COVID-19 COMMUNICATION HIGHLIGHTS

May 6, 2020

This document was previously referred to as the Daily Key Points. It will be updated and distributed on Monday, Wednesday, and Friday.

SNAPSHOT

As of May 6

- CDC has reported
 - 1,193,813 confirmed and probable cases of COVID-19
 - 70,802 confirmed and probably COVID-19-related deaths.
- All 50 states, the District of Columbia, Puerto Rico, Guam, the Northern Mariana Islands, and the US Virgin Islands have reported cases of COVID-19.
 - Of those, 35 states and 1 territory report COVID-19 cases are "widespread;" 21 states report more than 10,000 cases of COVID-19. See CDC's map to stay up to date on what is happening in your state.

WHAT CDC BY THE NUMBERS

- Follow COVID-19 by the numbers to stay updated on CDC activities. For example,
 - There are almost 4,300 CDC personnel supporting the COVID-19 outbreak response.
 - CDC has screened more than 285,000 international passengers arriving at US airports.
 - 958 CDC deployers have conducted 1,160 deployments to 88 cities in the United States and abroad.
 - People have viewed CDC's COVID-19 websites 1.2 billion times.
 - CDC has created 1,144 documents and guidance for government agencies, businesses, and the public.
 - CDC Info has received more than 197,000 calls and emails.

PRIORITY MESSAGES

- Know how to protect yourself and others.
 - Wash your hands often with soap and water for at least 20 seconds, especially after you have been in a public place, or after blowing your nose, coughing, or sneezing.
 - If soap and water are not readily available, use a hand sanitizer that contains at least 60% alcohol.
 - Avoid touching your eyes, nose, and mouth with unwashed hands.
 - Clean and disinfect frequently touched surfaces daily.

- Know what to do if you are sick.
 - Use <u>the Self-Checker</u> to help make decisions.
 - Follow care instructions from your physician.
 - If you have <u>an emergency warning sign</u>, get medical attention right away.
- Know what precautions to take in public settings, especially if your community is reopening.
 - Put distance between yourself and others—stay at least 6 feet from other people.
 - <u>Wear cloth face coverings</u> in public settings where other social distancing measures are difficult to maintain (e.g., grocery stores and pharmacies), especially in areas of significant community- based transmission.
 - Cloth face coverings should not be placed on children under age 2.
 - Follow reopening guidance from <u>state</u> and local public health officials.
- This is a rapidly evolving situation and information will be updated as it becomes available.

NEW MESSAGES AND RESOURCES

PURCHASING RESPIRATORS FROM ANOTHER COUNTRY

- CDC has created <u>Factors to Consider when Planning to Purchase Respirators from Another</u> <u>Country (Including KN95 Respirators from China)</u> to assist with the purchase of international respirators. This resource can help potential purchasers make informed procurement and distribution decisions to keep their workers safe.
- Users can be confident that respirators <u>approved by the National Institute for Occupational</u> <u>Safety and Health (NIOSH)</u> will provide the expected level of protection, as long as they fit properly and are worn correctly.
- If there is a <u>shortage of NIOSH-approved filtering facepiece respirators (FFRs)</u>, as with the current COVID-19 pandemic, other reliable options must be found.
 - When possible, NIOSH recommends the use of **NIOSH-approved** reusable <u>elastomeric</u> <u>respirators</u> and <u>powered air-purifying respirators (PAPRs)</u> as alternatives to FFRs.
- When a facility still needs additional FFRs, CDC and the US Food and Drug Administration (FDA) have determined that <u>other options may be appropriate</u> to protect workers during the pandemic.
- One of these options is to purchase respirators that meet the regulatory requirements of the countries listed in the FDA's <u>Emergency Use Authorization</u> for FFRs.
 - Buyers should be aware that an unprecedented number of products on the market do not perform as advertised. The three most common "pitfall" scenarios are—
 - 1. Documents are altered so FFR models appear to comply with a particular standard, but they do not.
 - 2. Certification marks are <u>counterfeit</u>.
 - 3. Manufacturers' names, logos, and model numbers are counterfeit.

• Potential purchasers of international respirators should evaluate the device they plan to purchase, the manufacturer, any third-party intermediary (if applicable), and the contract terms before making purchasing decisions.

CRUISE SHIP CREW MEMBER DISEMBARKATIONS

- CDC has posted information on <u>Cruise Ship Member Disembarkations</u> as part of the <u>Cruise Ship</u> <u>Travel</u> section of its <u>COVID-19 and Travel</u> website.
- CDC is allowing crew members to disembark from cruise ships in US waters and return home, if cruise lines submit a signed attestation stating that they have complied with requirements to safely disembark their crew members.
- On April 23, CDC shared requirements for disembarkment with all cruise lines currently in US waters to facilitate crew members returning home safely.
 - Since then, several cruise lines have requested to disembark crew through this process. CDC stands ready to approve these requests with same-day turnaround.
 - CDC provides a <u>list of the latest signed attestations</u> that the agency has received from cruise lines and approved to safely disembark crew. This list is updated daily.
- CDC will continue to support urgent medical evacuations of crew in US waters and ports, either by air or land ambulance.
 - Emergency medical evacuations should be coordinated with US Coast Guard and the receiving medical facility; these evacuations do not require CDC approval.
 - CDC has notified all cruise lines as well as federal, state, and local partners that the No Sail Order of April 15 will not prevent crew members from receiving emergency medical care.

WHAT TO DO IF YOUR PET TESTS POSITIVE FOR THE VIRUS THAT CAUSES COVID-19

- A small number of pets—cats and dogs—have been confirmed to be infected with the virus that causes COVID-19, mostly after close contact with a person with COVID-19.
 - Some infected pets did not show any signs of illness.
 - Infected pets that did get sick all had mild disease and could be taken care of at home.
 - None of the pets have died.
- CDC is still learning how the virus that causes COVID-19 can affect animals.
- Based on the limited information available now, the risk of pets spreading COVID-19 to people is considered to be low.
 - There is no reason to abandon or surrender pets that have been confirmed positive for the virus that causes COVID-19.
- If you are sick with COVID-19 and you think your pet is also sick, do not take your pet to the veterinary clinic yourself.
 - Call the veterinarian first and tell them you are sick with COVID-19.
 - Some veterinarians may offer telemedicine consultations or other ways to see sick pets.
 - Your veterinarian can evaluate your pet and decide the appropriate steps for care.

- Tests for COVID-19 in animals are available for most types of pets, but testing is only recommended for animals with COVID-19 <u>symptoms</u> that have been exposed to a person with COVID-19.
- Pet owners can get more information from CDC's <u>What to do if Your Pet Tests Positive for the</u> <u>Virus that Causes COVID-19</u> web page.

MMWRs

COVID-19 IN CORRECTIONAL AND DETENTION FACILITIES

- CDC published <u>COVID-19 in Correctional and Detention Facilities United States, February</u> <u>April 2020</u> on May 6.
- Correctional facilities present unique challenges to slowing the spread of COVID-19.
- In the United States, an estimated 2.1 million adults are housed within approximately 5,000 correctional and detention facilities nationwide.
- Challenges to controlling the spread of COVID-19 include crowding, shared dormitories and lavatories, limited medical and quarantine resources, and daily entry and exit of staff members and visitors
- As of April 28, a total of 420 correctional facilities reported 4,893 COVID-19 cases among detained or incarcerated people and 2,778 cases among facility staff.
 - There were 491 hospitalizations and 88 deaths reported among these incarcerated or detained people
 - There were 79 hospitalizations and 15 deaths reported among these staff.
 - More than half (221 or 53%) of the 420 facilities reported cases only among staff
- A total of 32 of 54 state and territorial health departments reported COVID-19 cases among incarcerated or detained people or staff members
- CDC recommends regular symptom screening, isolation for those with symptoms, physical distancing, intensified cleaning, infection control training, and disinfection of high-touch surfaces to help prevent the spread of COVID-19 in these facilities.
- CDC recommends that facility administrators work with local health departments and partners to prepare and respond to COVID-19 transmission and follow CDC <u>guidance</u> on management of cases in correctional facilities.