coverings recommended by CDC for the general public may be made from common materials at home. The public should not use surgical masks or N-95 respirators – it is crucial that we prioritize these for medical providers and first responders.

Medical providers have specific guidance on masks and personal protective equipment and should follow that guidance.

Please respect the orders and rules put in place to help reduce the spread of illness. We are relying on our community to do the right thing to keep people safe and healthy.

Set up a separate room in the household for someone who is sick and clean the room regularly. Have cloth face covers for members of the household who need to go in public, and for the sick person when they need to go into other areas of the house.

Know your neighbors or friends in the area and be ready to support each other during an emergency. Check in on those who live alone or have underlying health conditions and may need extra support. If you live alone, talk to your friends and family members about who would be available to call or message to check in on you if you become sick.

Through all of this, remember to stay calm, prepared and informed. Check reliable sources for updates and follow the advice of public health professionals.

19. WHAT ABOUT PEOPLE WHO ARE IMMUNOCOMPROMISED OR AT HIGHER RISK?
People who have underlying conditions or are otherwise immunocompromised are at higher risk from this illness, as well as other illnesses like the flu. Avoiding contact with ill people is crucial.

If a household member of someone who is immunocompromised is suspected of having or confirmed to have coronavirus, the CDC instructs healthcare professionals and local public health staff to assess isolation options for the COVID-19 patient outside of the home so that they are not in proximity to the immunocompromised household member.

If you do not have an ill household member but are immunocompromised, talk to your healthcare provider about what steps you should take to protect yourself. A healthcare provider may suggest that someone with a particularly vulnerable immune system wear a mask. Please follow your healthcare provider’s guidance and keep in mind that masks are not the best option for everyone with a vulnerable immune system.

Now is also a good time to learn what options your healthcare provider may have for remote consultations, by phone or online. This can help you get your questions answered before going into a clinic, thereby minimizing exposure to this virus as well as other illnesses.

People who are 60 or older, as well as people of all ages who have underlying medical conditions, are at higher risk of serious illness from COVID-19. Other higher risk groups include pregnant women or people with weakened immune systems.

20. SHOULD I STAY HOME FROM WORK OR KEEP MY KIDS HOME FROM SCHOOL OR CHILD CARE?
Schools are closed at this time and workplaces are closed except for essential services and remote work (see “What are the rules for businesses and organizations” above). Employers should maximize flexibility in sick leave benefits to accommodate these measures.

People with symptoms such as cough, fever, and/or difficulty breathing, or who have been contacted by public health because they are a close contact of a confirmed case, should stay home and away from others even if they are essential workers. **Do not attend work or other activities until 72 hours after fever has resolved or 10 days after the illness began, whichever is longer.**

21. WHY ARE CHILD CARES OPEN IF SCHOOLS ARE CLOSED?
At this time, child cares are open for children of essential workers or vulnerable children who do not have alternative care. Parents who can keep their children home or arrange for other care need to do so at this time. Child cares should not be used for socializing children for a few hours a day or because the parent(s) needs quiet time to work at home. If you are working remotely, your children should be home with you. And while socializing is important, this is not the time to have children in groups when it is not absolutely necessary. Social distancing is essential to slow the spread of COVID-19.
Child cares play a crucial role in ensuring that those who cannot work remotely still have a safe place for their children. Many people who are critical to this pandemic response – including first responders, dispatchers, and health care workers – are not able to work remotely.

However, child care providers must be able to meet health and safety requirements. A few highlights of those requirements are: excluding sick employees from work; sending sick children home; meeting all CDC recommended cleaning and disinfecting procedures; and ensuring proper hand hygiene and sanitation are readily available to all children and staff.

Child care providers also may make individual decisions to close due to staffing or health issues, or they may need to close if a staff member or child becomes ill with COVID-19. We are encouraging child care providers to talk to families about the possibility of long-term closures and to make plans for their business. They also should look at closing temporarily if they cannot staff their child care without employees who are part of a high-risk group, which includes people who are 60 or older, people who have underlying medical conditions or weakened immune systems, and pregnant women.

22. WHY ISN’T THERE A LIST OF EXPOSURE LOCATIONS?
Coronaviruses like COVID-19 spread primarily among close contacts. They are spread through respiratory droplets when people cough or sneeze, or by touching a surface where the virus has been and then touching your mouth, nose or eyes. This is different from an airborne virus like measles, where we would release locations of general exposure.

Notification of close contacts or communication about exposures may change as the response to this pandemic continues.

23. IS IT SAFE TO DONATE BLOOD?
Yes. As with any other situation, people who are ill should stay home and should not go to donate blood. However, people who are well may certainly do so. You can't catch COVID-19 from donating blood. In fact, to prevent blood supplies running low, we encourage you to donate blood.

24. IS IT SAFE TO TRAVEL INTERNATIONALLY?
Prior to any trip, be sure to check CDC travel notices at https://wwwn.cdc.gov/travel/notices. Multiple countries have been listed at a level 3 warning, which means to avoid nonessential travel, or a level 2 warning to practice enhanced precautions while traveling. The list of countries with travel notices, as well as the level of a country’s notice, may change quickly.

If you are ill, avoid travel. If you are planning trips, be prepared to cancel non-essential travel and monitor alerts as the situation changes.
25. ADDITIONAL INFORMATION:


A statewide hot line also has been set up at 1-800-525-0127, then press #.