



Frequently asked questions: COVID-19 v12.7 13/3/2020



COVID-19 is a new disease in the human population and the national and international situation in relation to COVID-19 is dynamic and evolving. FAQs will be updated regularly to reflect new information and changes to guidance.

Updates on the global situation regarding 2019-nCoV are available on the World Health Organization (WHO) website at <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/events-as-they-happen> and on the European Centre for Disease Prevention and Control (ECDC) website at <https://www.ecdc.europa.eu/en/novel-coronavirus-china>

Important Updates

- 1. On the 12th of March 2020 the [Government of Ireland announced the following actions](#) to delay the spread of COVID-19 in Ireland. These measures took effect on 13/03/2020 and will remain in place until 29/03/2020, at which time a decision will be made regarding whether they should be continued.**
 - All schools, colleges and childcare facilities will close. Where possible, teaching will be done online or remotely.
 - Cultural institutions will close.
 - Indoor mass gatherings of more than 100 people and outdoor mass gatherings of more than 500 people should be cancelled.
 - Arrangements are being made to ensure that everyone entering Ireland through our ports and airports is fully informed and self-isolates if they develop symptoms.
 - People should continue to go to work if they can but where possible should work from home. In order to reduce unnecessary face to face interaction in the workplace, break times and working times should be staggered and meetings done remotely or by phone.
 - Public transport will continue to operate.
 - The shops will remain open and plans are in place to ensure that supply chains will not be interrupted.
 - Restaurants, cafes and other businesses can stay open but should look at ways that they can implement the public health advice on social distancing.
 - As a general rule, outside of work people should seek to reduce social interactions as much as possible. 'Reducing social interactions as much as possible' requires a common sense approach. People should limit contact with others and manage their social interactions appropriately, including the following – do not shake hands with other people, wash your hands regularly, engage in appropriate cough hygiene etc. (see FAQ 14).
- 2. The Department of Foreign Affairs and Trade (DFAT) have defined a list of areas for avoidance of nonessential travel/do not travel for COVID-19. This list is available on the [HPSC website](#). Anyone returning to Ireland from any of these areas should self-quarantine for 14 days. Self-quarantine involves the following:**
 - You should limit your social interactions in so far as possible. This means staying at home or your hotel room.
 - Do not have visitors at home.

- Where possible, arrange your groceries online or have family or friends drop it off to the house.
- You should avoid social gatherings, group events and crowded settings.
- You should not attend school, work, social or sporting events or training.
- You can go outside on your own for walks, runs or cycles.
- You should not use public transport.
- You should avoid contact with the elderly, those with chronic health problems and pregnant women.
- You should not travel outside Ireland.

If you develop symptoms and /or cough contact you should contact your doctor by phone and explain your recent travel history and symptoms so they can help to arrange for testing for COVID-19.

3. What is the difference between self-quarantine and self-isolation, and who needs to self-quarantine/self-isolate?

Please see the [HSE webpages](#) for further information on the difference between self-quarantine and self-isolation and what action people in self-quarantine/ self-isolation should take.

As described in FAQ2, **self-quarantine** means limiting your social interactions and avoiding contact with other people in so far as possible. People who should self-quarantine for 14 days include:

- Anyone returning to Ireland from any of the Department of Foreign Affairs and Trade (DFAT) list of areas for avoidance of nonessential travel/do not travel for COVID-19 (see FAQ 2).
- Close contacts of confirmed cases of COVID-19, where the close contact is well and does not have symptoms of COVID-19.

Self-isolation is more stringent than self-quarantine. People who should self-isolate include:

- People who may have COVID-19 (possible cases of COVID-19) – this includes people with symptoms of COVID-19 who are waiting to be tested or waiting for test results.
- People with confirmed COVID-19 who are being managed in the community. Most people (80%) with coronavirus will only have mild symptoms and will get well within weeks. Even though the symptoms are mild, these people can still spread the virus to others. This is why they are asked to self-isolate.

Action to be taken when in self-isolation include: stay at home, avoid all contact with others in so far as is practical, i.e. stay in separate room in the house from other family members, use separate toilet and clean after use, don't share household items e.g. kitchenware, laundry. Please see the HPSC [patient information sheet for home isolation](#) for further information on what self-isolation means and what action to take when in self-isolation.

4. Who is considered a 'contact' of COVID-19 and what is the difference between a close contact and a casual contact?

A 'contact' is a person who has been in contact with someone with COVID-19, e.g. people who live in the same household. Because COVID-19 can be spread from person to person via

respiratory droplets, contacts of people with confirmed COVID-19 are at increased risk of picking up the virus. 'Contact tracing' is the process of identifying and monitoring contacts to ensure that they remain well and do not develop symptoms of COVID-19. If they do develop symptoms they can be identified and treated quickly.

Please see the HPSC [Contact Tracing Guidance](#) for definitions of close and casual contacts and the management of each.

General Information

5. What is a Coronavirus?

Coronaviruses are a large family of viruses that circulate among animals including camels, cats and bats. Coronaviruses are zoonotic, meaning that they can be transmitted (spread) from animals to humans. Coronaviruses cause illness in humans ranging from the common cold to more severe respiratory (lung) diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The SARS Coronavirus (SARS-CoV) was first identified in China in 2003 and scientists suspect that the virus spreads to humans from civets. The MERS Coronavirus (MERS-CoV) was identified in Saudi Arabia in 2012 and the virus spreads to humans from dromedary camels.

More information on coronaviruses can be found on the [ECDC factsheet](#).

6. What is the 2019 novel Coronavirus?

A novel (new) coronavirus that has not previously been seen in humans was identified in Wuhan, China in December 2019. This virus is called Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) and the disease that it causes is called Coronavirus Disease 2019 (COVID-19). The first cases of COVID-19 were identified in people working in a seafood and live animal market in Wuhan. It is thought that humans picked up the virus from animals at the market.

7. Is COVID-19 similar to SARS or the seasonal influenza virus (the flu)?

The virus that causes COVID-19 (SARS-CoV-2) belongs to the same family of viruses (coronaviruses) as the virus that causes SARS, but it is not the same virus.

The virus that causes COVID-19 (SARS-CoV-2) is not from the same family of viruses as the seasonal influenza virus ('the flu'). COVID-19 and the flu are completely different diseases, but can cause similar symptoms such as fever or cough. Because the symptoms of COVID-19 and the flu can be very similar, it can be difficult to identify COVID-19 based on symptoms alone. That's why laboratory tests may be needed to determine whether someone has COVID-19 or a different illness such as the flu.

8. How does COVID-19 spread?

The virus that causes COVID-19 (SARS-CoV-2) can spread from person to person through small droplets from the nose or mouth of a person infected with the virus. These droplets are produced when a person coughs or sneezes. People can catch the virus either:

- directly, by breathing in the droplets produced when an infected person coughs or sneezes or
- indirectly, by touching surfaces that an infected person has coughed or sneezed on and then touching their eyes, nose or mouth. It is still not known how long the virus survives on surfaces, although current information suggests the virus may survive for 48-72 hours. Simple household disinfectants can kill the virus. Surfaces should be cleaned first and then disinfected.

Current information suggests that COVID-19 spreads easily from person to person. While people are most likely to pass on the infection when they have symptoms, current information suggests that people may be able to spread the virus to others even if they themselves do not have any symptoms.

One of the best ways to prevent person to person spread of infectious disease, including COVID-19, is to use proper hand hygiene and respiratory etiquette (see FAQ 14).

9. Can the virus that causes COVID-19 be spread through the air?

Current information suggests that the virus that causes COVID-19 is spread through contact with respiratory droplets rather than through the air.

10. Can COVID-19 be spread to other people by someone who has no symptoms?

Current information suggests that COVID-19 spreads easily from person to person. While people are most likely to pass on the infection when they have symptoms, current information suggests that people may be able to spread the virus to others even if they themselves do not have any symptoms.

One of the best ways to prevent person to person spread of infectious disease, including COVID-19, is to use proper hand hygiene and respiratory etiquette (see FAQ 14).

11. Can I catch COVID-19 from the faeces of someone with the disease?

The risk of catching COVID-19 from the faeces of an infected person appears to be very low. Current information suggest that the virus may be present in the faeces of an infected person, but person to person spread through this route is not a common feature of this outbreak. However, research is ongoing into the ways in which COVID-19 is spread. It is always important to use good hand hygiene, including hand washing after using the bathroom and before eating.

12. What is the incubation period for COVID-19?

The incubation period is the time between infection and the onset of symptoms of disease (e.g. cough, fever, shortness of breath). Current information suggests that the incubation period for COVID-19 may range from 2-11 days. This estimate will be refined as more information about the disease becomes available. Based on information from other coronavirus diseases, such as MERS and SARS, the incubation period for COVID-19 could be up to 14 days.

13. Can I catch COVID-19 from my pet?

While there has been one instance of a dog being infected in Hong Kong, to date, there is no evidence that a dog, cat or any pet can transmit COVID-19. COVID-19 is mainly spread through

droplets produced when an infected person coughs or sneezes. To protect yourself, clean your hands frequently and thoroughly. People with pets and people who work with animals should engage in usual preventive actions to avoid infection like hand washing and respiratory hygiene (see FAQ 14).

Prevention

14. How can I protect myself from getting COVID-19?

You should always practice good hand hygiene and respiratory hygiene. Hand hygiene and respiratory hygiene are a series of actions to take which are designed to reduce the spread of infectious diseases, including COVID-19, to yourself and others. These actions include regular handwashing and covering your mouth and nose with a tissue or the bend of your elbow when you cough or sneeze.

- Hand hygiene:

Wash your hands regularly. You should wash your hands:

- ✓ after coughing or sneezing
- ✓ before, during and after you prepare food
- ✓ before eating
- ✓ after using the toilet
- ✓ when caring for the sick
- ✓ when hands are dirty
- ✓ after handling animals or animal waste

Wash your hands with soap and running water when hands are visibly dirty. If your hands are not visibly dirty, wash them with soap and water or use an alcohol-based hand rub. See HSE hand hygiene guidance at <https://www2.hse.ie/wellbeing/how-to-wash-your-hands.html>

- Respiratory hygiene:

Cover your mouth and nose with a clean tissue when you cough and sneeze and then promptly dispose of the tissue in a bin and wash your hands. If you don't have a tissue, cough or sneeze into the bend of your elbow instead, not into your hands. See <https://www.hpsc.ie/a-z/respiratory/influenza/seasonalinfluenza/infectioncontroladvice/respiratoryhygieneposters/>

15. Do I need to wear a facemask to protect me from COVID-19?

You should only wear a facemask if you are ill with symptoms of COVID-19 (especially coughing) or looking after someone with suspected or confirmed COVID-19. If you are not ill or looking after someone who is ill then you do not need a facemask. There is no evidence that using facemasks is of any benefit in people who are not sick or caring for someone who is sick. There is a world-wide shortage of masks and the World Health Organization (WHO) advises rational use of medical masks to avoid unnecessary wastage of precious resources.

The most important action people can take to protect themselves and others from COVID-19 is regular hand-washing and good respiratory hygiene (see FAQ 14).

16. Am I protected against COVID-19 if I had the influenza (flu) vaccine this year?

No. Influenza and COVID-19 are two different diseases caused by different viruses and the seasonal influenza vaccine does not protect against COVID-19.

Medical Information/ signs and symptoms of COVID-19

17. What are the symptoms of COVID-19?

Common symptoms of COVID-19 include fever and cough. Other symptoms may include shortness of breath, fatigue, aches and pains and a sore throat. Some people who become infected with the virus that causes COVID-19 (SARS-CoV-2) do not develop any symptoms and do not feel unwell. Most people with COVID-19 (about 80%) will have a mild illness and will recover without needing special medical treatment. Approximately 1 in every 6 people who get COVID-19 will become seriously ill with breathing difficulty. Older people and those with underlying medical conditions, such as heart disease, lung disease or diabetes, are more likely to develop serious illness if they become unwell with COVID-19. Some patients with COVID-19 can develop severe illness such as pneumonia or kidney failure, which may lead to death in some cases.

18. Who should be tested for COVID-19?

The situation in relation to COVID-19 is dynamic and guidelines regarding who should be tested for COVID-19 are changing as the situation evolves. People who may need to be tested for COVID-19 include those with recent onset of fever or chills and/or symptoms of respiratory tract infection, which includes cough. Please see the [HSE](#) and [HPSC](#) websites for up-to-date information regarding who should be tested for COVID-19 and algorithms for COVID-19 risk assessment/testing in Irish healthcare settings.

19. Where can I get tested for COVID-19?

If your doctor thinks that you need a laboratory test for COVID-19, they will advise you where and how the test will be undertaken.

20. What is the treatment for COVID-19?

There is no specific treatment for COVID-19. However, many of the symptoms can be treated and therefore treatment is based on the patient's clinical condition.

21. Can antibiotics be used to treat COVID-19?

No. Antibiotics do not work against viral infections; they only work against bacterial infections. COVID-19 is caused by a virus (SARS-CoV-2) and, therefore, antibiotics should not be used to prevent or treat COVID-19. However, some people with COVID-19 infection may also develop a bacterial chest infection requiring treatment with antibiotics.

22. Is there a vaccine for COVID-19?

When a disease is new, there is no vaccine until one is developed. There is currently no vaccine for COVID-19 but research is ongoing into the development of a vaccine. The seasonal influenza ('flu') vaccine does not protect against COVID-19.

23. Are some people more at risk than others?

As COVID-19 is a new disease that has not been seen in humans before, we do not know for sure which groups of people are at high risk of becoming very unwell from COVID-19. However, current information indicates that people at high risk of serious illness from COVID-19 include:

- older people and
- people with underlying medical conditions (e.g. heart disease, lung disease, diabetes, liver disease).

24. Are immunocompromised people at higher risk of serious illness from COVID-19?

Immunocompromised people are those people whose immune system has been weakened through illness or as a result of medications they are required to take for treatment of medical illnesses. This includes people with underlying medical conditions (e.g. heart disease, lung disease, diabetes, liver disease), people receiving treatment for cancer, people who have undergone organ transplant, and people on a range of medications including long-term steroid medication. Immunocompromised people do not have the same ability to fight infectious diseases, including COVID-19, as people with normal immune function. Therefore, immunocompromised people may have a higher risk of serious illness from COVID-19 compared to people with normal immune function. Immunocompromised people should engage in usual preventive actions to avoid infection like hand washing, respiratory hygiene and avoiding contact with people who are sick (see FAQ 14), and should follow any advice given by the doctors who usually treat them for their medical condition.

25. Are pregnant women at higher risk of serious illness from COVID-19?

There is very little information currently available on SARS-CoV-2 infection/COVID-19 in pregnancy and in the postpartum period. Pregnant women experience normal immunological and physiological changes which place them at increased risk of serious illness from certain infections including seasonal influenza (the flu). We do not have enough information to definitively state whether pregnant women are at increased risk of contracting COVID-19, or experiencing more severe illness as a result of COVID-19, compared to non-pregnant individuals. Pregnant women should engage in usual preventive actions to avoid infection like hand washing, respiratory hygiene and avoiding contact with people who are sick (see FAQ 14).

Further information:

Please see the HPSC website for [Interim Guidelines on the management of suspected COVID-19/SARS-CoV-2 in the pregnant and post partum period](#).

The US Centers for Disease Control and Prevention (CDC) have published a series of [Frequently Asked Questions in relation to COVID-19 and pregnancy](#).

26. Can a pregnant woman with COVID-19 pass the infection on to the foetus during pregnancy, childbirth or through breastfeeding?

Currently there is no evidence to suggest that a pregnant woman with COVID-19 can pass the infection on to the foetus during pregnancy, childbirth or via breastfeeding (vertical transmission). However, this information is based on a small number of studies examining the outcomes of a small number of pregnant women with COVID-19 and their infants. We do not have enough information to definitively state whether or not vertical transmission of the virus that causes COVID-19 (SARS-CoV-2) to the foetus is possible.

However, we do know that the virus can spread from person to person through small droplets from the nose or mouth of a person infected with the virus ('respiratory droplets'). A mother with COVID-19 infection could spread the infection to her newborn infant through respiratory droplets. Therefore, pregnant women should engage in usual preventive actions to avoid infection like hand washing, respiratory hygiene and avoiding contact with people who are sick (see FAQ 14).

Further information:

Please see the HPSC website for [Interim Guidelines on the management of suspected COVID-19/SARS-CoV-2 in the pregnant and post partum period](#).

The US Centers for Disease Control and Prevention (CDC) have published a series of [Frequently Asked Questions in relation to COVID-19 and pregnancy](#).

27. Are children at higher risk from COVID-19

Current information suggests that children are not at higher risk for serious illness from COVID-19 compared to the general population. However, children could pass the virus on to vulnerable people including older adults and people with long-term medical conditions (e.g. heart disease, lung disease, diabetes, liver disease). Parents/guardians should ensure that children in their care apply proper hand hygiene and respiratory hygiene measures (see FAQ 14). Everybody should abide by social distancing advice issued by the Government of Ireland (see FAQ 1). These measures include school closures and advice that people limit their social interactions in so far as is practical.

28. Are healthcare workers at risk from the COVID-19?

Yes, they can be, as healthcare workers come into contact with patients more often than the general public. Health care workers should follow the appropriate Health protection Surveillance Centre (HPSC) [Infection Prevention and Control guidance](#).

29. I am a healthcare worker in a hospital/General Practice. What infection prevention and control (IPC) measures do I need to apply if I am caring for a patient with suspected/confirmed COVID-19?

Please follow the appropriate Health protection Surveillance Centre (HPSC) [Infection Prevention and Control guidance](#).

What is the current situation globally and in Europe regarding COVID-19?

30. The outbreak of COVID-19 has been declared a pandemic. What does this mean?

On 11/03/2020 the World Health Organization (WHO) declared the coronavirus outbreak a pandemic. A pandemic is an outbreak of an infectious disease, such as COVID-19, that has spread over a wide geographic area, for instance multiple continents or even worldwide, and that is affecting an exceptionally high proportion of the population.

31. What countries have had confirmed cases of COVID-19?

Please see the [WHO website](#) for up-to-date information regarding countries that have had confirmed cases of COVID-19, and total numbers of cases.

32. I have heard that Ireland is currently in a 'delay phase' regarding COVID-19. What does this mean?

There are several different phases in the response to an international outbreak of an infectious disease. These phases include containment, delay and mitigation. Ireland is currently in the delay phase of the COVID-19 outbreak response. Further spread of COVID-19 in the community is inevitable, but action taken in the delay phase can slow down the spread of the disease, giving the Government more time to prepare for and respond to this evolving situation. Measures taken in the delay phase include those listed in FAQ 1. All citizens should abide by this advice.

33. What is the risk of COVID-19 for European/ EEA citizens?

The COVID-19 outbreak is evolving rapidly and the risk assessment is changing accordingly. ECDC is continuously assessing the risk for EU citizens and you can find the latest information in the most recent ECDC Rapid Risk Assessment available via the ECDC website [here](#).

34. How prepared is Europe for COVID-19 and what is the EU doing?

The European Centre for Disease Prevention and Control (ECDC) is in continuous contact with the European Commission and the World Health Organization during this outbreak. To inform the European Commission and the public health authorities in Member States of the ongoing situation, ECDC publishes [daily summaries](#) and continuously assesses the risk for EU citizens. ECDC and WHO have developed technical guidance to support the EU Member States, including Ireland, in their response. The European Commission is ensuring the coordination of the risk management activities at EU level.

35. On the 30th of January 2020 the World Health Organization (WHO) declared COVID-19 to be a Public Health Emergency of International Concern (PHEIC). What does this mean?

WHO defines a Public Health Emergency of International Concern (PHEIC) as 'an extraordinary event' that is a 'public health risk to other States through the international spread of disease' and that may 'potentially require a coordinated international response.' For more information on PHEIC see the [WHO website](#).

Other queries

36. I have received a package/parcel from an area affected by COVID-19, what should I do?

There is no evidence of a risk of contracting COVID-19 from packages from areas affected by COVID-19. From experience with other coronaviruses, we know that these types of viruses don't survive long on objects, such as letters or packages. The best way to protect yourself is to use good hand hygiene and respiratory hygiene as described in FAQ 14.

37. Is it safe to handle money that may have been handled by someone with COVID-19?

There is no evidence of a risk of contracting the virus that causes COVID-19 by handling money. The best way to protect yourself is to use good hand hygiene and respiratory hygiene as described in FAQ 14.

38. What about animals or animal products imported from areas affected by COVID-19?

There is no evidence that any of the animals or animal products authorised for entry into the European Union pose a risk to the health of EU citizens as a result of COVID-19.

39. What about contact with pets and other animals in areas affected by COVID-19?

There has been no report of transmission of COVID-19 via food and therefore there is no evidence that food items imported into the European Union in accordance with the applicable animal and public health regulations governing imports pose a risk for the health of EU citizens in relation to COVID-19. The main mode of transmission of COVID-19 is from one person to another.

Guidance for Ireland is based on guidance from the European Centre for Disease Prevention and Control (ECDC) and the World Health Organization, and has been developed by the National Public Health Outbreak Response Team.

An Expert Advisory Group, which includes experts in Public Health Medicine, Infectious Diseases, Infection Prevention and Control and Virology has been established which provides expert scientific advice relating to novel coronavirus, including the review of current guidance.

Further information is available from

Health Protection Surveillance Centre (HPSC) webpage <https://www.hpsc.ie/a-z/respiratory/coronavirus/novelcoronavirus/>

European Centre for Disease Prevention and Control (ECDC) webpage <https://www.ecdc.europa.eu/en/novel-coronavirus-china>

World Health Organization (WHO) webpage <https://www.who.int/health-topics/coronavirus>

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