

YOUR CORONAVIRUS HANDBOOK

**All the facts.
Easy to read.
Completely free.**

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INTRODUCTION

Thank you for picking up **Your Handbook to Coronavirus!**

You've taken a solid step towards becoming more aware and more prepared to face the current pandemic of COVID-19.

We know that there's a lot of information from a lot of different sources, and it's all coming at you very fast. This handbook distills the most important coronavirus information into an easy-to-read magazine. You don't need a medical degree to understand the basics of keeping yourself healthy.

The information in this handbook is accurate as of March 23, 2020.



In a time of crisis, everyone should have access to reliable health information.

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WHAT IS CORONAVIRUS?

“Coronavirus” is the name of a category of viruses¹.

A coronavirus has an internal sphere of virus material covered by a protective layer, which is then covered by spikes made of protein.

“Corona” refers to the crown-like appearance of these spikes.

The virus causing trouble in 2020 is SARS-CoV-2, a newly discovered (or novel) type. It is in the same family as the SARS virus that caused the outbreak in 2003.

SARS-CoV-2 is the name of the virus, while COVID-19 is the name of the disease it causes². Think of it like HIV (virus) and AIDS (resulting condition). Most people just call the whole package “coronavirus.”

The surface of the coronavirus particle is covered with flared stalks called “spike glycoproteins.”³

The virus seeks out cells that make protein ACE2. Then, spike glycoproteins latch onto your protein receptors and hijack normal cell behavior. Instead of making more ACE2 protein, an infected cell makes more copies of the corona-

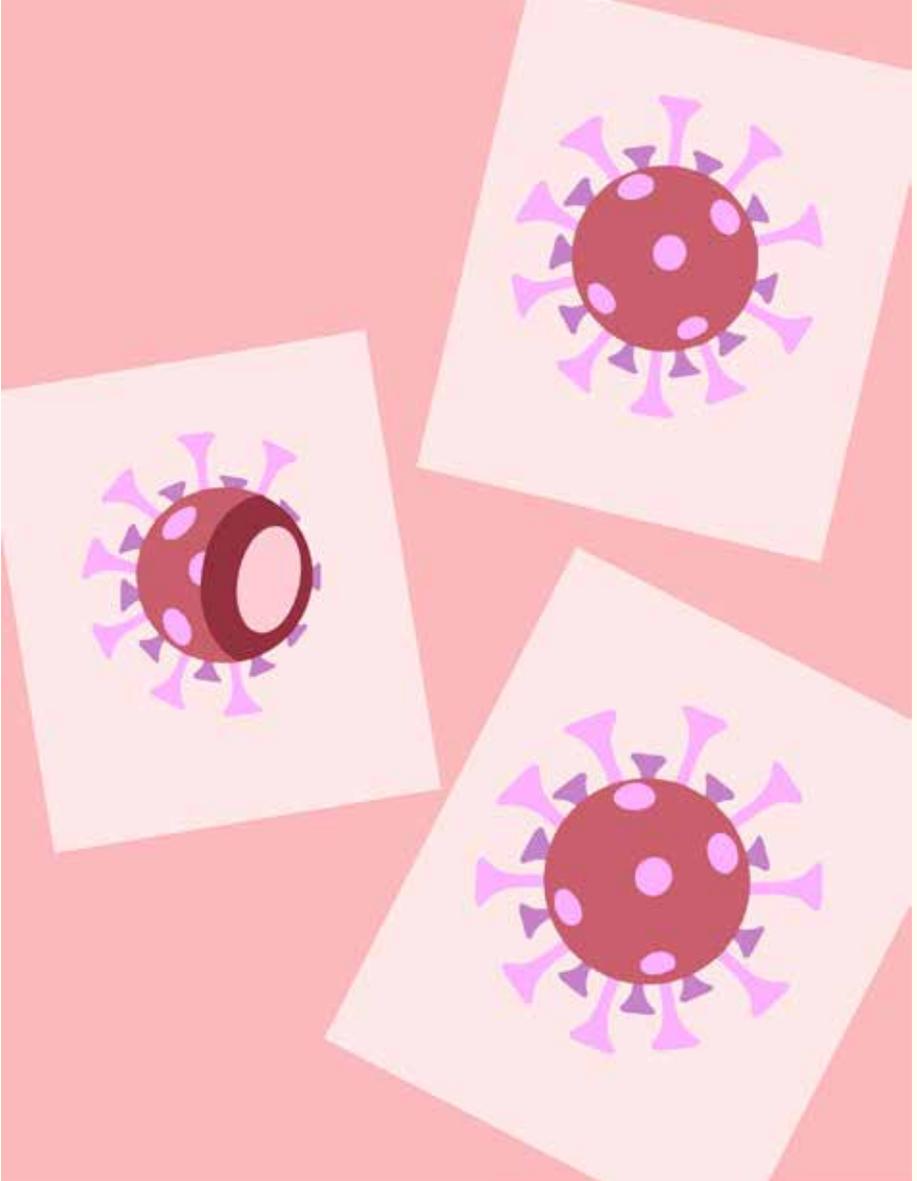
virus and releases it into your body. The cells that make ACE2 proteins are found in the lungs, heart, kidneys, and intestines⁴.

This is why COVID-19 largely affects the lungs. It can only attack certain kinds of cells, and lungs are the easiest to access. You don’t breathe into your kidneys.

There’s no blood test because coronavirus is not found in blood. Instead, doctors test swabs of your nose, throat, and coughed-up phlegm (or sputum)⁵. Because coronavirus attacks only certain cells, you might have different levels of virus concentration within your body. It’s possible to falsely test negative for coronavirus if your sample was taken from your nose and the virus was hiding out deep in your lungs⁶.

SOURCES FOR THIS SECTION:

1. [HTTPS://WWW.HOPKINSMEDICINE.ORG/HEALTH/CONDITIONS-AND-DISEASES/CORONAVIRUS](https://www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus)
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3. [HTTPS://SCIENCE.SCIENCEMAG.ORG/CONTENT/EARLY/2020/03/03/SCIENCE.ABB2762](https://science.sciencemag.org/content/early/2020/03/03/science.abb2762)
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6. [HTTPS://WWW.SCMP.COM/NEWS/CHINA/SOCIETY/ARTICLE/3065022/CORONAVIRUS-WHY-DO-RECOVERED-PATIENTS-TEST-POSITIVE-AGAIN](https://www.scmp.com/news/china/society/article/3065022/coronavirus-why-do-recovered-patients-test-positive-again)



AN ARTISTIC ILLUSTRATION OF CORONAVIRUS PARTICLES

A NOTE ON SOURCES: SOMETIMES, IT IS NOT POSSIBLE TO FIT THE ENTIRE LINK ON ONE LINE. WHEN EXTRA HYPHENS ARE ADDED TO THE LINK, IT MAY APPEAR BROKEN. IF YOU ENCOUNTER THIS ISSUE, REMOVE ANY HYPHENS THAT APPEAR IN THE MIDDLE OF WORDS (PA-TIENT, CORO-NAVIRUS). IF YOU NEED MORE HELP FINDING THE ORIGINAL SOURCES, WWW.YOURCORONAVIRUSHANDBOOK.COM HAS A PAGE OF A CITATIONS WITH THE FULL, INTACT LINKS.

WHAT MAKES THIS VIRUS DIFFERENT?

Coronavirus is different from both influenzavirus (which causes flu) and rhinovirus (the virus responsible for many cases of the common cold).

A rhinovirus particle (or virion) is about 30 nanometers across¹. The influenza virion is much bigger at 80 - 120 nanometers across². But the coronavirus particle is even bigger at 120 - 160 nanometers across³. Plus, they all have different methods of attacking your body.

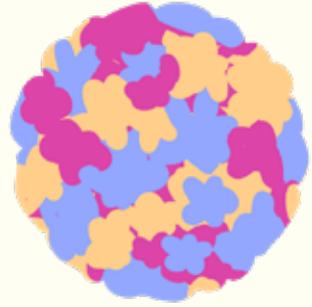


ILLUSTRATION OF A RHINOVIRUS PARTICLE.

Coronavirus and influenzavirus are both covered in stalk-like protrusions. These stalks are “keys” that open doors in the same lung “neighborhood,” but they lead to different places.

Coronavirus enters through ACE2 protein receptors⁴, while influenzavirus enters sialic acid receptors. Practically speaking, the receptor names are not important to remember. They simply illustrate that coronavirus and influenzavirus are different viruses, with different internal targets.

THE CORONAVIRUS IS NOT A “STRONGER VERSION” OF THE FLU, SIMILAR TO HOW YOUR FOURTH COUSIN IS NOT A “STRONGER VERSION” OF YOU.

The novelty of the coronavirus may make it more dangerous. Various forms of the flu and the common cold have been circulating for centuries. Flu vaccines, plus prior experience with the flu, means that your body has a blueprint for fighting off the illness. With coronavirus, your body has to start from scratch.

We are still learning about coronavirus and who is vulnerable. People with certain pre-existing conditions are more vulnerable. But many seemingly healthy people have also struggled to fight off the virus. **Staying at home is key for everyone**, since you don’t (and can’t) know how your body will react to this new type of threat.

Coronavirus may spread more quickly and easily than the flu. The average person with the flu infects 1.3 other people. The average person with coronavirus infects 2.2 others⁵. This number may be slightly high because the first people with coronavirus did not know to take proper isolation precautions. But it illustrates that unchecked coronavirus spreads rapidly throughout a population.

The most effective method of fighting coronavirus is preventing infection in the first place. Staying away from other people is the number one defense.

Hand-washing and proper hygiene are also key components.

As of March 23, 2020, we don't have any medication that fights the virus once it's inside your body. Instead, treatment focuses on relieving symptoms, like using ibuprofen to reduce fever or respiratory assistance to improve breathing⁶. Vaccines are in development, but will take at least a year to make it to market⁷.

Even if only 5% of coronavirus patients need intensive care, hospitals are not equipped to care for such a big influx of patients. Ventilation machines (to help virus-damaged lungs) are in short supply. The same machines are also needed for stroke victims, car accident survivors, people with other infections, and anyone else with trouble breathing on their own⁸.

Plus, **healthcare workers are as vulnerable to the virus as the rest of the population**, maybe more so. They have no immunity, either. And being in constant contact with coronavirus patients contributes to a higher viral load. Working long hours to care for extra patients increases stress while impacting sleep. In fact, one of the first coronavirus deaths was Li Wenliang, a young doctor working in Wuhan⁹. Hospitals can become quickly overwhelmed if coronavirus sweeps through medical staff and patients.

But let's stay realistic. **Coronavirus is not a zombie plague.** It won't make you vomit black blood; it doesn't have a 90% fatality rate¹⁰. But coronavirus does have a bunch of small issues that could quickly add up into bigger problems unless communities work together to stop its spread.

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3. [HTTPS://WWW.EJMO.ORG/PDF/2019%20NOVEL%20CORONAVIRUS%20COVID19%20OUTBREAK%20A%20REVIEW%20OF%20THE%20CURRENT%20LITERATURE-12220.PDF](https://www.ejmo.org/pdf/2019%20NOVEL%20CORONAVIRUS%20COVID19%20OUTBREAK%20A%20REVIEW%20OF%20THE%20CURRENT%20LITERATURE-12220.PDF)
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10. [HTTPS://WWW.BUSINESSINSIDER.COM/CORONAVIRUS-MYTHS-DEBUNKED-WUHAN-CHINA-2020-2](https://www.businessinsider.com/coronavirus-myths-debunked-wuhan-china-2020-2)

HOW DOES IT SPREAD?

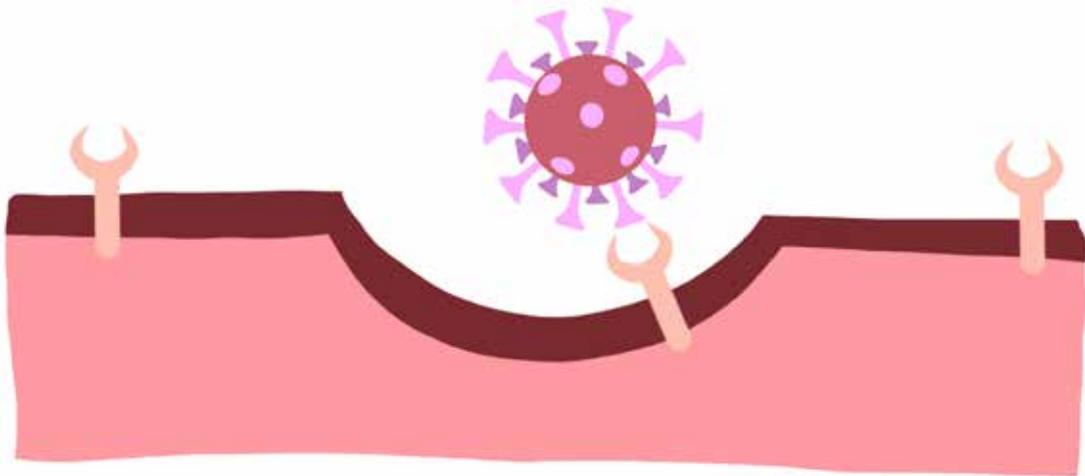


ILLUSTRATION OF A CORONAVIRUS PARTICLE ATTACHING TO A CELL

You may have read conflicting information about how long coronavirus can survive outside the body, on different surfaces and at different temperatures. The confusion comes from the fact that we haven't seen this virus before. We simply don't know yet.

Consider this: we have books on smallpox that were written in 1800. The first article¹ about SARS-CoV-2 came out in December 2019.

SARS-CoV-2 is a completely new member of the coronavirus family, and researchers are still finding out how it works. The information in this handbook has been collected from reliable sources and is up-to-date as of March 23, 2020. Please check reputable websites (like the WHO and CDC) regularly as scientific data is virtually guaranteed to evolve and improve in the coming months.

SOURCES FOR THIS PAGE:

1. [HTTPS://WWW.THEVERGE.COM/2020/1/22/21077214/CORONAVIRUS-RAPID-GLOBAL-RESPONSE-PROGRESS-SARS-UNKOWN-VIRUS-CHINA-PUBLIC-HEALTH](https://www.theverge.com/2020/1/22/21077214/coronavirus-rapid-global-response-progress-sars-unknown-virus-china-public-health)

TRANSMISSION METHODS

1. CONTACT WITH AN INFECTED PERSON

It is recommended to stay at least 6 feet away from others¹ (though one source says the minimum safe distance is 15 feet²). There is a lot of evidence that shows infected people spread the virus through coughing out small droplets that contain the virus.

Virus particles travel through the air in droplets too small to be seen by the human eye. The first type of droplet is heavier than air and quickly falls to the floor or other surfaces, potentially contaminating those surfaces.

The second type of droplet (aerosol) is extremely tiny and has more hang-time in the air. Coronavirus definitely travels in droplets, but it's unknown whether it also travels in floating aerosols³.

An infected person may spread the virus before they start to feel sick. It is less likely to spread the virus if you are not actively ill, but it is still possible⁴.

You cannot tell from looking if someone has coronavirus or is shedding coronavirus particles.

Someone's background does not affect their chances of contracting the virus. Chinese people are not innate carriers of the virus; this virus just happened to appear in a Chinese city⁵. There is no reason to fear or attack people of different backgrounds; we all have similar chances of infection now that the virus is spreading locally through casual contact.

Consider the possibility that **you** might be the one who is shedding virus particles without feeling symptoms. Staying home and canceling casual plans protects both you and your community.

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5. [HTTPS://WWW.LATIMES.COM/CALIFORNIA/STORY/2020-03-03/FEINSTEIN-DECRIES-UNCONSCIONABLE-RACISM-AMID-CORONAVIRUS-OUTBREAK](https://www.latimes.com/california/story/2020-03-03/feinstein-decries-unconscionable-racism-amid-coronavirus-outbreak)

2. CONTACT WITH AN INFECTED SURFACE

Several sources have shown that the virus can live outside the body on cloth, metal, wood, plastic, and other surfaces. Right now, estimates range from two hours to three days¹. But scientists are not sure how long coronavirus can survive on any given surface².

It is not important to debate whether the virus can live for three hours on metal or seven hours on cardboard. **You should act under the assumption that the virus can live for a day on any kind of surface**, in any kind of temperature and humidity level.

The good news is that coronavirus cannot be absorbed solely through your skin. Rather, you must touch a mucosal membrane like your eyes, mouth, or nose³ before the virus can take root in your body.

The bad news is that you likely touch your face several times a day (or an hour) without realizing it. If you have recently gone out in public, your hands should be considered an infected surface and sanitized according to CDC handwashing guidelines⁴.

If you suspect a material surface may have virus particles, you should disinfect it immediately with an approved cleaner⁵. High-traffic areas in your house or living facility should be cleaned at least once a day⁶. See the footnotes below as well as the end of this document for helpful links about handwashing, EPA-approved cleaners, and proper sanitization techniques.

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1. [HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/COMMUNITY/HOME/CLEANING-DISINFECTION.HTML](https://www.cdc.gov/coronavirus/2019-ncov/community/home/cleaning-disinfection.html)
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TRANSMISSION LIKELINESS

HIGH-RISK ACTIVITIES: INFECTION POSSIBLE AND LIKELY

- Being in extremely close contact with or touching someone who is actively ill
- Touching a surface right after it was touched by an actively ill person, then touching your own face and mouth
- Standing at minimum safe distance (6 feet) from an actively ill person
- Being in extremely close contact with someone during the incubation phase
- Touching a surface right after it was touched by someone incubating the virus, then touching your face

LOW-RISK ACTIVITIES: INFECTION UNLIKELY BUT PERHAPS POSSIBLE

- Touching a surface several days after it was touched by an actively ill person, then touching your face
- Touching a surface several days after it was touched by someone incubating the virus, then touching your face

SOURCES FOR THIS SECTION:

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CORONAVIRUS SYMPTOMS

INCUBATION PERIOD

The virus incubates for 2 to 14 days before you show any symptoms. Most people start to show symptoms about 5 days in. If your symptoms get too severe to manage at home, no matter the underlying cause, seek emergency help.

COMMON SYMPTOMS OF COVID-19¹

- Cough
- Fever
- Breathing issues (shortness of breath)
- General feelings of malaise and weakness²
- Runny nose
- Diarrhea
- Inability to smell³

These symptoms are in order of how frequently they show up with coronavirus. **The three top “Trifecta” symptoms (cough, fever, and breathing troubles) are present in the vast majority of coronavirus cases.** These are also the most dangerous symptoms, as a high fever or breathing problems can be fatal. The other symptoms are uncomfortable, but not usually dangerous.

Based on new research, other symptoms like diarrhea and loss of smell may be more common than originally thought. If you suddenly lose the ability to smell, you should isolate for a week as a precaution⁴.

People with milder cases can recover at home⁵. It is still extremely important to practice isolating even if your case of coronavirus feels like a regular cold. We need to stop the spread of the virus in every way possible. If you are feeling sick in any way, stay at home to protect yourself and others.

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5. [HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/ABOUT/STEPS-WHEN-SICK.HTML](https://www.cdc.gov/coronavirus/2019-ncov/about/steps-when-sick.html)

WHEN TO SEEK HELP

For most infected people, COVID-19 symptoms will be uncomfortable, but not dangerous¹. **Seek help immediately if you have these “Dangerous Trifecta” symptoms** (a more severe version of “Trifecta” symptoms):

- Struggling to catch your breath (a suffocating feeling)
- Fever over 103 F
- Mental confusion

VULNERABLE POPULATIONS²

You will likely have a harder time overcoming the virus if you have one or more of the following characteristics:

- 60 years old or older
- Compromised immune system due to AIDS, immunosuppressing drugs, or other immune-related conditions
- Cardiovascular disease
- Diabetes
- Hypertension
- Cancer
- Chronic respiratory diseases³ such as COPD, asthma, or pulmonary hypertension
- Impaired lung function due to smoking, juuling, vaping⁴, or living in areas with heavy air pollution
- A history of complications while fighting other infections like strep throat, the flu, and regular colds

If you have a dry cough, fever, and one of the characteristics above, seek medical help immediately. Do not wait for symptoms to worsen⁵.

COVID-19 affects people differently. Some people may barely notice that they are sick. Meanwhile, others may find themselves laid up in bed for two weeks, even if they are stable and their case is not severe enough to go to a hospital.

SOURCES FOR THIS SECTION:

1. [HTTPS://THEHILL.COM/CHANGING-AMERICA/WELL-BEING/PREVENTION-CURES/486006-HOW-TO-TELE-IF-YOU-HAVE-CORONAVIRUS](https://thehill.com/changing-america/well-being/prevention-cures/486006-how-to-tele-if-you-have-coronavirus)
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FIRST-SYMPTOM FACT-CHECK

IF YOUR FIRST SYMPTOM IS... IT IS LIKELY...

RUNNY NOSE	<ul style="list-style-type: none"> • A cold or seasonal allergies. Runny nose is an uncommon but possible symptom of coronavirus¹.
SUDDEN FEVER OR CHILLS	<ul style="list-style-type: none"> • The flu. Flu has a rapid onset while COVID-19 symptoms develop more slowly over time².
SNEEZING AND ITCHING	<ul style="list-style-type: none"> • Seasonal allergies. Coronavirus does not cause allergy-type symptoms like red, watering eyes, constant sneezing, or skin rashes.
DIARRHEA	<ul style="list-style-type: none"> • From stress or changes in your eating habits. Diarrhea may be a symptom of coronavirus, but it is also a symptom of many other, simpler issues
HEADACHE	<ul style="list-style-type: none"> • Stress, tension, or just a headache.
SLIGHT FEVER WITH NO OTHER SYMPTOMS	<ul style="list-style-type: none"> • The flu or another infection like strep throat. Fever is a common sign of infection. What sets coronavirus apart is the breathing issues.
SORE THROAT	<ul style="list-style-type: none"> • A cold, a flu, or another infection like strep throat. Coronavirus does not start with a sore throat.
SLIGHT FEVER WITH DRY COUGH	<ul style="list-style-type: none"> • Potentially coronavirus. Try to recover at home at home first, then seek medical help if you cannot deal with the illness by yourself.

If you are severely struggling with any symptom, please call your doctor. For example, diarrhea is normally fine to wait out at home, but dehydration can become a concern with extreme, long-lasting diarrhea⁴.

SOURCES FOR THIS SECTION:

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4. [HTTPS://WWW.MAYOCLINIC.ORG/DISEASES-CONDITIONS/DIARRHEA/SYMPTOMS-CAUSES/SYC-20352241](https://www.mayoclinic.org/diseases-conditions/diarrhea/symptoms-causes/syc-20352241)

HOW TO SEEK MEDICAL ATTENTION FOR CORONAVIRUS

If you are experiencing severe coronavirus symptoms...

- Call your local emergency medical services¹
- Describe your symptoms in detail and explain that you think you have coronavirus²
- Explain why you can no longer stay at home to recover
- Give the medical facility time to prepare for your arrival. (The staff may need to suit up with proper breathing protection and eyewear³.)
- Wear a face mask, scarf, or bandanna over your mouth while in the waiting area to prevent coughing on others.
- Bring tissues or paper towels to cover your cough.
- Understand that your local medical facility is dealing with an epidemic on top of daily injuries, accidents, and care.
- You may have longer waits or less privacy than normal.

Please stay patient and calm while waiting for care.

SOURCES FOR THIS SECTION:

1. [HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/ABOUT/STEPS-WHEN-SICK.HTML](https://www.cdc.gov/coronavirus/2019-ncov/about/steps-when-sick.html)
2. [HTTPS://WWW.BUSINESSINSIDER.COM/WHAT-TO-DO-IF-YOU-THINK-YOU-HAVE-WUHAN-CORONAVIRUS-2020-2](https://www.businessinsider.com/what-to-do-if-you-think-you-have-wuhan-coronavirus-2020-2)
3. [HTTPS://WWW.ASAHQ.ORG/ABOUT-ASA/GOVERNANCE-AND-COMMITTEES/ASA-COMMITTEES/COMMITTEE-ON-OCCUPATIONAL-HEALTH/CORONAVIRUS](https://www.asahq.org/about-asa/governance-and-committees/asa-committees/committee-on-occupational-health/coronavirus)

WHEN NOT TO SEEK MEDICAL ATTENTION FOR CORONAVIRUS

Knowing when to stay home may be even more important than knowing when to head to the hospital.

Prevent overburdening your local medical facilities.

AVOID GOING TO THE HOSPITAL IF...

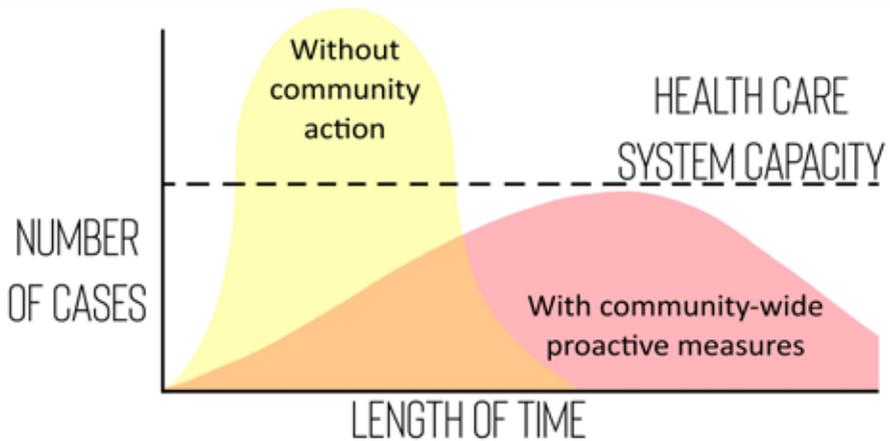
- You are feeling unhappy or uncomfortable with your symptoms, but you are not in immediate danger. If you are not experiencing the Dangerous Triecta and have no preexisting conditions, the hospital can't offer more than fluids, ibuprofen, and OTC cold medicines.
- You have no symptoms but want a coronavirus test “just to see” what happens.
- You want to ask a doctor a question about coronavirus.
- You want to see how busy the hospital is or get an inside look at “what is really happening” with coronavirus.
- You have a family member in the hospital who cannot see visitors. Normally, it's fine for families to “camp out” in hospital waiting rooms while their loved one is unconscious, in surgery, or giving birth. As a healthy person, you should NOT expect to spend extensive time in hospital waiting rooms during a coronavirus outbreak. Depending on how the virus hits your area, different wards may be converted to coronavirus treatment areas.
- You have a known medical issue that you can manage at home.

IF YOU HAVE A GENUINE MEDICAL EMERGENCY, SEEK HELP REGARDLESS OF YOUR CORONAVIRUS STATUS.

FLATTENING THE CURVE

You may have heard the term “flattening the curve” in news reports about coronavirus. This phrase describes a very simple concept:

If too many people get too sick too quickly, they will not be able to receive treatment. The coronavirus is manageable only if we can slow the rate of infection to a timeline of months, not weeks.



Medical facilities are limited. There are only a certain number of doctors, nurses, beds, and specialized machinery. The treatment options for coronavirus are also very limited and involve these main parts:

- Chest CT scans to look for lung damage¹
- High-flow oxygen therapy to improve breathing
- Mechanical ventilation for intensive breathing support

Only one person can use these devices at a time. In other words, if the ward is too crowded, you have to wait your turn.

Flattening the curve² is key to making sure your local medical facilities can treat one person before moving onto the next. Too many patients coming into the ER too quickly will look like the chocolate factory episode of *I Love Lucy*, but with much more serious results.

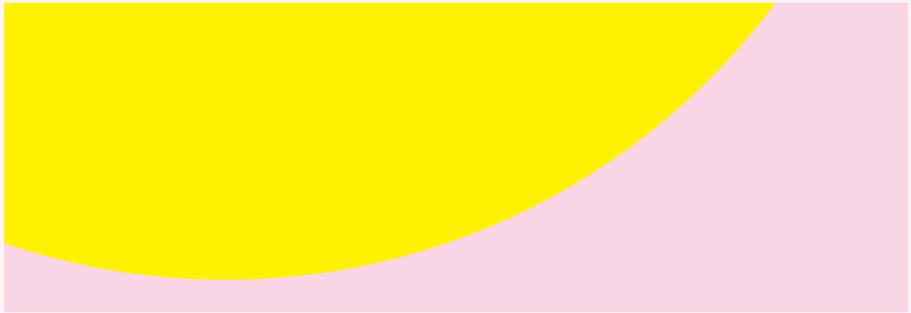
SOURCES FOR THIS SECTION:

1. [HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/HCP/CLINICAL-GUIDANCE-MANAGEMENT-PATIENTS.HTML](https://www.cdc.gov/coronavirus/2019-ncov/hcp/clinical-guidance-management-patients.html)
2. [HTTPS://WWW.FLATTENTHECURVE.COM/](https://www.flattenthecurve.com/)

KEEPING EVERYONE HOME

In a perfect world, everyone would have a safe home to shelter in. If you have a spare room or bed, please consider opening your space to your friends, family, and loved ones who are...

- Homeless or living in a shelter without a guaranteed bed from one day to the next
- Living with abusive partners or family
- Unable to return home due to a hostile family situation or unstable living situation
- Students recently kicked out of their dorms
- Vulnerable to the coronavirus and living in a situation which makes them more likely to catch it
- Dealing with precarious financial situations who may lose their home in the next month
- Trapped by surprise in their current location due to travel bans
- Unable to stock up food and necessary supplies on their own
- Without internet access at home and unable to keep up with work, school, or responsibilities that have moved online
- In any way unsure of their housing situation or ability to manage independently for the next month or so



WHO SHOULD KEEP WORKING?

In an ideal situation, the only people who would leave home to work during community-wide lockdowns would be those who provide essential goods or services.

For coronavirus, essential goods are considered food, water, medication, general medical supplies, and coronavirus-specific medical supplies like oxygen canisters and intubation equipment.

People who work in factories making these items, or are involved in the shipping of these items, would ideally continue working as long as they are not part of the vulnerable populations.

Essential services includes both people who are responding to medical emergencies (like EMTS) and those who are trained to respond to expected emergencies (like fire-

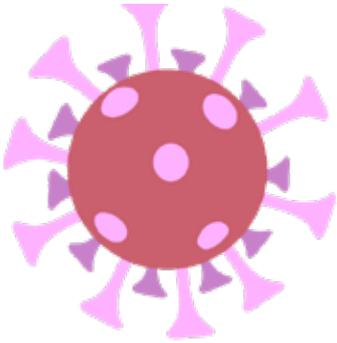
fighters). Other essential facilities include pharmacies, grocery stores, transportation/delivery services, banking services, and utilities.

Recreational facilities like gyms and restaurants should close to protect their customers and communities.

It is important to realize that the people in customer-service jobs are people, too. Your bus driver is a person. Your supermarket cashier is a person. Your nurse is a person.

When you order a package from Amazon or you get food delivered during quarantine, you're not eliminating the risk. You're passing it on to someone else—someone who may be more vulnerable to coronavirus. Don't make someone face the virus for you unless it is an absolute emergency.

IF SOMEONE IN YOUR HOUSEHOLD IS SICK

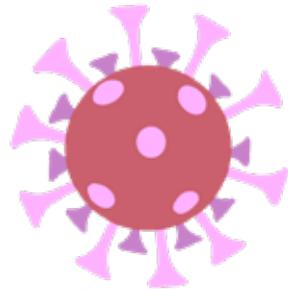


- Isolate them as much as possible¹. Give them their own room, or create artificial separation with sheets or furniture.

- If you share a bathroom and kitchen, disinfect common surfaces several times a day.

- Do not share cups, towels, linens, or eating utensils with the sick person². If this is unavoidable, clean items thoroughly after use.

- Provide the sick person with tissues or paper towels, as well as a plastic bag to dispose of contaminated materials.



- Make routine checks on the sick person every six to eight hours. Bring clean water for them to drink.

- Monitor their temperature, if possible.

- Avoid smoking, burning candles, diffusing essential oils, using heavily scented lotions, or doing anything else that can impair or affect natural breathing ability.

SOURCES FOR THIS SECTION:

1. [HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/HCP/GUIDANCE-PREVENT-SPREAD.HTML](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html)

2. [HTTPS://WWW.HEALTH.HARVARD.EDU/DISEASES-AND-CONDITIONS/CORONAVIRUS-RESOURCE-CENTER](https://www.health.harvard.edu/diseases-and-conditions/coronavirus-resource-center)

IF THE SICK PERSON...

- Has a fever at or above 103 F
 - Seems confused or unable to hold a conversation
 - Is struggling to wake up
 - Can't catch their breath¹
 - Has a fever and dry cough
- PLUS one or more vulnerability characteristics²**

**SEEK IMMEDIATE
MEDICAL ATTENTION.**

SOURCES FOR THIS SECTION:

1. [HTTPS://WWW.HEALTH.HARVARD.EDU/DISEASES-AND-CONDITIONS/CORONAVIRUS-RESOURCE-CENTER](https://www.health.harvard.edu/diseases-and-conditions/coronavirus-resource-center)

2. [HTTPS://WWW.MIAMIHERALD.COM/NEWS/HEALTH-CARE/ARTICLE240842181.HTML](https://www.miamiherald.com/news/health-care/article240842181.html)

HOW TO CLEAN YOUR HOME

Recommended cleaning guidelines are extensive and hard to understand. **For the best cleaning results, follow as many of these steps as possible.** However, some steps are not realistic for the average American (e.g. using new disposable gloves to clean high-touch surfaces in your kitchen multiples times a day).

- Put on disposable gloves before cleaning, and throw them away after you finish your cleaning routine.
- If the surface is visibly dirty, scrub it with regular soap and water to wash away visible dirt before attempting to disinfect it.
- Use EPA-approved cleaners. Many Clorox and Lysol products are on the list. Alternatively, make your own cleaning solution by mixing 1 tablespoon of bleach to 4 cups of water².

Never mix bleach with any other cleaning product.

- Wipe surfaces with enough cleaning product to make them wet. If your rag or wipe dries out, use more cleaning product. After wiping surfaces into a wet state, let them air-dry for 4-10 minutes³.
- Use a plastic bag to store or transport the laundry of a sick person. Do not touch the fabric with your hands or “shake out” laundry¹. Clean other fabric items (like carpets) with material-specific cleaning products.

SOURCES FOR THIS SECTION:

1. [HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/HCP/GUIDANCE-PREVENT-SPREAD.HTML](https://www.cdc.gov/coronavirus/2019-ncov/hcp/guidance-prevent-spread.html)

2. [HTTPS://WWW.CDC.GOV/FLU/PDF/FREERESOURCES/UPDATED/CLEANING_DISINFECTING_SCHOOLS.PDF](https://www.cdc.gov/flu/pdf/freeresources/updated/cleaning_disinfecting_schools.pdf)

3. [HTTPS://WWW.LYSOL.COM/PRODUCTS/DISINFECTING-WIPES/LYSOL-DISINFECTING-WIPES-LEMON-AND-LI-ME-BLOSSOM/](https://www.lysol.com/products/disinfecting-wipes/lysol-disinfecting-wipes-lemon-and-lime-blossom/)

WHAT WON'T HELP

You may have seen chain letters explaining that garlic, or vodka, or heat will kill coronavirus. Those claims are false.

These things do NOT affect coronavirus:

- Eating garlic, hot sauce, or sesame seed oil
- Using a sauna or taking a hot bath
- Diffusing essential oils
- Gargling with bleach or dangerous chemicals
- Wearing a face mask. Face masks are to prevent flying droplets.
- Getting a flu shot
- Consuming large amounts of Vitamin C
- Taking small sips of water every 15 minutes
- Using a hand dryer
- Using tanning beds or UV light. Though UV radiation can kill viruses, you will damage your skin trying this on your own.
- Spraying yourself with or drinking alcohol, chlorine, bleach, vodka, or any random liquid
- Using a netipot
- Taking antibiotics or antifungal medication. The coronavirus is a virus, not a bacteria or fungus
- Eating red meat or not eating red meat
- Using CBD or marijuana, or illegal drugs like cocaine
- Rubbing yourself with or eating algae or seaweed

The only proven methods for avoiding the virus are washing your hands and staying home.

SOURCES FOR THIS SECTION:

1. [HTTPS://WWW.WASHINGTONPOST.COM/OUTLOOK/FIVE-MYTHS/FIVE-MYTHS-ABOUT-THE-CORONAVIRUS/2020/03/12/7F0C0786-6478-11EA-B3FC-7841686C5C57_STORY.HTML](https://www.washingtonpost.com/outlook/five-myths/five-myths-about-the-coronavirus/2020/03/12/7f0c0786-6478-11ea-b3fc-7841686c5c57_story.html)
2. [HTTPS://WWW.HOPKINSMEDICINE.ORG/HEALTH/CONDITIONS-AND-DISEASES/CORONAVIRUS/2019-NOVEL-CORONAVIRUS-MYTH-VERSUS-FACT](https://www.hopkinsmedicine.org/health/conditions-and-diseases/coronavirus/2019-novel-coronavirus-myth-versus-fact)
3. [HTTPS://WWW.LIVESCIENCE.COM/CORONAVIRUS-MYTHS.HTML](https://www.livescience.com/coronavirus-myths.html)
4. [HTTPS://WWW.WHO.INT/EMERGENCIES/DISEASES/NOVEL-CORONAVIRUS-2019/ADVICE-FOR-PUBLIC/MYTH-BUSTERS](https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters)
5. [HTTPS://WWW.CNN.COM/2020/03/04/HEALTH/DEBUNKING-CORONAVIRUS-MYTHS-TRND/INDEX.HTML](https://www.cnn.com/2020/03/04/health/debunking-coronavirus-myths-trnd/index.html)
6. [HTTPS://WWW.BUSINESSINSIDER.COM/WUHAN-CORONAVIRUS-MYTHS-RED-MEAT-BLEACH-ANTIBIOTICS-AND-SESAME-OIL-2020-2#AND-REMEMBER-FACE-MASKS-DONT-REALLY-HELP-MUCH-UNLESS-YOU-PUT-THEM-ON-THE-PEOPLE-WHO-ARE-ALREADY-SICK-TO-PROTECT-OTHERS-16](https://www.businessinsider.com/wuhan-coronavirus-myths-red-meat-bleach-antibiotics-and-sesame-oil-2020-2#and-remember-face-masks-dont-really-help-much-unless-you-put-them-on-the-people-who-are-already-sick-to-protect-others-16)

FACE MASKS 101

Coronavirus spreads when infected people cough virus droplets into the air. These droplets can enter your nose, mouth, or eyes. Plus, if you touch a surface that has been coughed on, then touch your own face, you can bring the virus inside your body¹.

Wearing a face mask doesn't protect your eyes, and it doesn't block out every virus particle. Wearing a face mask does have some benefits. When worn by a sick person, the mask reduces the amount of flying droplets that would otherwise be coughed into the air. When worn by a healthy person, the mask helps reduce the amount of virus particles that might otherwise make their way into your body. And wearing a mask can help stop you from touching your face unnecessarily.

But the masks don't create an airtight seal around your face². Thin surgical masks won't block every virus particle. And if you're not used to wearing a mask, you probably don't know how to put it on or take it off correctly--meaning you can accidentally transfer virus particles from your mask to your face as you take it off³.

A mask is not a magical defense against coronavirus.

Do not count on a mask as your primary defense against coronavirus⁴. Picture coronavirus as a really bad thunderstorm. A mask is about the equivalent of wearing a hat. Sure, it will help you stay a little bit drier. But the best way to avoid getting wet is by not going out in the first place.

In a perfect world, your main defense would be the walls of your home and the glass of your windows.

For medical professionals treating coronavirus, a mask is only part of the recommended Personal Protective Equipment⁵. The full suit of protective gear includes gloves, single-use gowns, face shields, masks, and enough of these items to go through dozens or hundreds in a day. Plus, health care workers go through training to learn how to use these items properly⁶.

Picture coronavirus as a thunderstorm again. Our medical professionals are the front-liners who have to stand in the rain. They need (metaphorical) umbrellas, raincoats, hats, gloves, everything we can give them and more. **We cannot afford for our health care workers to get sick because of civilians hoarding supplies.**

In the upcoming weeks, doctors will have to make hard calls about who gets protection and who gets supplies⁷. We simply don't have enough personal protective equipment, as of March 23rd.

If you have to face the virus in a medical setting, having any protection is better than no protection. Homemade, hand-sewn masks help reduce the amount of infected droplets that are coughed into the air by sick people. Handmade masks can also help health professionals reduce their exposure to the virus, potentially keeping them healthier for longer.

But the CDC is clear: homemade masks are a last resort for medical facilities that are already running out of masks before the fight even really started⁸.

SOURCES FOR THIS SECTION:

1. [HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/PREPARE/TRANSMISSION.HTML?CDC_AA_REFVAL=HTTPS%3A%2F%2FWWW.CDC.GOV%2FCORONAVIRUS%2F2019-NCOV%2FABOUT%2FTRANSMISSION.HTML](https://www.cdc.gov/coronavirus/2019-ncov/prepare/transmission.html?CDC_AA_REFVAL=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fabout%2Ftransmission.html)
2. [HTTPS://WWW.THEATLANTIC.COM/HEALTH/ARCHIVE/2020/01/VIRAL-MASKS/605761/](https://www.theatlantic.com/health/archive/2020/01/viral-masks/605761/)
3. [HTTPS://WWW.WASHINGTONPOST.COM/WORLD/2020/01/24/CORONAVIRUS-SPURS-RUN-FACE-MASKS-DO-THEY-WORK/](https://www.washingtonpost.com/world/2020/01/24/coronavirus-spurs-run-face-masks-do-they-work/)
4. [HTTPS://WWW.NYTIMES.COM/2020/01/28/OPINION/CORONAVIRUS-PREVENTION-TIPS.HTML](https://www.nytimes.com/2020/01/28/opinion/coronavirus-prevention-tips.html)
5. [HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/HCP/RESPIRATOR-USE-FAQ.HTML](https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirator-use-faq.html)
6. [HTTPS://WWW.CDC.GOV/HAI/PDFS/PPE/PPE-SEQUENCE.PDF](https://www.cdc.gov/hai/pdfs/ppe/ppe-sequence.pdf)
7. [HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/HCP/PPE-STRATEGY/FACE-MASKS.HTML](https://www.cdc.gov/coronavirus/2019-ncov/hcp/ppe-strategy/face-masks.html)
8. [HTTPS://WWW.VOX.COM/THE-GOODS/2020/3/20/21188369/FACE-MASKS-SHORT-SUPPLY-CORONAVIRUS-DONATIONS](https://www.vox.com/the-goods/2020/3/20/21188369/face-masks-short-supply-coronavirus-donations)

LIST OF LINKS

- **CDC CORONAVIRUS HOMEPAGE**

[HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/INDEX.HTML](https://www.cdc.gov/coronavirus/2019-ncov/index.html)

- **WHO CORONAVIRUS HOMEPAGE**

[HTTPS://WWW.WHO.INT/EMERGENCIES/DISEASES/NOVEL-CORONAVIRUS-2019](https://www.who.int/emergencies/diseases/novel-coronavirus-2019)

- **CDC HANDWASHING GUIDELINES**

[HTTPS://WWW.CDC.GOV/HANDWASHING/SHOW-ME-THE-SCIENCE-HAND-WASHING.HTML](https://www.cdc.gov/handwashing/show-me-the-science-handwashing.html)

- **CDC CLEANING PROTOCOL**

[HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/COMMUNITY/HOME/CLEANING-DISINFECTION.HTML](https://www.cdc.gov/coronavirus/2019-ncov/community/home/cleaning-disinfection.html)

- **EPA-APPROVED CLEANERS**

[HTTPS://WWW.EPA.GOV/SITES/PRODUCTION/FILES/2020-03/DOCUMENTS/SARS-COV-2-LIST_03-03-2020.PDF](https://www.epa.gov/sites/production/files/2020-03/documents/sars-cov-2-list_03-03-2020.pdf)

- **CDC HOME GUIDELINES IF SOMEONE FALLS ILL**

[HTTPS://WWW.CDC.GOV/CORONAVIRUS/2019-NCOV/COMMUNITY/HOME/GET-YOUR-HOUSEHOLD-READY-FOR-COVID-19.HTML](https://www.cdc.gov/coronavirus/2019-ncov/community/home/get-your-household-ready-for-covid-19.html)

- **WHO CORONAVIRUS MYTH-BUSTING**

[HTTPS://WWW.WHO.INT/EMERGENCIES/DISEASES/NOVEL-CORONAVIRUS-2019/ADVICE-FOR-PUBLIC/MYTH-BUSTERS](https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/myth-busters)

- **NEW YORK TIMES FREE CORONAVIRUS COVERAGE**

[HTTPS://WWW.NYTIMES.COM/NEWS-EVENT/CORONAVIRUS](https://www.nytimes.com/news-event/coronavirus)

ABOUT YOUR CORONAVIRUS HANDBOOK

THIS DOCUMENT WAS WRITTEN BY LAINE YUHAS, A FREELANCE JOURNALIST WITH A DEGREE IN PRINT & MULTIMEDIA STUDIES FROM EMERSON COLLEGE.

DURING HER LAST SEMESTER AT EMERSON, SHE REPORTED ON THE SWINE FLU OUTBREAK. DURING THE 2013-2016 EBOLAVIRUS OUTBREAK, SHE MAINTAINED THE POP-UP INFORMATION SITE “WORLD AGAINST EBOLA” (NOW DEFUNCT). SHE IS CURRENTLY WORKING ON A SERIES OF NON-FICTION BOOKS THAT EXPLORE THE MOST SIGNIFICANT NATURAL DISASTERS IN AMERICAN HISTORY.

SIGN UP FOR HER NEWSLETTER AT **LAINEYUHAS.COM**.

IF YOU FOUND THIS BOOK HELPFUL, YOU CAN DIRECTLY SUPPORT YUHAS’S WORK AND UPCOMING PROJECTS BY BUYING HER A COFFEE AT **KO-FI.COM/CORONAVIRUSHANDBOOK**.

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