



COVID-19 Frequently Asked Questions

April 9, 2020

Hotlines: 211 or 1-800-962-1253

Website: covid19.nj.gov

FREQUENTLY USED TERMS

SARS-CoV-2: The scientific name for the novel 2019 coronavirus. The full name is: Severe Acute Respiratory Syndrome Coronavirus 2.

COVID-19: The disease caused by the virus SARS-CoV-2

Coronavirus: A family of viruses that SARS-CoV-2 belongs to. The 2003 SARS outbreak was a coronavirus, as was the MERS outbreak in 2012.

Pneumonia: A lung infection caused by a bacteria, virus, or fungus. The most common type of pneumonia is bacterial.

Epidemic: Widespread occurrence of an infectious disease in a community at a particular time.

Pandemic: A worldwide spread of a disease. The World Health Organization declared COVID-19 a pandemic on March 11, 2020.

“Flattening the Curve”: An epidemiology term that means to limit the spread of disease in an effort to reduce the number of cases of disease.

Confirmed cases: The number of cases that have been confirmed through diagnostic testing. Due to a shortage of COVID-19 tests and limited testing criteria, the actual number of cases that exist is likely higher.

Case fatality rate: The death rate. This explains what percentage of COVID-19 cases are fatal.

Asymptomatic: Showing or having no symptoms.

Symptomatic: Actively showing symptoms. For COVID-19, common symptoms may include fever, cough and shortness of breath. Persons are thought to be more able to spread COVID-19 if they are experiencing symptoms. At this time, testing for COVID-19 is limited to those who have symptoms.

Isolation: Separates sick people with a contagious disease from people who are not sick.

Quarantine: Separated and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

Ventilator: A machine that helps a person breathe when they cannot breathe on their own.

Personal Protective Equipment (PPE): Items that protect the wearer from injury or infection. Examples of PPE includes goggles, face shields, masks, gowns, gloves, and booties (to cover shoes).

Respirator: A type of facemask that prevents the wearer from inhaling small particles, including viruses. A common type of respirator is an N95 mask.

Droplet: A type of disease transmission. The spray of droplets during coughing, sneezing, and speaking. Droplets are heavy and fall to the ground within a few feet. This type of transmission requires persons to be within close proximity for spread.

Airborne: A type of disease transmission. When viral particles linger in the air and travel long distances for an extended period of time. At this time, it is unknown if/how long the COVID-19 particles remain suspended in the air.

Fecal-Oral: A type of disease transmission. Transmission through feces (poop), which can then contaminate water or food if hygiene is lacking. Washing hands often is a way to reduce fecal-oral transmission. There is limited research that shows that coronaviruses may be present in feces. Good hand hygiene after going to the toilet, helping another person use the toilet, and changing diapers is recommended.

Community spread: Means people have been infected with the virus in an area, including some who are not sure how or where they became infected. COVID-19 seems to be spreading easily and sustainably in the community.

Social distancing: A public health measure put in place to limit people from gathering, with the goal of keeping people 6 feet apart from one another. Since it is thought that droplet spread is the primary way the COVID-19 is transmitted, social distancing will help to reduce the spread of disease.

Underlying conditions: Chronic diseases that are thought to make some persons more at risk for and for developing more severe COVID-19 disease. These diseases include, heart disease, high blood pressure, diabetes, kidney disease, obesity, asthma and other chronic lung problems.

Cleaning: The removal of visible foreign matter from a surface.

Disinfecting: Killing the bacteria and viruses on a surface. It is possible to be clean but not disinfected, and similarly disinfected but not clean.

FREQUENTLY ASKED QUESTIONS

What are coronaviruses?

A coronavirus is a type of common virus that can infect your respiratory tract. They can spread much like cold viruses. Almost everyone gets a coronavirus infection at least once in their life, most likely as a young child. They tend to circulate in the fall and winter.

What is the 2019 Novel Coronavirus (COVID-19)?

Sometimes a novel (meaning “new”) type of coronavirus emerges and begins infecting humans. The type of coronavirus is a new type of coronavirus and is infecting people for the first time, which means people do not have any immunity to it. It is causing an outbreak of respiratory illness.

What is the difference between 2019-nCoV and COVID-19?

These are two different names for the same virus. 2019-nCoV was the original name and this was changed by the World Health Organization on February 12, 2020 to COVID-19 (Coronavirus Disease 2019).

Am I at risk?

There are currently cases of COVID-19 in New Jersey. This is an evolving situation and latest updates are available on CDC’s Coronavirus Disease 2019 (COVID-19) website and the NJDOH website at www.nj.gov/health.

How many cases/deaths of COVID-19 are there in NJ?

Counts of new cases of and deaths related to COVID-19 in New Jersey are released one time a day and posted to the NJ COVID-19 Dashboard which may be found at either: covid19.nj.gov or nj.gov/health

I saw on social media that there are more cases and more people are sick than what is being reported.

NJDOH has an updated information on our website and various social media platforms, such as Facebook and Twitter. Be certain to get information from trusted and credible sources, such as CDC, NJDOH, your local health department and our call center. Misinformation exists, but all are encouraged to check credible sources for the most up-to-date information about COVID-19.

New Jersey posts updates on their website: www.nj.gov/health and covid.19.nj.gov

Why are case counts of COVID-19 from counties different from what the state is reporting?

NJDOH reports new and total COVID-19 cases and deaths one time per day at noon. This is the official case count. Laboratories continue to process specimens and are required to contact the local health departments with results. Sometimes they get results before they are reported for the NJDOH. In these cases, any reports of cases that come in after 12pm are included in the following day.

How do I safely interact with cashiers, store clerks and items on store shelves when I must purchase essentials?

Stay home if you are sick, except to get medical care. If you are not sick and must leave your home to purchase essentials – like food, water, or medication – maintain social distancing whenever possible by staying at least six feet from others. If this is not possible, for instance when purchasing an item from a cashier, you should limit contact, cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow, and avoid touching your eyes, mouth, and face. Wear a cloth face covering when in a public setting. Wash your hands with soap and water or an alcohol-based sanitizer thoroughly as soon as possible after the interaction.

A recent study showed that virus that causes COVID-19 survives on surfaces, but it seems to behave like other coronaviruses and may live on surfaces for a few hours or up to several days (depending on the surface): 72 hours on plastic and steel and up to 24 hours on cardboard. If you think a surface, such as items you purchased at a store, may be contaminated, clean it with simple disinfectant to kill the virus and protect yourself and others. Clean your hands with an alcohol-based sanitizer or wash them with soap and water. Avoid touching your eyes, mouth, or nose.

Is Coronavirus spread through food? Is it safe to eat fruits, vegetables, frozen food, or takeout?

Currently there is no evidence to support transmission of COVID-19 associated with food. Coronaviruses are generally thought to be spread from person-to-person through respiratory droplets. Researchers have found the COVID-19 virus can live on surfaces for a few hours or up to several days. However, there is likely very low risk of spread from food products or packaging that are shipped over a period of days or weeks at ambient (temperature around you), refrigerated, or frozen temperatures. You can minimize your risk of contracting COVID-19 by following basic food preparation practices like washing produce and other foods well with water, cooking food thoroughly, and washing your hands with soap and water before and after food preparation and before eating.

Is there any information about COVID-19 and persons with disabilities?

- People with disabilities may not be at greater risk for getting COVID-19. However, some people with disabilities, or long-term limitation in activity resulting from a condition or health problem, may be at a higher risk for infection.
- People with disabilities may experience higher rates of chronic health conditions.
- Adults with disabilities are three times more likely to have heart disease, stroke, diabetes, or cancer than adults without disabilities.
- People with disabilities may experience potential challenges to routine medical care and access.

Can I donate blood during the COVID-19 pandemic?

Yes, blood and plasma donations are needed. See below for specific information about routine blood donations and plasma donation.

Routine Blood donations: Blood donation is an essential service and is urgently needed. Donors should check with the local blood centers (American Red Cross Blood Services, New York Blood Center, Vitalant Blood Center, Miller-Keystone Blood Center) for specific requirements for donations. When going to donate blood, potential donors will be asked about their health, travel history - both internationally and within the U.S., if they've been tested for COVID-19, and if they've had close contact with someone who may have had COVID-19. Also, at the time of arrival at the blood center, donor staff may take the temperature of potential donors. The blood centers are asking that donations be on an appointment-only basis to maintain safe practices for the donor staff and to consistently follow all social distancing guidelines for donor safety.

Prospective donors should self-defer and **refrain from donating blood** if they have:

1. been diagnosed with or are suspected of having COVID-19. These individuals should refrain from donating at least 28 days after resolution of all symptoms after a diagnosis of COVID-19.
2. cared for, lived with, or otherwise had close contact with individuals diagnosed with or suspected of having COVID-19. These individuals should refrain from donating 28 days after the last possible close contact exposure to a person diagnosed with or are suspected of having COVID-19.
3. traveled either internationally, depending on the country, or within the U.S., depending on the state. These individuals should contact the local blood center for self-deferral requirements from donating.

Blood donations are **not** being screened for COVID-19. Negative COVID-19 test results are not required to donate blood. Do not donate blood if you are experiencing COVID-19 symptoms.

American Red Cross blood donation centers may be found: www.redcrossblood.org. Put in your zip code to locate nearest donation center.

Convalescent plasma donations: (plasma from individuals who tested positive for COVID-19 but are recovered) Prospective donors should contact the local blood centers (American Red Cross Blood Services, New York Blood Center, Vitalant Blood Center, Miller-Keystone Blood Center) or check their websites for the options and specific requirements for collection of convalescent plasma. Prospective donors can also check with their local hospital for availability.

Should I wear a facemask in public?

CDC is now recommending that the public wear a cloth face covering in public settings where other social distancing measures are difficult to maintain, especially in areas with community-transmission. CDC advises that the use of face covering to slow the spread of the virus and help people who have the virus and do not know it from transmitting it to others. ***Cloth face coverings are recommended for the public, not N95s or***

surgical masks, as those critical supplies should be reserved for health care workers and other first responders.

NOTE: Cloth face coverings should not be placed on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

CDC also recommends everyday preventive actions to prevent the spread of respiratory viruses, such as avoiding people who are sick, avoiding touching your eyes or nose and covering your cough or sneeze with a tissue. People who are sick should stay home and not go into public places.

I can't find/don't have a facemask. How can I make one?

It is not necessary to purchase a facemask. You can make a face covering out of fabric in your home. The CDC has instructions about how to make a face covering here: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/diy-cloth-face-coverings.html>

Why did the CDC change the recommendation from do not wear masks to wear face coverings?

The recommendations to wear a face covering in public are to protect those who may have the virus but do not know it from passing it to others. Wearing a face covering limits droplet spread when in public when practicing social distancing is difficult to maintain, especially in areas with community-transmission. Social distancing is still the best option to limit the spread of the virus to others.

What is the best type of fabric to use to make a face covering?

Use any fabric that you have at home to make a face covering. Be sure the fabric is breathable. A face covering is simply a physical barrier to another person's coughs and sneezes. Options include a t-shirt, hand towel, bandana, or scarf.

If this disease isn't airborne, then why do we need to wear face coverings in public?

Face coverings can block the droplets that carry the virus. The concept of wearing a face covering in public is important for two reasons:

1. To help block the spread of droplets from someone who has the virus and may not yet even have any symptoms and
2. In instances when social distancing is difficult to maintain, a face covering may also protect the wearer from these droplets

SIGNS/SYMPTOMS/TREATMENT/SPREAD

What are the signs and symptoms of 2019-nCoV (COVID-19)?

There is limited information at this time on the full range of clinical illness associated with this virus. However, it is causing symptoms consistent with a respiratory illness such as **fever, cough, and shortness of breath**. Symptoms have varied from mild to severe. Other symptoms may include a runny nose, sore throat, symptoms of upset stomach or generally feeling unwell. CDC believes at this time that symptoms of 2019 nCoV may appear in as few as two days or as long as 14 days after exposure.

It is allergy season. How do I know whether I have COVID-19 or allergies?

COVID-19 symptoms mainly include fever, dry cough, shortness of breath, and fatigue. There are less frequent symptoms that may include diarrhea, aches and pains, nasal congestion, and sore throat. Seasonal Allergy symptoms include runny nose, itchy eyes, mouth or skin, sneezing, and stuffy nose. There is almost never fever associated with seasonal allergies.

What does the term “Pre-symptomatic” mean?

Pre-symptomatic transmission is defined as transmission of a virus from an infected person (source patient) to a secondary patient before the source patient developed symptoms. The existence of pre-symptomatic or asymptomatic transmission during the current COVID-19 pandemic presents challenges for contact tracing.

How is 2019-nCoV (COVID-19) treated?

There is no specific treatment for this virus other than supportive care as needed.

Is there a vaccine?

There is no vaccine for the 2019 novel coronavirus and there are no medications approved to treat it.

How is 2019-nCoV (COVID-19) spread?

The virus is thought to spread mainly from person to person.

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes.

These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs. It is possible that you can also become infected by touching something which has been contaminated by the virus and then touching your eyes, nose or mouth.

Can someone spread the virus without being sick?

People are thought to be most contagious when they are the most symptomatic (the sickest). However, it is possible for the virus to spread from people who have minor or no symptoms. This is why it is now recommended to wear a face covering when out in public.

What is meant by “community spread”?

Community spread means people have been infected with the virus in an area, including some who are not sure how or where they became infected. COVID-19 seems to be spreading easily and sustainably in the community.

What are the main symptoms of COVID-19?

The main symptoms of COVID-19 are fever, dry cough, and shortness of breath. Sore throat, nausea and diarrhea may occur. Most patients with confirmed COVID-19 have developed fever and/or symptoms of acute respiratory illness (e.g. cough, difficulty breathing).

What does it mean to have “mild symptoms”?

Mild symptoms include fever, some aches and pains, dry cough. Persons with mild symptoms are recommended to stay home, rest, and recover. In general, testing is not needed in those with mild symptoms.

Who is at highest risk for severe COVID-19 illness?

Older adults and people who have severe underlying medical condition seem to be at higher risk for more serious COVID-19 illness. This includes:

- People 65 years and older
- People who live in a nursing home or long-term care facility
- People of any age with the following underlying medical conditions, particularly those that are not well controlled:
 - Heart disease
 - Diabetes
 - Lung disease

If you are a person with a serious underlying medical condition that can put you at higher risk, stay home and away from other people.

I have asthma, am I at risk for COVID-19?

People with asthma may be at higher risk of getting infected with COVID-19. The virus can affect your respiratory tract (nose, throat, lungs), cause an asthma attack and possibly lead to pneumonia and acute respiratory disease. Follow your asthma action plan, take your medication as prescribed, talk to your health care provider, insurer, pharmacist about creating an emergency supply of prescription medications, such as asthma inhalers. Avoid your asthma triggers and clean and disinfect frequently touched surfaces like tables, doorknobs, light switches, countertops, handles, desks, phones, keyboards, toilets, faucets, sinks and hand railings. Check out this link for more info: <https://www.cdc.gov/coronavirus/2019-ncov/specific-groups/asthma.html>

How easily does the virus spread?

The virus that causes COVID-19 seems to be spreading easily and sustainably in the community in some affected geographic areas. Community spread means people have been infected with the virus in an area, including some who are not sure how or where they became infected.

How long does the COVID-19 virus survive on surfaces?

Most recent studies show that the virus that causes COVID-19 can survive for up to 72 hours on plastic and steel and up to 24 hours on cardboard. If you think a surface may be infected, clean it with a disinfectant to kill the virus and protect yourself and others.

Will warm weather stop the outbreak of COVID-19?

It is not yet known whether weather and temperature impact the spread of COVID-19. Some other viruses, like the common cold and flu, spread more during cold weather months but that does not mean it is impossible to become sick with these viruses during other months. At this time, it is not known whether the spread of COVID-19 will decrease when weather becomes warmer. There is much more to learn about the transmissibility, severity, and other features associated with COVID-19 and investigations are ongoing.

What about the elderly and people with underlying medical conditions? Are they more at-risk?

The elderly and people of all ages with underlying health conditions seem to be at higher risk for more serious COVID-19 illness. Early data suggest older people are twice as likely to have serious COVID-19 illness. This may be because:

- As people age, their immune systems change, making it harder for their body to fight off diseases and infection.
- Many older adults are also more likely to have underlying health conditions that make it harder to cope with and recover from illness.

If you are at increased risk for COVID-19 complications due to age or a severe underlying medical condition, it is especially important for you to take actions to reduce your risk of exposure.

These people should also speak to their health care provider ahead of time to have a plan in place in the event they become sick. By talking to your health care provider ahead of time you can have a plan in the event that you do become ill if community spread of the virus occurs in your area. You can determine together what medications you may need to have on hand, make plans for any additional supportive care, or decide at what point the doctor would actually like for you to come into the office for an exam or at what point you should go to a hospital for medical support as needed.

On March 8, 2020, CDC recommended travelers, particularly those with underlying health issues, defer all cruise ship travel worldwide. CDC also recommends that older adults and travelers with underlying health issues avoid situations that put them at increased risk for more severe disease, including non-essential travel on long plane trips.

What is the difference between seasonal coronavirus and COVID-19?

Common human coronaviruses usually cause mild to moderate upper-respiratory tract illnesses, like the common cold. Most people get infected with a coronavirus at some point in their lives. Human coronaviruses are not the same as COVID-19. COVID-19 is a new coronavirus that has not been previously identified. This new virus is spread easily and there is community spread. This means that people have been infected with the virus in an area, including some who are not sure how or where they became infected.

If I get the pneumonia vaccine, will that protect me from COVID-19?

No. Vaccines against pneumonia, such as pneumococcal vaccine and the Haemophilus influenza type B (HiB) vaccine do not provide protection against COVID-19. Although vaccination against pneumonia and seasonal flu is recommended to protect your health in general.

I have heard that the loss of taste and smell are also symptoms of COVID-19. Why aren't these mentioned more?

There are anecdotal reports of altered sense of smell or a funny taste in the mouth, but there is no data on whether either of those could be predictive of someone having the disease.

COVID-19 and PREGNANCY

Are pregnant women more susceptible to infections, or at increased risk for severe illness, morbidity, or mortality with COVID-19, compared with the general public?

CDC does not have information from published scientific reports about susceptibility of pregnant women to COVID-19. Pregnant women experience physical changes which might make them more susceptible to viral respiratory infections, including COVID-19. Pregnant women also might be at risk for severe illness, morbidity, or mortality compared to the general population as observed in cases of other related coronavirus infections [including severe acute respiratory syndrome coronavirus (SARS-CoV) and Middle East respiratory syndrome coronavirus (MERS-CoV)] and other viral respiratory infections, such as influenza, during pregnancy.

Are pregnant women with COVID-19 at increased risk for adverse pregnancy outcomes?

CDC does not have information on adverse pregnancy outcomes in pregnant women with COVID-19. Pregnancy loss, including miscarriage and stillbirth, has been observed in cases of infection with other related coronaviruses [SARS-CoV and MERS-CoV] during pregnancy. High fevers during the first trimester of pregnancy can increase the risk of certain birth defects.

Are infants born to mothers with COVID-19 during pregnancy at increased risk for adverse outcomes?

Based on limited case reports, adverse infant outcomes (such as pre-term birth) have been reported among infants born to mothers positive for COVID-19 during pregnancy. However, it is not clear that these outcomes were related to maternal infection, and at this time the risk of adverse infant outcomes is not known. Given the limited data available related to COVID-19 during pregnancy, knowledge of adverse outcomes from other respiratory viral infections may provide some information. For example, other respiratory viral infections during pregnancy, such as influenza, have been associated with adverse neonatal outcomes, including low birth weight and preterm birth. Additionally, having a cold or influenza with high fever early in pregnancy may increase the risk of certain birth defects. Infants have been born preterm and/or small for gestational age to mothers with other coronavirus infections. SARS-CoV and MERS-CoV, during pregnancy.

Is there a risk that COVID-19 in a pregnant woman or neonate could have long-term effects on infant health and development that may require clinical support beyond infancy?

At this time, there is no information on long-term health effects on infants either with COVID-19, or those exposed to the virus that causes COVID-19 in utero. In general, prematurity and low birth weight are associated with adverse long-term health effects.

Is maternal illness with COVID-19 during lactation associated with potential risk to a breastfeeding infant?

Human-to-human transmission by close contact with a person with confirmed COVID-19 has been reported and is thought to occur mainly via respiratory droplets produced when a person with infection coughs or sneezes. To date, no evidence of virus has been found in the breast milk of women with COVID-19. No information is available on the transmission of the virus that causes COVID-19 through breast milk (i.e., whether infectious virus is present in the breast milk of an infected woman). In limited reports of lactating women with COVID-19, 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. Whether and how to start or continue breastfeeding should be determined by the mother in coordination with her family and health care providers.

A mother with confirmed COVID-19 or who is a symptomatic Person Under Investigation (PUI) should take all possible precautions to avoid spreading the virus to her infant, including washing her hands before touching the infant and wearing a face mask, if possible, while feeding at the breast. 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 feed the expressed milk to the infant.

COVID-19 and CHILDREN

Are children more susceptible to the virus that causes COVID-19 compared with the general population and how can infection be prevented?

No, there is no evidence that children are more susceptible. In fact, most confirmed cases of COVID-19 reported from China have occurred in adults. Infections in children have been reported, including in very young children. From limited information published from past Severe Acute Respiratory Syndrome coronavirus (SARS CoV) and Middle East respiratory syndrome coronavirus (MERS CoV) outbreaks, infection among children was relatively uncommon. Children should engage in usual preventive actions to avoid infection, including cleaning hands often using soap and water or alcohol-based hand sanitizer, avoiding people who are sick, and staying up to date on vaccinations, including influenza vaccine.

Does the illness differ in children compared with adults?

Limited reports of children with COVID-19 in China have described cold-like symptoms, such as fever, runny nose, and cough. Gastrointestinal symptoms, such as vomiting and diarrhea, have been reported in at least one child with COVID-19. These limited reports suggest that children with confirmed COVID-19 have generally presented with mild symptoms, and though severe complications (acute respiratory distress syndrome, septic shock) have been reported, they appear to be uncommon.

Are children at increased risk for severe illness or death from COVID-19 infection compared with adults?

There have been very few reports of medical outcomes for children with COVID-19 to date. Limited reports from China suggest that children with confirmed COVID-19 may present with mild symptoms and though severe complications, such as acute respiratory distress syndrome and septic shock, have been reported they appear to be uncommon. However, as with other respiratory illnesses, certain populations of children may be at increased risk of severe infections such as children with underlying health conditions.

My child's pediatrician is only open for emergencies. Why is the office closed for regular appointments?

Because of personal, practice, or community circumstances related to COVID-19, some providers may not be able to provide well-child visits, including provision of immunizations, for all patients in their practice. **If a practice can provide only limited well-child visits, healthcare providers are encouraged to prioritize newborn care and vaccination of infants and young children (through 24 months of age) when possible.**

DIAGNOSIS & TESTING

I have no symptoms of COVID-19 but I want to get tested. How do I get tested?

At this time, testing is prioritized for individuals who are sick with symptoms of fever, cough and shortness of breath where they need hospitalization, those who are close contacts of confirmed COVID-19 cases, and individuals who traveled to/from highly affected areas. If you do not have symptoms, testing is not recommended.

I have symptoms of respiratory illness. I am not sure if it is the flu or COVID-19. I do not have a primary care doctor.

If you have health insurance, you might consider going to an Urgent Care Center. There are Urgent Care Centers in many towns across the state. If you do not have health insurance, consider a federally qualified health center (FQHC). These are federally funded clinics and see anyone. Due to the ongoing COVID-19 pandemic, call the nearest FQHC to inquire about appointments. To find an FQHC near you:

<https://www.njpca.org/current-members/>

Will there be FEMA community-based COVID-19 testing available?

There are public testing locations across the state that are sponsored by FEMA, a Federal Emergency Management Agency. Testing is open to New Jersey residents only. You must bring identification to show proof of NJ residency (government issued photo ID). If a health care worker or first responder, bring appropriate ID. Parent/Guardian of an individual less than 18 years of age must be present. The public is encouraged to complete the self-assessment on [covid19.nj.gov](https://www.covid19.nj.gov) before going to get tested at a public site.

Testing will be staffed by NJ Department of Health, the New Jersey State police, and the New Jersey National Guard. These sites will be open until the end of May 2020. Testing is free and will be covered by the federal government or personal insurance company. If you have health insurance, please bring your healthcare/Medical insurance card, although this is not a requirement to be tested. Do not take fever-reducing medicine prior to testing (such as Tylenol or Advil) for at least 6 hours prior to arrival. Pre-registration is not required. Only symptomatic individuals will be tested. This means must have fever of at least 99.6°F and respiratory symptoms or shortness of breath. Those who do NOT meet the criteria will be turned away. If you have a prescription for testing, please bring it with you.

These are drive-thru FEMA community-based testing locations:

1. Bergen County Community College, 400 Paramus Road in Paramus (Bergen County).
2. PNC Art Center, 116 Garden State Parkway in Holmdel (Monmouth County).

SCHEDULE CHANGE: The FEMA testing sites will be open on alternate days. Please check website: [covid19.nj.gov](https://www.covid19.nj.gov) for the schedule of which FEMA testing site is open.

What should I expect at the FEMA community-based testing site?

Individuals will drive through a secured area and will remain in their vehicles throughout the entire testing process. Hours of operation are 8am-4pm. Be prepared for long wait times. No restrooms will be available. Bring water and other items to be comfortable while waiting. Expect a media presence. Every effort will be

made by managers of the sites to maintain patient privacy. Interpreters may be available to accommodate residents for whom English is not their primary language. If you are having a medical emergency, call 9-1-1. Do not report to a testing site or wait at a testing site. Testing sites are not emergency care facilities. Call 9-1-1 and tell the dispatcher about your symptoms. Do not take fever-reducing medicine prior to testing (such as Tylenol or Advil) for at least 6 hours prior to arrival. Testing includes a nasal swab. If you do not meet testing criteria, you will be turned away. Testing criteria include but are not limited to: fever of at least 99.6°F and respiratory symptoms (such as cough) or shortness of breath.

Why are you asking me to bring my health insurance card?

If you have health insurance, you are asked to bring it. Testing is covered by insurance. However, healthcare/medical insurance is not a requirement to be tested.

Is the FEMA community-based testing just for residents of a certain county?

No, the community-based testing is for New Jersey residents, regardless of where they may live in the state. Anyone planning to attend a community-based testing site, please bring proof of your New Jersey residency by bringing a government-issued photo ID. In addition to the two FEMA community-based testing sites, there is testing being offered in other counties. In most cases this testing is for county residents only. Contact your local health department for more information. At these county testing clinics, you must be symptomatic (fever, showing respiratory illness), have a doctor's prescription for testing, and an appointment. Some clinics are open, and others will be open soon. No clinics are testing asymptomatic persons.

How soon are test results coming back from the FEMA community-based testing sites?

Test results from FEMA community-based sites are being provided within 3-5 days after testing. You will be called with test results. You should have instructions on the paper provided to you at the testing site with more information.

I was tested at one of the FEMA sites. What should I do about work while I wait for test results?

As the instructions on the paper you received at the FEMA testing site says, you should:

- Inform your supervisor that you were tested for COVID-19 and note the date of testing
- If you are experiencing symptoms: Notify your supervisor and stay home
- If you are not experiencing symptoms: Request guidance from your supervisor on any potential work restrictions until you know your test results
- Avoid using public transportation, ridesharing, or taxis when commuting.

What should you do to protect yourself while you wait for test results from the FEMA community-based testing site?

- Wash hands often with soap and water for at least 20 seconds. Clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available.
- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Clean all “high-touch” surfaces every day. High-touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and remote controls.
- Cover coughs and sneezes.

How will I get my test results from the community-based testing?

Instructions about what should you do while you wait for test results and monitoring symptoms were provided when you were tested. You will be called at the number you provided on the registration form with your results. Due to privacy considerations, no voice message will be left on your phone. You must answer your phone directly to receive results. The results calling center will call to follow up two times.

I was tested at a location that was not my doctor’s office, how do I get my test results?

If the testing location required a doctor’s prescription, you should contact your physician for the test results. Test results are sent to the ordering physician.

Do not call the COVID-19 hotlines for your test results. They do not have test results.

I got my COVID-19 test results back and they told me I am positive. What should I do?

If you tested positive, you must stay at home and self-isolate. This means stay in a different bedroom from others in your home, and if possible, use a separate bathroom. You must self-isolate for at least 3 full days (or 72 hours) have passed since you had a fever without the use of fever-reducing medications AND other symptoms are greatly improved AND at least 7 days have passed since symptoms first started. If you live with other people and they were not tested, they should keep their distance from you. This includes not eating meals together and not sitting around the house together. Practice social distancing as much as is possible (stay at least 6 feet from each other).

I tested positive for COVID-19. What should I do about the other people in my home? Do they need to be tested?

If there are other people in the home, they should monitor themselves for COVID-19 symptoms.

- If they are **symptomatic** (sick; have COVID-19 symptoms), they should also self-isolate for 3 full days (or 72 hours) have passed since you had a fever without the use of fever-reducing medications AND other symptoms are greatly improved AND at least 7 days have passed since symptoms first started. If the symptoms are mild, they should recover at home. Testing may not be recommended.
- If the symptoms worsen and a medical evaluation is needed, contact your health care provider.

- If they are **asymptomatic** (not sick; have no COVID-19 symptoms), they should self-quarantine for 14 days AFTER any sick person in the household's self-isolation period ends. If the asymptomatic person develops symptoms, they should follow the self-isolation instructions above.

I tested negative for COVID-19 but still feel sick. What should I do?

If you test negative for COVID-19 but still have symptoms, it is likely you may have another respiratory virus. You should continue to self-isolate yourself from others, practice good hand hygiene, and clean and disinfect surfaces in the home. You should not return to work or school until 72 hours after your fever has ended without the use of fever-reducing medications and other symptoms have improved. If your symptoms worsen or if you do not get better after several days, you should call your health care provider.

I was tested at one of the FEMA drive-thru sites (Bergen Co College and PNC Arts Center only) and did not receive my results. Where can I get my results?

You should have received at least 2 phone calls to the number you provided to get your results. However if you have not received your test results and it is 7 days AFTER you got tested, contact the NJ Department of Health by email at covid.testing@doh.nj.gov. Do NOT call the public COVID-19 hotlines (1-800-962-1253 or 211) for test results. They do NOT have test results.

I went to a FEMA site for testing. I need to see/print the results. Can I do this?

Yes, if you went to a FEMA testing site for COVID-testing, you may use the patient portal at the commercial lab listed below to view/print your COVID-19 test results.

- Bergen County College: Quest Diagnostics
- PNC Arts Center (Monmouth): LabCorp

Q: Where/How do I obtain my COVID-19 test results?

A (LabCorp): Your COVID-19 sample was processed by LabCorp. To access your results, you can go to www.labcorp.com/results. Once you arrive at this website, you can Register for an account, or, if you already have an account with LabCorp, you can simply Sign In.

A (Quest): Your COVID-19 sample was processed by Quest Diagnostics. To access your test results, you can go to www.MyQuestdiagnostics.com. Once you arrive at this website, you can Create an Account, or, if you already have an account with Quest Diagnostics, you can simply Sign In.

Q: What information do I need to Create an Account?

A (LabCorp): You will need to enter the following information to create an account:

- First Name, Last Name
- Gender
- DOB
- Address (Street, City, State, Zip Code)
- Phone Number
- Email Address
- SSN

A (Quest): You will need to enter the following information to create an account:

- Full Name
- DOB
- Full Address (including city, state, zip code)
- Phone Number (10-digit)

Q: What information do I need to Sign Into an existing account?

A (LabCorp): You will need to enter the following information to sign into an existing account: your email and the password you created.

A (Quest): You will need to enter the following information to sign into an existing account: the username and password you created.

Q: When will my results be available?

A (LabCorp): Your results will be available on the LabCorp patient portal 2 business days after your results are in.

A (Quest): Your results will be available on the Quest patient portal 48 hours after your results are in.

I was tested at a county testing site, not one of the FEMA sites. The lab they used was BioReference (not LabCorp or Quest). How do I get those results?

If the testing site required you to get a prescription from your doctor/health care provider to be tested, your provider should contact you when your results are ready. However, individuals who were at testing sites that uses Bioreference to test specimens, can check results by visiting the Bioreference portal at: www.bioreference.com/patient-portal/

I was tested in Philadelphia at the FEMA site at Citizens Bank Park (CBP). How do I get my test results?

Persons who were tested at CBP site may obtain test results through Quest's online portal. The lab that processed your specimen was Quest. The City of Philadelphia does not provide paper reports of COVID-19 testing results, but they can be printed following the instructions for Quest labs above. NOTE: The Philly FEMA test site will close at the end of this week (April 10-11, 2020)

I was turned away from the public testing location. Why?

Depending on the public testing site, there are certain criteria that must be met in order for persons to get tested. At the Bergen Co and Monmouth Co test sites, the criteria includes testing only symptomatic persons with a fever of at least 99.6°F and respiratory symptoms or shortness of breath. Mildly ill patients are encouraged to stay home and contact their healthcare provider by phone for guidance about clinical management. Patients who have severe symptoms, such as difficulty breathing, should seek care immediately. Older patients and individuals who have underlying medical conditions or are immunocompromised should contact their physician early in the course of even mild illness.

I heard I can get tested for COVID-19 at a commercial laboratory (i.e., LabCorp and Quest)?

Commercial labs are offering COVID-19 testing to individuals who meet certain criteria. These tests must be ordered, and specimens collected by health care providers in their offices. Testing is not available at individual lab offices (i.e., local LabCorp or Quest labs). Do not go to a commercial lab and ask to be tested for COVID-19. Work with your health care provider to coordinate testing. All costs and fees associated with commercial laboratories is the responsibility of the patient. Not everyone who has a mild illness needs to be tested, and it may take several days to get test results. Most important thing is to stay home if you are ill. You do not need approval from public health officials to be tested by a commercial laboratory.

What is the process of getting COVID-19 testing at a commercial lab?

Contact your health care provider to coordinate testing. You cannot walk into a commercial lab, such as LabCorp or Quest and get tested on-site. You must have your health care provider order the test from the commercial lab and take specimens in his office.

If I get tested using a test kit from a commercial lab, how long will it take to get the results?

Since your health care provider is collecting and submitting the specimen, you should check with them.

Should “contacts of contacts” be tested?

No, being the contact of someone who has close contact with a person who has COVID-19 does not warrant testing. For example, you have a coworker whose family member is a confirmed case. You would not need to be tested. Despite coming into contact with the coworker, you did not have close contact with the person who actually has COVID-19. What you can do is monitor yourself for symptoms and practice good hand hygiene. If you notice that you have symptoms and feel that you need to be medically evaluated, contact your health care provider and stay home/do not go to public gatherings, work/school.

I was told by my employer that I need to get tested for COVID-19 since I was out of work after having respiratory symptoms (e.g., coughing, sneezing, influenza, bronchitis).

Sick people should remain home. Testing is only recommended for individuals with symptoms that require hospitalization or individuals who are close contacts of confirmed COVID-19 cases. Testing for individuals with mild symptoms is not recommended.

I was told that if I call out of work sick, I must get a doctor's note saying I do not have COVID-19 in order to return to work.

This requirement will increase those going to work sick. Calling out of work to rest and recover from a mild illness is common during this time of year. Testing for COVID-19 is not recommended as a way to allow people to go back to work.

I am not sick/have no symptoms but want to be tested for COVID-19.

At this time NJDOH is not recommending individuals with no symptoms be tested for COVID-19. If they develop symptoms, consistent with COVID-19 (cough, fever, shortness of breath that requires hospitalization), they should contact their health care provider.

Is there any cost to the patient for testing?

If testing is done at the NJDOH Public Health laboratories through the proper channels with proper approvals, there is no charge to the patient for the test itself. However, there may be a charge for the medical care provided and this may include a charge to collect the specimen. These costs would be the responsibility of the patient.

How is the novel coronavirus diagnosed?

Symptoms of COVID-19 are very similar to other common illnesses such as the flu or the common cold. Healthcare providers can tell whether you have symptoms that could be COVID-19 but can't make the diagnosis by physical exam. They may also ask about recent travel in the 14 days prior to becoming ill, or other potential contacts to those infected with COVID-19. If COVID-19 is suspected, the healthcare provider can take a swab to send off for testing. At this time, testing can only be performed at the state public health lab or at CDC, and testing is still limited.

CLINICAL MANAGEMENT and TREATMENT

What drugs are available to treat COVID-19?

There are no U.S. Food and Drug Administration (FDA)-approved drugs specifically for the treatment of patients with COVID-19.

What is the clinical management for COVID-19?

At present, clinical management includes infection prevention and control measures and supportive care, including supplementary oxygen and mechanical ventilatory support, when indicated. Patients with mild clinical presentation may not initially require hospitalization. The decision to monitor a patient in the inpatient or outpatient setting should be made on a case-by-case basis. Please note, the clinical management/care for a person who is exhibiting COVID-19 symptoms who has not been tested does not differ from the individual who tested positive for COVID-19.

NJ HEALTH FACILITY COMPLAINTS

I have a loved one in a long term care facility. I am concerned that they are not telling me about the number of infections (both residents and staff). What should I do?

If you asked the administration for information and are not getting any, you may consider calling the NJDOH Health Facility Complaint Line. You can make a complaint. See below for the process. Complaints may be made online, by phone, by fax or by mail.

https://www.state.nj.us/health/healthfacilities/file_complaint.shtml

File a Complaint about a Health Care Facility

Online

The Division takes [on-line complaints](#).

OR You can file a complaint by phone if you do not want to provide your name.

By Phone

Complaint Hotline: 1-800-792-9770

The 24-hour hotline handles consumer complaints and facility emergencies seven days a week. Patients, health care facility employees and other members of the public may file complaints about hospitals, ambulatory surgery centers, home health agencies, nursing homes, assisted living facilities, comprehensive personal care homes, adult medical day care, pediatric medical day facilities, and many other licensed acute- and long-term care facilities.

By FAX

You may choose to print and complete our [Consumer Resident/Patient Complaint Report Form \(AAS-60\)](#).

The FAX line operates 24-hours-a-day. A Division staff member will review your complaint during regular business hours.

When faxing, please include the following information:

- Your specific complaint
- Your name and mailing address including zip code
- Daytime phone number including area code

OR you may submit an anonymous complaint.

For Long Term Care Complaints including nursing homes and assisted living, please fax your information to 609-943-4977.

For Hospitals and outpatient facility complaints, please fax your information to 609- 943-3013.

By Mail

Please print out and Complete the [Consumer Resident/Patient Complaint Report Form \(AAS-60\)](#).

Mail complaints about nursing homes, assisted living, medical day care, comprehensive personal care homes, long-term care facilities, hospitals, ambulatory surgical centers, home health agencies and other ambulatory or long-term care facilities to:

New Jersey Department of Health
Division of Health Facility Survey and Field Operations, PO Box 367, Trenton, NJ 08625-0367

FUNERALS

Am I at risk if I go to a funeral or visitation service for someone who died of COVID-19?

There is currently no known risk associated with being in the same room at a funeral or visitation service with the body of someone who died of COVID-19. However, please keep in mind that the Governor has restricted gatherings during this time. There should be no service. Talk with your Funeral Director or Faith Leader about other ways to pay tribute to your loved one and delaying the service/wake/viewing.

Am I at risk if I touch someone who died of COVID-19 after they have passed away?

It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads. People should consider not touching the body of someone who has died of COVID-19. Older people and people of all ages with severe underlying health conditions are at higher risk of developing serious COVID-19 illness. There may be less of a chance of the virus spreading from certain types of touching, such as holding the hand or hugging after the body has been prepared for viewing. Other activities, such as kissing, washing, and shrouding should be avoided before, during, and after the body has been prepared, if possible. If washing the body or shrouding are important religious or cultural practices, families are encouraged to work with their community cultural and religious leaders and funeral home staff on how to reduce their exposure as much as possible. At a minimum, people conducting these activities should wear disposable gloves. If splashing of fluids is expected, additional personal protective equipment (PPE) may be required (such as disposable gown, face shield or goggles and facemask).

EXPOSURE

You mentioned contacts vs. close contacts. What is a “close contact?”

A close contact is defined as being within approximately 6 feet (2meters) of a COVID-19 case for a prolonged period of time (approximately 10 minutes or longer); close contact can occur while caring for, living with, visiting, or sharing a health care waiting area or room with a COVID-19 case

OR

Having direct contact with infectious secretions of a COVID-19 case (for example, being coughed on).

I am a close contact of a COVID-19 case. I was told to self-quarantine for 14 days. It is day 10 and I have no symptoms, can I go to work?

No. Symptoms may appear anywhere between 2-14 days. You should continue to self-isolate yourself and do not go to work/school or public places/gatherings.

I am a close contact of a confirmed COVID-19 case, but I am not sick and have no symptoms. Can I go to work? Can I get tested?

Close contacts of confirmed COVID-19 cases who do not have symptoms of fever, cough or difficulty breathing, should stay home and self-monitor yourself for symptoms for 14 days. If symptoms appear, you must stay home about be fever-free for at least 3 days (72 hours) without the use of fever-reducing medicine AND symptoms improve AND at least 7 days have passed since symptoms first started. Unless your symptoms get worse, then you more than likely do not need to be tested. Wash hands frequently and do not go to work/school or public gatherings while self-isolating.

I am a health care provider and was notified that I may have been exposed to a person with is a confirmed COVID-19 case. What should I do? I have mild symptoms.

Self-isolate at home for at least 3 days (72 hours) until you are fever-free without the use of fever reducing medicine, AND your symptoms have improved AND at least 7 days have passed since your symptoms first appeared. Stay in a separate bedroom from other persons who live in your house and use a separate bathroom (if possible). Contact your health care provider if your symptoms get worse. If your symptoms get worse, your health care provider may recommend COVID-19 testing. Wash hands frequently, do not go to work or attend public gatherings while self-isolating. If you go to a medical facility for testing, wear a face mask.

If a coworker is diagnosed with the new coronavirus, can I get it from the office environment?

If a co-worker had symptoms and you spent a prolonged period of time (10 minutes or more) or shared a meal with them while they had symptoms, you may be at an increased risk. In this case, you would be a close contact and you would need to self-quarantine for 14 days from the last time you had contact with this person. If you did not spend a prolonged period of time with the person or share a meal, the risk of them spreading the virus decreases a lot. If this is the case, then you are considered a casual contact and you should monitor yourself for symptoms and stay home if you are feeling sick. Be aware that there are also seasonal coronaviruses are spread like any other respiratory illness so precautions like hand hygiene, covering your mouth when coughing or sneezing, staying home when sick, and avoiding sick people are thing individuals can do to prevent illness.

I am planning a conference/mass gathering. Should I cancel the event because of COVID-19?

Yes, Governor Murphy banned all social gatherings of any size with his Executive Order to promote social distancing. Anyone who violates the emergency executive order will face criminal charges. This means no “corona” parties, weddings, or mass gatherings. Law enforcement agencies across the state are strictly enforcing the Executive Order.

I am an EMS worker. How can I protect myself from getting COVID-19?

Persons needing 9-1-1 services or transportation to the hospital have been told to let EMS and others know they have COVID-19 symptoms and to wear a mask. If they do not have a face mask, give them one as soon as possible. EMS workers can protect themselves by wearing the appropriate personal protective equipment and practicing good hand hygiene. Be sure that your rig is cleaned after transporting a suspect COVID-19 person or person with respiratory symptoms.

SCHOOLS

As per Governor Murphy, all schools are closed as of March 18, 2020. Schools will remain closed and the situation will be re-assessed on/after April 17, 2020.

PREVENTION

What is social distancing?

Social distancing is a public health measure taken to help slow down the spread of a contagious disease by restricting when and where people can gather. These measures can include limiting large groups of people coming together, closing buildings, and canceling events. For example, a college suspending classes and going to web-based learning would be a social distancing measure. People should begin to think about the various ways their lives could be disrupted by such measures and begin to make plans such as finding out about work-from-home policies if schools or childcare centers are closed.

Are there any specific medicines to prevent COVID-19?

To date, there are no specific medicines recommended to prevent COVID-19.

CLEANING

What type of office school/cleaning should be done if there is a case of coronavirus?

Special sanitizing processes beyond routine cleaning is not necessary or recommended to slow the spread of respiratory illness. Businesses should follow standard procedures for routine cleaning and disinfecting with an EPA-registered product. Typically, this means daily sanitizing surfaces and objects that are

frequently touched. Disposable wipes should be provided so that commonly used surfaces such as doorknobs, keyboards, desks, etc. can be wiped down by employees before each use.

What is the difference between cleaning and disinfecting?

- Cleaning is the removing of visible foreign matter from a surface.
- Disinfecting is killing the bacteria and viruses on a surface. It is possible to be clean but not disinfected, and similarly disinfected but not clean.

People should follow the instructions on the label of cleaning products to ensure that disinfection is done properly. Some products must sit on the surface for a number of minutes before being wiped away in order to be effective.

My facility houses people overnight and there may have been ill persons. What is the best guidance for cleaning?

It is recommended to close off areas used by anyone who is ill or has symptoms and wait as long as practical before beginning cleaning and disinfection to minimize potential for exposure to respiratory droplets. Open outside doors and windows to increase air circulation in the area. If possible, wait up to 24 hours before beginning cleaning and disinfection. In areas where ill persons have visited or used, continue routine cleaning and disinfection in the guidance below.

How to Clean and Disinfect Surfaces and Linens:

Surfaces

- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection
- For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most common EPA-registered household disinfectants should be effective.

Linens, Clothing and Other items that go in the Laundry

- Do not shake dirty laundry; this minimizes the possibility of dispersing the virus through the air.
- Wash items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill person can be washed with other people's items.
- Clean and disinfect hampers or other carts for transporting laundry.

Are there any special recommendations for cleaning staff?

Cleaning staff should wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash. Gloves should be removed after cleaning a room or area occupied by ill persons. Clean hands immediately after gloves. Be sure to clean hands after removing gloves.

Additional personal protective equipment (PPE) might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash (i.e., gowns, gloves, and eye protection). Employers should ensure that employees are trained to put on and safely remove PPE, if it is needed. Cleaning staff and others should clean hands often, including immediately after removing gloves and after contact with an ill person, by washing hands with soap and water for 20 second. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used.

RESPIRATORY and HAND HYGIENE

What is respiratory hygiene?

Respiratory hygiene refers to ways that we can prevent the spread of germs via the respiratory route of infection. This includes coughing and sneezing into a tissue and then properly disposing of the tissue. You can also cough or sneeze into your sleeve. For more information about respiratory hygiene see the CDC website at <https://www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm>

What is hand hygiene?

Hand hygiene refers to washing hands often with soap and water for 20 seconds, especially after changing diapers, touching pets and commonly touched surfaces. Soap does not need to be antibacterial; any kind of hand soap is fine to use. If soap and water are not available, use an alcohol-based hand sanitizer that is at least 60% alcohol content. Avoid touching eyes, nose and mouth with unwashed hands. To learn more about hand hygiene see the CDC website at <https://www.cdc.gov/handwashing/when-how-handwashing.html>

ISOLATION and QUARANTINE

What is the difference between isolation and quarantine?

Isolation separates sick people with a contagious disease from people who are not sick.

- Isolation separates and restricts the movement of sick people so they can't spread disease to healthy people.
- Isolation is a routine procedure in hospitals and healthcare facilities.
- Isolation is voluntary, but in a public health emergency, officials have the authority to isolate people who are sick.

Quarantine separates and restricts the movement of people who were exposed to a contagious disease to see if they become sick.

- Quarantined people may or may not become sick.
- Quarantined people may stay at home so they don't spread disease to healthy people.
- If you are quarantined and you become ill, you can seek medical treatment from a healthcare provider.

- Quarantine is voluntary, but in a public health emergency, officials have the authority to quarantine people who have been exposed to an infectious disease

What is self-isolation?

This is a public health strategy where individuals who are sick and exposed to a confirmed COVID-19 case are separated from well persons. They should not go to work/school or other public places. For possible COVID-19 exposures, self-monitoring is 14 days. People who are asked to self-isolate should stay in a separate bedroom and, if possible, use a separate bathroom and have minimal contact with other persons and pets in the home.

What should I do while I am self-isolation?

It is important that anyone who is self-isolation should monitor their symptoms in case they get worse. It is recommended that people take their temperature with a thermometer at least twice per day. If the symptoms become worse or do not improve AND you feel that you need a medical evaluation, call your health care provider. If you are directed to go to a medical facility, be sure to call ahead and wear a face mask.

I was told to self-isolate, since I was sick but not able to get tested. When can I resume my normal life and discontinue self-isolation?

Persons with respiratory symptoms who were directed to care for themselves at home may discontinue home isolation when you meet all three criteria listed below:

- You are fever-free for 72 hours (or 3 full days of no fever without the use of fever reducing medicine)
AND
- Other symptoms have improved (when your cough or shortness of breath have improved)
AND
- At least 7 days have passed since your symptoms first appeared.

I was tested for COVID-19 and had a lab confirmation of my illness. When may I discontinue self-isolation?

- You are fever-free for 72 hours (or 3 full days of no fever without the use of fever reducing medicine)
AND
- Other symptoms have improved (when your cough or shortness of breath have improved)
AND
- At least 7 days have passed since your symptoms first appeared.

Should household members of people who are self-isolating also stay at home?

Household members of confirmed COVID-19 cases should follow the instructions below.

Household contacts of people who are lab confirmed cases of COVID-19 persons who are experiencing symptoms (**symptomatic**):

- You are fever-free for 72 hours (or 3 full days of no fever without the use of fever reducing medicine)
AND
- Other symptoms have improved (when your cough or shortness of breath have improved)
AND
- At least 7 days have passed since your symptoms first appeared.

Household contacts of people who are lab confirmed cases of COVID-19 persons who have no symptoms (**asymptomatic**):

- Self-quarantine for 14 days **after** the self-isolation period ends for the person who is the confirmed COVID-19 case.

Is there any support being provided by the state for those who are self-isolating?

The state does not provide support for basic needs when a person is advised to self-isolating. All individuals are encouraged to have an emergency supply of needed items including food, water, medications, pet supplies, baby supplies, etc. in the home to last for at least two weeks or 14 days in the event they need to remain in the home and restrict their movement.

What is the difference between self-isolation and self-monitoring (also known as self-observation)?

- Self-isolation is for persons who are sick/have symptoms.
- Self-monitoring/self-observation is for persons who are not sick/have no symptoms.

What is self-monitoring (also known as self-observation)?

Self-monitoring is when an individual is not sick/has no symptoms but may have been exposed to a close contact. Persons who are self-monitoring should monitor themselves for symptoms.

BUSINESSES

I know that K-12 public, private and parochial schools and universities are to close on Wednesday, March 18, 2020, but what about childcare/daycare centers?

Childcare/Daycare centers should make the call to close themselves. Centers should contact the Department of Children and Families (DCF), who licenses childcare/daycare centers in NJ, for guidance and work with their local health department to assess level of risk in the community. Health Departments do not license childcare/daycare centers.

I am a family dentist. Should I close my office?

The American Dental Association is asking that all dental offices stop doing elective procedures for 3 weeks. This means practices should be doing emergency care. Dentists should not send emergency patients to the local hospital emergency department. Dentists have a professional responsibility to care for their patients in an emergency.

I am a small business owner, should I close my business?

Unless your business is considered “essential” you are required to close. The Governor signed an Executive Order which orders all non-essential businesses to close by 9pm on March 21, 2020.

My businesses needs to remain open during COVID-19. What can I do keep my employees safe?

NOTE: Effective March 21, 2020 at 9pm, only “essential” businesses are permitted to remain open.

- **Practice good hand hygiene:** stop handshaking, clean hands at the door and throughout the day, clean surfaces like doorknobs, tables, desks, handrails regularly (and have employees clean their phones, keyboards, and any other high-touch surfaces)
- **Limit face-to-face meetings and travel:** using videoconferencing when possible, limit meetings to smaller number of attendees, postpone travel
- **Avoid crowding:** stagger customer flow, require appointments, use online transactions when possible
- **Handle food carefully:** limit food sharing, ensure food handlers/cafeteria workers practice good hand hygiene
- **Have employees stay home if:** they are feeling sick or if they have a sick family member in their home.

I am a small business owner and need help during this crisis. Who can I talk with about that?

Call the Business Helpline at 1-800-JERSEY-7 or cv.business.nj.gov

How do I access unemployment benefits during the COVID-19 outbreak?

Go to the NJ Department of Labor & Workforce Development: <https://www.nj.gov/labor/worker-protections/earnedsick/covid.shtml>

How do I know what benefits I am entitled to if I was laid-off or if I am unable to work due to school/daycare or daycare closed?

The Department of Labor & Workforce Development has a printable guideline outlining COVID-19 related benefits for persons employed in NJ. <https://www.nj.gov/labor/assets/PDFs/COVID-19%20SCENARIOS.pdf>

PETS and ANIMALS

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

To date, CDC is aware of a very small number of pets or other animals reported to be infected with 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. On April 5, USDA reported the first confirmed case of COVID-19 infection in an animal in the United States. This case is the first confirmed infection in a tiger in the world. This is also the first animal reported to be sick with a confirmed COVID-19 infection in the world. It's important to remember that dogs and cats have their coronaviruses, which cannot spread to people. Further studies are needed to understand if and how different animals could be affected by COVID-19 and we are continuing to learn more every day. CDC continues to recommend that people sick with COVID-19 isolate themselves from other people and animals, including pets, during their illness until we know more about how this virus affects animals.

I heard there is a coronavirus vaccine for dogs. Should I talk to my vet about getting my dog vaccinated to protect them against COVID-19?

The canine corona vaccines available in some global markets are intended to protect against intestinal coronavirus infection and are NOT licensed for protection against respiratory infections. Veterinarians should NOT use such vaccines in the face of the current outbreak thinking that there may be some form of cross-protection against COVID-a9. There is **absolutely no evidence** that vaccinating dogs with commercially available vaccines will provide cross-protection against the infection by COVID-19, since the intestinal and respiratory viruses are distinctly different types of coronavirus. No vaccines are currently available in any market for respiratory coronavirus infection in the dog. Additionally, canine intestinal coronavirus can cause intestinal disease (diarrhea) and make parvovirus infection worse. Canine respiratory coronavirus can be involved in cases of "kennel cough" (respiratory disease usually seen in shelter situations). These are both different from the coronavirus that causes COVID-19. Currently there is no evidence that companion animals can spread COVID-19.

Should I avoid contact with pets or other animals if I am sick with COVID-19?

You should restrict contact with pets and other animals while you are sick with COVID-19, just like you would around other people. Although there have not been reports of pets or other animals becoming 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 are sick with COVID-19, avoid contact with your pet, including petting, snuggling, being kissed or licked, and sharing food. If you must care for your pet or be around animals while you are sick, wash your hands before and after you interact with pets and wear a facemask.

Is it true that a dog is infected with the virus that causes COVID-19?

- On 28 February, the Hong Kong Agriculture, Fisheries and Conservation Department (AFCD) reported that a pet dog that had contact with a person infected with COVID-19 tested “weak positive to COVID-19 ” through nose and mouth samples.
 - AFCD reports that this dog does not have any symptoms of illness and the dog is currently being monitored in quarantine.
 - Repeat testing of this dog will be conducted during quarantine to help determine if the dog has really been infected or not.
 - CDC is working with human and animal health partners to monitor this situation and will continue to provide updates as information becomes available.
 - *AFCD official report available at <https://www.info.gov.hk/gia/general/202002/28/P2020022800013.htm>*

TRAVEL

On March 28, due to extensive community transmission of COVID-19 in the area, CDC urged residents of New York, New Jersey, and Connecticut to refrain from non-essential domestic travel for 14 days effective immediately. **Due to the rapidly changing situation, travel recommendations and countries with various levels of travel alerts are subject to frequent updates. Please refer callers to the CDC website Coronavirus Disease 2019 Information for Travel page at <https://www.cdc.gov/coronavirus/2019-ncov/travelers/index.html>** or the most current information.

Travel to Alaska, Florida, and Hawaii

Governors from Alaska, Florida, and Hawaii are asking travelers from states with high cases of COVID-19 to not visit. This includes New York, New Jersey or Connecticut. Governors from these states used orders mandating a 14-day quarantine upon arrival for all visitors and residents arriving at state airports.

Alaska: Travelers arriving at state airports will be required to fill out a mandatory State of Alaska Travel Declaration Form and identify their “designated quarantine location”, which would be home for residents and a hotel room or rented lodging for visitors. The state’s order requires travelers to go straight to their quarantine location from the airport and remain there for 14 days, or for the duration of their stay if it’s shorter. People in self-isolation can leave only for medical emergencies or to seek medical care, and they are not allowed to have visitors other than a health care provider. Violators in Alaska will face a maximum \$25,000 fine or up to one year in jail, according to the state.

Florida: Requires people arriving on flights from the New York Tri-State area – NY, NJ, and CT -to quarantine for 14 days or for the length of their stay if that time is shorter. The mandate makes exceptions for airline employees, military, health and emergency personnel. Those who self-quarantine are responsible for the costs of isolation including transportation, food, lodging and medical care, according to the state. Anyone who violates the quarantine order in Florida is subject to a second-degree misdemeanor punishable by a 60-day jail sentence and up to a \$500 fine, the executive order says.

Hawaii: Mandates all visitors and residents arriving at airports in the state to self-quarantine for 14 days.

According to the state, travelers will be required to complete a Hawaii Department of Agriculture form on their flight and present it to checkpoint staff after landing. The travelers must then go straight to

the "designated quarantine location" that they identify on the form and remain there for 14 days or the length of their stay if it is shorter.

Those in self-isolation can leave the location only for medical emergencies or to seek medical care. They also can't have visitors unless it's a health care provider. In Hawaii, violating the order is a misdemeanor punishable by a maximum \$5,000 fine and up to one year in jail, according to the state.

PANDEMIC PREPAREDNESS

What is a pandemic?

A pandemic is a widespread infectious disease, that sickens a large number of people worldwide.

What are some things we should be doing now to prepare for COVID-19 becoming a pandemic?

Some things we can be doing before a pandemic begins can include:

- Stocking up on a two-week supply of food and water
- Periodically check your regular prescription drugs to ensure a continuous supply in your home
- Have non-prescription drugs and other health supplies on hand including pain relievers/fever reducing medications, stomach remedies, cough and cold medicines, fluids with electrolytes, and vitamins, tissues.
- Stock up on household supplies such as toilet paper, hand soap, paper towels, garbage bags, cleaning supplies, etc.
- Get copies and maintain electronic versions of health records from doctors, hospitals pharmacies and other sources and store them for personal reference.
- Talk with family members and loved ones about how they would be cared for if they got sick, or what would be needed for them in your home.
- Have pet foods and supplies.
- Stock up on baby care items
- Plan for extended school and day care closures
- Talk to your employer about telecommuting opportunities in the event that movement of people is restricted
- Plan for a sick room in the home. Designate one room that would work best, usually a bedroom with its own bathroom that no one else will use. If someone in the home becomes ill, keep them in the sick room away from others.

MISCELLANEOUS

****Safety Issue** – there have been social media posts regarding individuals going door to door claiming to be from the CDC. The CDC is not deploying teams of people to go door to door to conduct surveillance. People should be warned to not let them in their homes or to speak with them. They are imposters. Contact local law enforcement if this activity is reported in your municipality.

Is it true that taking ibuprofen to ease COVID-19 symptoms could actually make your symptoms worse?

No, the World Health Organization and other infectious disease experts say that there is no good scientific evidence establishing a link between ibuprofen and worsening of COVID-19.

Is homemade hand sanitizer effective?

The CDC does not advise making hand sanitizer at home. The CDC recommends using commercially available hand sanitizer made with at least 60% alcohol.

Does taking a hot bath prevent COVID-19?

No, taking a hot bath will not prevent you from getting COVID-19. The best way to protect yourself against COVID-19 is by frequently washing your hands. By doing this you eliminate viruses that may be on your hands and avoid infection that could occur if you touch your eyes, mouth, and nose.

Are antibiotics effective in preventing and treating COVID-19?

No, antibiotics do not work against viruses, only bacteria. The new coronavirus (COVID-19) is a virus and antibiotics should not be used as a means of prevention or treatment. However, if you are hospitalized for the COVID-19, you may receive antibiotics since bacterial co-infection is possible.

I heard that the coronavirus remains in the throat for 4 days, causing sore throat and coughing before it reaches the lungs. I was told to drink a lot of water and that gargling with warm water and salt or vinegar eliminates the virus.

While it is true that coronavirus can cause a sore throat and gargling with warm water make it feel better it has no direct effect on the virus.

Can eating garlic help prevent COVID-19 infection?

Garlic is a healthy food that may have some antimicrobial properties. However, there is no evidence from the current outbreak that eating garlic has protected people from getting COVID-19.

Can regularly rinsing your nose with saline help prevent COVID-19 infection?

There is no evidence that regularly rinsing the nose with saline has protected people from COVID-19 infection. There is some limited evidence that shows regularly rinsing the nose with saline can help people recover more quickly from the common cold. However, regularly rinsing the nose with saline has not been shown to prevent respiratory infections.

Is it safe to go to the gym? Can I get COVID-19 from going to the gym? [NOTE: as of 3/16/20 at 8pm, all gyms and fitness centers should be closed]

Every person must assess their personal health. Individuals who have underlying health conditions should weigh going to the gym and staying away from crowds where they may possibly be exposed to someone with COVID-19. If you do decide to go to the gym, be sure to practice good hand hygiene and stay away from sick people.

Can I get COVID-19 from swimming in a swimming pool?

COVID-19 is mainly spread from person-to-person. There is no evidence that the virus spreads to human through the use of pools and hot tubs, as long as they are properly maintained and disinfected (e.g., with chlorine and bromine).

Can the COVID-19 virus spread through sewerage systems?

At this time the transmission of the virus that causes COVID-19 through sewerage systems is thought to be low. Although transmission of COVID-19 through sewage may be possible, there is no evidence to date that this has occurred.

Can the COVID-19 virus spread through drinking water?

The virus that causes COVID-19 has not been detected in drinking water. Conventional water treatment methods that use filtration and disinfection, such as those in most municipal drinking water systems, should remove or inactivate the virus that causes COVID-19.

Is the COVID-19 virus found in feces (poop)?

The virus that causes COVID-19 has been detected in the feces of some patients diagnosed with COVID-19. The amount of virus released from the body (shed) in stool, how long the virus is shed, and whether the virus in the stool is infectious are not known. There have been no reports of fecal-oral transmission of COVID-19 to date.

If I had COVID-19 and recovered, am I immune?

It is unknown at this time if a person is immune to COVID-19 if they had it and recovered.

Can COVID-19 be transmitted through mosquito bites?

To date there has been no information nor evidence to suggest that COVID-19 could be transmitted by mosquitoes. COVID is spread primarily through droplets generated when an infected person coughs or sneezes.

Can spraying alcohol or chlorine over your body kill COVID-19?

Spraying alcohol or chlorine all over your body will not kill viruses that have already entered the body. Spraying these substances can be harmful to clothes or mucous membranes (e.g., eyes, mouth). Both alcohol and chlorine can be used to disinfect surfaces, as recommended by the manufacturer.

Is it safe to eat Chinese food?

Here in New Jersey, eating Chinese food does not create any additional risk to being infected with this virus.

Is it safe to receive packages from China?

Coronaviruses do not live very long on surfaces, so it is considered to be very low risk to become infected by handling a package from China. There have been no evidence to support the spread of the virus through imported goods.

Should I avoid taking communion, drinking from the chalice, or offering a sign of peace at church?

Various dioceses in New Jersey are making statements regarding some practices that occur during Mass. Since the Governor instituted the no gathering Executive Order, many religious services have stopped holding services. Many now offer on-line or streamed services. The faithful should contact their clergy officials with any specific questions, but in general they are recommending the same precautions that would be followed to prevent the flu. Use normal good judgement. If you are sick, stay home. Mass is broadcast on multiple television channels and the sick can make a “spiritual communion” until they return to good health. At Mass, no member of the faithful is obliged to 1. shake hands at the sign of peace, 2. To receive the wine from the chalice, or 3. To receive the host on the tongue unless that is your preference. Deacon, priests, and eucharistic ministers should wash their hands or use hand sanitizer before and after distributing communion.

This is the time of year for celebrating major religious holidays: Passover, Easter, and Ramadan. What is the recommendation for celebrating?

The holidays should still be celebrated, but there may be no public gatherings. You can still celebrate with your family at home, but not with those who do not live in your home. Social distancing should still be practiced. Celebrations for these holidays may look different this year due to the pandemic.

I am a diabetic and would like to receive an emergency diabetic kit. Can you provide info?

The Diabetes Foundation, Inc, is providing emergency diabetes kits (while supplies last). The kits include the most used diabetes supplies, such as glucose meter, test strips, lancing device and lancets, ketone strips, alcohol swabs, glucose tabs and more. To get a free kit, go to: diabetesfoundationinc.org or call 973-849-5234.

NON-HEALTH RESOURCES

To provide feedback about New Jersey Transit during the COVID-19 response, go to the COVID19.nj.gov website and search NJ Transit.

To report a Businesses (Employer, Organization or Entity) in Violation of Non-essential Business Closure (Executive Order 107)

<https://covid19.nj.gov/violation>

Price Gouging?

Excessive price increases are defined as **price increases that are more than 10 percent higher** than the price at which merchandise was sold during the normal course of business prior to the state of emergency. The Division of Consumer Affairs has set up a hotline for price gouging complaints related to coronavirus. Please call 973-504-6240 to report any price gouging concerns.

Unlawful Hoarding of Medical Supplies

To anonymously report unlawful hoarding of medical supplies and/or price gouging of medical supplies, call 866-720-5721 or disaster@leo.gov

Rumor Control

Please visit the FEMA Rumor Control website to distinguish between rumors and facts regarding the response to COVID-19. Rumors can easily circulate within communities during a crisis, stay informed with updated myths and facts related to the federal response. <https://www.fema.gov/coronavirus-rumor-control>. The NJ Office of Homeland Security also has a webpage to help the public distinguish between facts and rumors/disinformation regarding COVID-19. The page will be updated as more information becomes available. Go to: <https://www.njhomelandsecurity.gov/covid19>

I know New Jersey has an Earned Sick Leave Law. Where can I get more info about this?

<https://www.nj.gov/labor/worker-protections/earnedsick/covid.shtml>

I need to renew my driver's license/registration/inspection. What is being done about that?

Visit the NJ Motor Vehicle Commission for more information:
<https://www.state.nj.us/mvc/press/archives/2020/031320.htm>

PPE Donation

NJ State Police is seeking donations of PPE. Anyone willing to donate equipment is asked to email: ppedonations@njp.org

File a Complaint against a Business

<https://www.njconsumeraffairs.gov/Pages/Consumer-Complaints.aspx>
AskConsumerAffairs@dca.lps.state.nj.us

How long with the Motor Vehicle Agencies be closed?

All NJ Motor Vehicle Commission agencies, road testing, and inspection facilities will remain closed through April 12, 2020.

Food Assistance and SNAP

Individuals who receive NJ Supplemental Nutrition Assistance Program (NJ SNAP) benefits will receive an extra benefit payment and benefits will be higher in April to help address critical food needs related to the COVID-19 pandemic. To see if you are eligible for food assistance and to apply for NJ SNAP, go to the website: www.NJHelps.org

MENTAL HEALTH SERVICES

I am feeling stressed about the novel coronavirus and would like to talk with a mental health professional. Who can I call?

The NJ Department of Human Services operates a toll free “warm line” which is a resource for people seeking mental health service. The warm line is activated during events that impact the mental health of New Jersey residents. The warm line is available 24 hours and has language access; (877) 294-HELP (4357). NOTE: The “warm line” does not replace 911 and is not used to report emergencies.

Mental Health Hotline: 866-202-4357

NJ Hopeline (Peer Support & Suicide Prevention Hotline): 1-855-654-6735

@NJVET@VET: 1-866-838-7654

Other NJ Hotlines

Child Abuse/Neglect Hotline: 1-877-NJ-ABUSE (1-877-652-2873)

Domestic Violence Hotline: 1-800-572-SAFE (1-800-572-7233)

Family Helpline: 1-800-THE-KIDS (1-800-843-5437)

What are things I can do to support myself and the people I care for during this stressful time?

- Take breaks from watching, reading, or listening to news stories, including social media. Hearing about the pandemic repeatedly can be upsetting.
- Take care of your body. Take deep breaths, stretch, or meditate. Try to eat healthy, well-balanced meals, exercise regularly, get plenty of sleep, and avoid alcohol and drugs.
- Make time to unwind. Try to do some other activities you enjoy.
- Connect with others through calls (audio or video), instant messaging, email, letters, or other forms of communication, even if you cannot be together in person.
- Talk with people you trust about your concerns and how you are feeling.

STIGMA and MISINFORMATION

Know the facts about COVID-19 and help prevent the spread of rumors:

- Fight stigma by supporting people who are coming back to school or work after completing their isolation period for COVID-19 exposure or illness.
- Someone who has completed their isolation or met the requirements to discontinue infection control measures does not pose a risk of spreading COVID-19.
- People of Asian descent, including Chinese Americans, are not more likely to get coronavirus than anyone else. Let people know that being of Asian descent does not increase the chance of getting or spreading COVID-19.
- Viruses cannot target people from specific populations, ethnicities, or racial backgrounds.

EXECUTIVE ORDERS (signed during pandemic response)

Executive Order 103: Declares a public health and a state of emergency across all 21 counties in New Jersey, allowing state agencies and departments to utilize state resources to assist affected communities.
<https://nj.gov/governor/news/news/562020/approved/20200309b.shtml>

Executive Order 104: Implements aggressive social distancing measures to mitigate further spread of COVID-19. This order closed all public and private preschool, elementary, and secondary schools, as well as institutions of higher education. Order also mandates all non-essential retail, recreation and entertainment businesses cease daily operations from 8am-5pm. Restaurants may only offer delivery and/or takeout. Order also specifies a limit to gatherings to 50 people or fewer.
<https://nj.gov/governor/news/news/562020/approved/20200316c.shtml>

Executive Order 105: Implements changes to upcoming elections to further mitigate the spread of COVID-19 and ensure that voters can exercise their right to vote without risking their health and safety.
<https://nj.gov/governor/news/news/562020/approved/20200319a.shtml>

Executive Order 106: Protects residents from eviction for renters and foreclosure for homeowners.

<https://nj.gov/governor/news/news/562020/approved/20200319c.shtml>

Executive Order 107: Issues a statewide stay at home order and closure of all non-essential retail businesses, and orders businesses to allow employees to telework (where practical) may be accessed here:

<https://nj.gov/governor/news/news/562020/approved/20200320j.shtml>. This order was updated to identify additional businesses as essential:

<https://nj.gov/governor/news/news/562020/approved/20200324b.shtml>

Executive Order 108: Invalidates any county or municipal restriction that might conflict with any of the provisions in Executive Order 107. This includes permitting municipalities and counties to restrict online marketplaces for arranging and offering lodging. This Administrative Order gives municipalities and counties the ability to impose additional restrictions on the ability of hotels, motels, guest houses, or private residences, or parts thereof, to accept new transient guests or seasonal tenants after 8:00 p.m. on Sunday, April 5. <https://www.nj.gov/governor/news/news/562020/20200320j.shtml> and

<https://nj.gov/governor/news/news/562020/approved/20200404a.shtml>

Executive Order 109: Suspends all elective surgeries, invasive procedures to preserve essential equipment and hospital capacity. <https://nj.gov/governor/news/news/562020/approved/20200323b.shtml>

Executive Order 110: Directs all child care centers to certify that they will serve as emergency child care centers by March 27, 2020. Those who do not certify as emergency child care centers must close by April 1, 2020 and remain closed through the school closure period.

<https://nj.gov/governor/news/news/562020/approved/20200325a.shtml>

Executive Order 111: Requires all designated health care facilities to report their daily number of ventilators, bed capacity and personal protective equipment (PPE) inventory to the NJ Office of Emergency Management and the NJ Department of Health.

<https://nj.gov/governor/news/news/562020/approved/20200328d.shtml>

Executive Order 112: Removes barriers to health care professionals joining NJ's COVID-19 response and provides protections for front line health care responders. This includes temporarily re-activating licenses of recently retired health care professionals and granting temporary licenses to doctors licensed in foreign countries. Also permits certain health care providers to perform acts outside of their ordinary scope of practice. <https://nj.gov/governor/news/news/562020/approved/20200401b.shtml>

Executive Order 113: Authorizes the New Jersey State Director of Emergency Management to use the Governor's full authority under the Disaster Control Act to commandeer personal services and/or real or

personal property. This includes medical supplies and equipment from private companies and institutions in order to help meet the continued need for ventilators and Personal Protective Equipment (PPE) in the State in hospitals, health care facilities, and emergency response agencies due to the ongoing outbreak of COVID-19. <https://nj.gov/governor/news/news/562020/approved/20200402c.shtml>

Executive Order 114: Orders that the U.S. and New Jersey flags be flown at half-staff at all state buildings and facilities indefinitely starting Friday, April 3rd, in recognition and mourning of all those who have lost their lives and been affected by COVID-19.

<https://nj.gov/governor/news/news/562020/approved/20200403a.shtml>

Executive Order 115: Allows retirees to return to State and local government employment without impacting their retirement pensions and removing restrictions on law enforcement's ability to temporarily supplement their ranks. Governor Murphy's Executive Order also enrolls newly hired State employees in the State Health Benefits Plan (SHBP) immediately upon hire. The SHBP enrollment only applies to new State employees hired in connection with COVID-19 response efforts.

<https://nj.gov/governor/news/news/562020/approved/20200406b.shtml>

Executive Order 116: Extends certain statutory deadlines for school districts with elections in May, including 1) the governing body of the municipality presenting and certifying a tax levy to the county board of taxation and 2) districts giving notice to nontenured teaching staff members whether they will be employed for the following year. Governor Murphy previously signed Executive Order No. 105, which postponed school board elections scheduled for April 21, 2020 until May 12, 2020.

<https://nj.gov/governor/news/news/562020/approved/20200407a.shtml>

Executive Order 117: Waives 2019-2020 statutory school year assessment requirements for eighth grade students and twelfth grade students who have not yet met the graduation assessment requirement due to the ongoing COVID-19 pandemic. <https://nj.gov/governor/news/news/562020/approved/20200407c.shtml>

Executive Order 118: Closes all state parks and forests and county parks to further social distancing measures. <https://nj.gov/governor/news/news/562020/approved/20200407d.shtml>

Executive Order 119: Extends the Public Health Emergency declared on March 9, 2020 through Executive Order No. 103. Under the Emergency Health Powers Act, a declared public health emergency expires after 30 days unless renewed. This order extends all Executive Orders issued under the Governor's authority under the Emergency Health Powers Act. It also extends all actions taken by any Executive Branch departments and agencies in response to the Public Health Emergency presented by the COVID-19 outbreak. <https://nj.gov/governor/news/news/562020/approved/20200407e.shtml>

Executive Order 120: Postpones primary elections on Tuesday, June 2nd to Tuesday, July 7th in response to the ongoing COVID-19 pandemic. This includes primaries for President, the U.S. Senate, the U.S. House of Representatives, the 25th District of the New Jersey Legislature, and county and municipal elections, as well as county committee elections. Last month, Governor Murphy issued Executive Order No. 105, which delayed certain elections set to take place in March and April until May 12th. <https://nj.gov/governor/news/news/562020/approved/20200408a.shtml>

Executive Order 121: Allows an increase in the maximum weight limit on certain interstate highways and toll roads from 80,000 pounds (40 tons) to 92,000 pounds (46 tons) for vehicles transporting COVID-19 relief supplies. <https://nj.gov/governor/news/news/562020/approved/20200408d.shtml>

Executive Order 122: Ceases all non-essential construction projects and imposing additional mitigation requirements on essential retail businesses and essential industries to limit the spread of COVID-19 in New Jersey. The order also outlines specific protections and policies for all essential retail, manufacturing, and warehousing businesses, as well as businesses engaged in essential construction projects. <https://nj.gov/governor/news/news/562020/approved/20200408e.shtml>