Novel Coronavirus
Virus Name: SARS-CoV-2 (previously 2019-nCoV)
Disease Name: COVID-19

Q: What is a novel coronavirus?

A: A novel coronavirus is a new coronavirus that has not been previously identified. The virus causing coronavirus disease 2019 (COVID-19), is not the same as the coronaviruses that commonly circulate among humans and cause mild illness, like the common cold.

Q: Have people from the Diamond Princess cruise ship with confirmed COVID-19 been sent to Anniston?

A: No. Anniston has not received any persons for quarantine with known COVID-19.

Q: Why were there news stories that persons positive for the virus that causes COVID-19, were being sent to the FEMA Center for Domestic Preparedness (CDP) in Anniston, Alabama?

A: There was a news release sent out by Health and Human Services (HHS) that was prematurely released prior to final decisions being made. At the time of release, state, federal, and local officials were still discussing options. The FEMA Center for Domestic Preparedness (CDP) in Anniston, Alabama has been identified as an alternative quarantine facility for COVID-19 patients.

Q: Is the virus that causes COVID-19 circulating in Alabama?

A: No. Alabama has no known cases of COVID-19. There are known, community viruses that are circulating including some common coronaviruses. These viruses are not the virus that is causing the new COVID-19 outbreak.

Q: Do we have any persons in Alabama who traveled from Wuhan or other cities in China?

A: Yes. The Alabama Department of Public Health (ADPH) has been receiving names and contact information from the Centers for Disease Control and Prevention (CDC) of returning travelers for several weeks. All monitorees in Alabama have been moderate or low risk and have practiced voluntary self-isolation. As of February 27, 2020, ADPH has monitored over 100 people.
Q: Why was the CDP in Anniston, Alabama chosen as an alternative site for quarantine of persons testing positive for the virus that causes COVID-19?

A: The CDP is the primary training site in the United States for preparedness activities both infectious and non-infectious. The ability to house people while maintaining the safety of staff and others is part of preparedness training.

Q: Since the virus that causes COVID-19 is airborne, are people in the community at risk if a person is placed in quarantine in the CDP?

A: No. The virus cannot be picked up and widely dispersed by the wind. The space is limited for exposure to within 6-8 feet of the infected person. In addition, HHS staff and personnel are fully trained in the appropriate use of personal protective equipment (PPE) to prevent the transmission to themselves and others. A person is only at risk if they are in close contact to a person infected with the virus that causes COVID-19.

Q: The release mentioned “pre-identified” hospitals in Alabama. What hospitals are these?

A: As part of preparedness training, most frontline hospitals in Alabama are prepared and staff are trained to do isolation and evaluation of persons with respiratory illnesses such as COVID-19 and other infectious diseases. All frontline hospitals are required to maintain enough PPE to ensure that there is no transmission of infectious disease within their facilities for up to 72 hours. As part of ongoing preparedness activities, ADPH, in collaboration with CDC and the Alabama Hospital Association, has provided information to hospitals and continues to work to identify resources needed. A list of hospitals in Alabama maintaining negative pressure rooms is available. ADPH will coordinate with hospitals that maintain negative pressure rooms in the event a person is identified to need testing for the novel coronavirus or has tested positive for the virus that causes COVID-19. ADPH is currently notifying facilities in advance of persons being monitored who have identified that facility as their hospital of choice. There is a process in place for coordination of patient care and transportation with State EMA and Alabama hospitals.

Q: Why is ADPH not sending persons in need of testing to county health departments for testing?

A: Evaluation and testing is recommended to be conducted in negative pressure rooms which are limited within the county health departments. If community spread should occur in Alabama, ADPH has identified county health departments with operational negative pressure rooms and is prepared to shift all trained staff from non-critical functions to assist with novel coronavirus related activities.
Q: Why is ADPH not telling patients to go to their own physicians if they think they have the novel coronavirus?

A: Currently, there is no community circulation of novel coronavirus within the continental United States. Private physicians do not usually maintain the required personal protective equipment to safely evaluate and test persons suspected of having the new virus that causes COVID-19. They often are not trained or do not maintain the training necessary to prevent the spread of this new virus. There are no cases in Alabama of COVID-19 which is the disease associated with the novel coronavirus officially named SARS-CoV-2. The best ways to prevent transmission include but are not limited to frequent hand washing, covering your cough, practicing social distancing, and using appropriate equipment, the right way every time.

Q: Is the new coronavirus, SARS-CoV-2, that causes COVID-19 deadly?

A: This new virus is easily transmitted but the transmission rate falls in between the ease of transmission for measles and the flu. For every person with measles, you can expect 12 to 18 more to become infected. For every person with the flu, from 1.4 to 2.8 or on average 2 people can be expected to become sick with the flu. For this new virus, for every person with it, the average number in China infected by that one is 3.28. As of February 24, more than 2,600 deaths have been confirmed worldwide from the new coronavirus, SARS-CoV-2.

There are multiple types of common coronaviruses and other respiratory viruses, including influenza (the “flu”) circulating within the United States and Alabama. It is very important that all persons be vaccinated against the flu so that we will be able to reduce the transmission of the respiratory illnesses that we already have circulating. While there is no COVID-19 in Alabama, the flu is circulating statewide and as of February 15, there have been 5 reported deaths in Alabama and more than 15,000 flu-related deaths in the United State alone from the flu.

Q: How do we request N-95 masks and other PPE from ADPH?

A: ADPH maintains a minimal stockpile of PPE for public health use. At this time, we are not able to provide PPE to our partner agencies. If anything changes, ADPH will make our partners aware. If PPE is needed by other state or local agencies, hospitals, physicians, other providers, and the public, it is our recommendation that they follow their normal procurement procedures to acquire them. There is no recommendation at this time for any state or local staff to utilize PPE in day-to-day operations. Should these recommendations change, we will notify our partners. Prior to using PPE, persons must
be screened, fit tested, and trained on appropriate use of PPE. This is the responsibility of the employer.

**Q:** Questions have been asked about cargo planes coming in to Alabama, specifically Huntsville. What guidance should be given related to cargo plane crews?


Crew members who are based in the United States and who have been on layovers in mainland China outside Hubei Province within the previous 14 days, and who have no known exposure to persons with COVID-19, are assessed as low risk. These crew members should self-monitor under the supervision of the air carrier’s occupational health program in coordination with the health department of jurisdiction for the crew member’s residence in the United States. These crew members have no movement restrictions while in the United States and may continue to work on passenger or cargo flights as long as they remain asymptomatic. This recommendation is based on US-based air crews having limited interaction with the local population in China during a typical layover. If they develop fever, cough, or difficulty breathing, crew members should self-isolate and be excluded from work on flights immediately until cleared by public health authorities.

Crew members who are based in mainland China outside Hubei Province and who are in the United States for layovers are assessed as medium risk but may continue to work on passenger or cargo flights to and within the United States as long as they remain asymptomatic. These crew members should self-monitor under the supervision of the air carrier’s occupational health program. These crew members are also recommended to remain in their hotels, limit activities in public, practice social distancing, and avoid congregate settings while in the United States. The air carrier should coordinate with the health department of jurisdiction for the airport to establish a plan for managing crew members identified as symptomatic while in the United States. If they develop fever, cough, or difficulty breathing, crew members should self-isolate and be excluded from work on commercial flights immediately until cleared by public health authorities.

Crew members who are based outside the United States but not in mainland China are assessed as low risk. These crew members should be managed as for US-based crew members. In this circumstance, the US health department responsible for the airport has jurisdiction.

Air carriers have the authority to adopt occupational health policies for their own employees that exceed CDC recommendations.