

## Coronavirus Disease 2019 (COVID-19): FAQs for Transplant Recipients



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**Information regarding COVID-19 is changing rapidly. This document will be updated as able with new information. Please contact your transplant center with specific concerns.**

### **Background:**

Coronaviruses are common viruses that usually cause a simple cold. When new strains of viruses emerge, they can cause more severe disease as seen with the recent novel coronavirus disease called Coronavirus disease 2019 (COVID-19). This coronavirus is called Severe Acute Respiratory Syndrome 2 virus (SARS-CoV-2). This new virus and disease were the cause of the outbreak in Wuhan, China, starting in December 2019 and now has spread to most parts of the world.

### **COVID-19 symptoms:**

- Fever
- Cough
- Shortness of breath/difficulty breathing
- Chills/repeated shaking
- Muscle pains
- Sore throat
- Other flu-like symptoms
- Nausea, diarrhea, abdominal pain
- Loss of sense of smell and/or taste
- Some transplant recipients may develop pneumonia

Currently there are no antivirals or vaccines effective against this virus, although studies to develop these are ongoing.

**Many transplant recipients and their families have questions regarding COVID-19.**

**The information and questions below are designed to help give answers with currently available information, as well as links to national and international websites for regularly updated information.**

## **Frequently Asked Questions:**

### **Q: Are transplant recipients at higher risk for the virus?**

**A:** We do not have specific information on whether COVID-19 infection will be more severe in transplant recipients compared to healthy people; however, other viruses often cause more severe disease in people whose immune system is low, such as transplant recipients. For this reason, it is important to take precautions to prevent infection.

Infection occurs mostly through close, direct contact with someone who is carrying the virus.

- Infection occurs mostly through close contact, direct contact with someone who is carrying the virus.
- People are thought to be most contagious when they have symptoms, BUT some people may carry the virus even if they are not showing symptoms or only mildly ill.
- It may be possible to catch the virus from a surface that an infected person touched if they touched their nose or mouth without washing their hands before placing them on the surface (like door handles, table tops, etc.).
- The chances of being infected depend on whether there are infected individuals surrounding the transplant recipient.

### **Q: Are there any travel restrictions for transplant recipients?**

**A:** COVID-19 was declared a pandemic on March 11, 2020, which means it is found in most areas of the world. Please visit the [CDC website](#) for information regarding numbers of infections across the globe. For the most up-to-date travel advisories, please visit the [U.S. Department of State website](#).

We currently recommend that transplant recipients:

- Follow public health recommendations for **social distancing**. Stay home as much as possible and put distance between you and other people if you must be out.
- **Avoid travel unless absolutely necessary.** We also highly suggest that transplant recipients' immediate household contacts should postpone non-essential travel.
- **Avoid crowds**, especially if you live in an area where COVID-19 is being seen. The level of risk varies by country and area, and it is changing quickly. Stay up to date with what is happening in your local community.

Travel restriction recommendations are likely to change over time. Check frequently for updated recommendations:

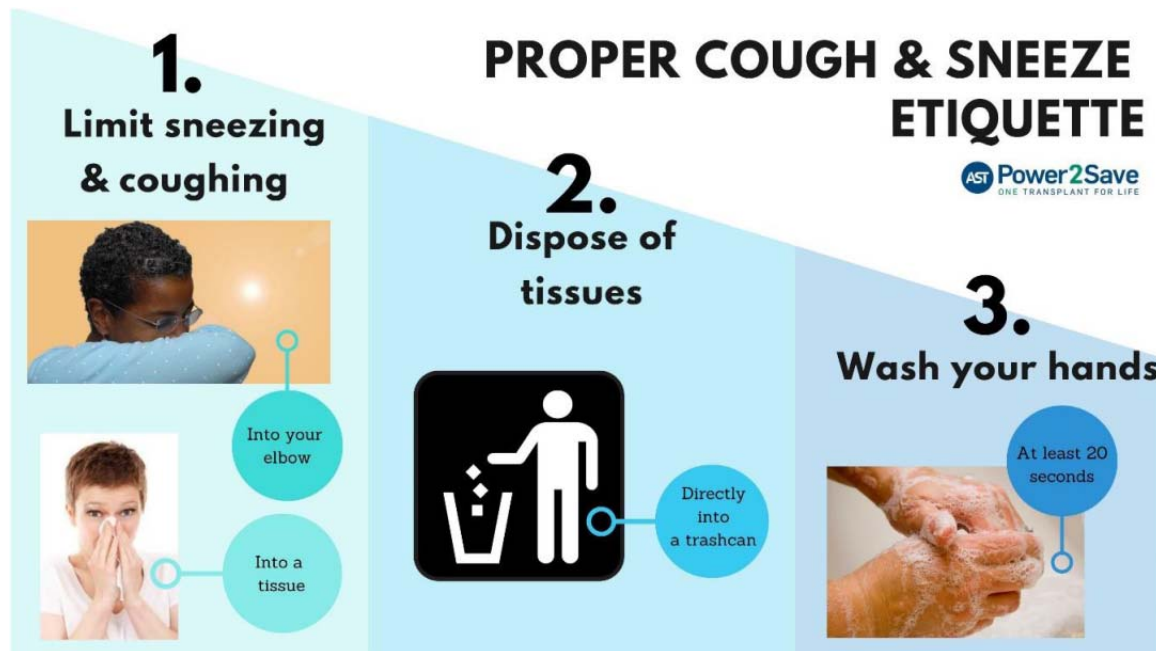
- Centers for Disease Control and Prevention (CDC)
- World Health Organization (WHO)
- Public Health Agency of Canada

**Q: My family member just returned from an area with high COVID-19 activity. What should I do?**

**A:** It is best to avoid close contact for 14 days with individuals who returned from an area where they could have been exposed to COVID-19. If the individual remains healthy after 14 days, contact can be resumed.

If avoiding contact is not possible, it is recommended to:

- Practice frequent handwashing or hand sanitizer use
- All household members should avoid touching their eyes, mouths and noses.
- Try to limit your contact with the family member. Maintain as much separation as possible.
- Frequently clean and disinfect high contact surfaces such as tables doorknobs and faucets
- Cough and sneeze etiquette should be practiced (see figure below).



**Q: Should transplant recipients wear a mask or avoid public places?**

**A:** The CDC now recommends wearing cloth face coverings in public settings where other social distancing measures may be difficult to maintain. Recent studies indicate that COVID-19 can be transmitted before infected individuals begin to show symptoms. The virus can be spread speaking with someone who is COVID-19 positive in addition to those who may be coughing or sneezing.

The cloth face coverings recommended are not surgical masks or N-95 respirators. Masks or cloth face coverings will prevent you from touching your nose and mouth and prevent you from spreading the virus if you do not know you are infected. The CDC has a video regarding [how to make your own face mask](#).

Again, transplant recipients should **avoid crowds**.

If you have a fever and are coughing and sneezing, you should:

- Tell your transplant center
- Put on a mask or cloth face covering when you are within 6 feet of other people

It is important to remember that the wearing of a mask should continue to be combined with good hand hygiene.

## THE N95 VERSUS THE SURGICAL MASK

What are the differences? What is recommended?



### N95 MASK

- Should be used **ONLY** by healthcare professionals
- Require testing to ensure the proper fit
- Use of this mask is **NOT** recommended for the public to prevent infection by the CDC or WHO



### SURGICAL MASK

- Commonly seen within hospital or doctor's office waiting rooms
- Recommended for community use to prevent spreading germs to others via coughing or sneezing
- Will not 100% prevent someone from getting an illness from other people
- Can prevent one from touching their mouth or nose with their hands

### Q: What should I do if I have flu-like/respiratory symptoms?

**A:** There are many different causes for fever, cough, shortness of breath, stomach upset and flu-like symptoms. However, if testing is available, COVID-19 should be ruled out for most patients with these symptoms in the US and Canada. If you believe you have COVID-19 based on your symptoms, call your transplant team for further instructions. If you have a cough or fever, try to avoid being out in public. If you must leave home and you have access to a mask, place a **surgical mask or cloth covering** on (refer to figure above titled "The N95 Versus the Surgical Mask") when in public to avoid the spread of infection to anyone else.

If you have only mild symptoms your transplant center may not want you to come to the clinic, **so talk with your transplant center FIRST** before coming to a hospital or clinic.

### Q: What should I do if a family member/co-worker is diagnosed with COVID-19?

**A:** If a close contact is diagnosed with or suspected of having COVID-19, you should:

- Avoid all further contact with this person if possible (sleep in separate rooms, use separate bathrooms). If this is not possible, ensure you are both wearing masks when within 6 feet of each other.
- Let your transplant coordinator know that they have been in contact with someone diagnosed with COVID-19.
- Monitor for symptoms (see above) and contact your transplant coordinator immediately if you develop fever, cough or shortness of breath.

Currently, there is no approved vaccine or medication to treat or prevent infection, but clinical trials are in development.

**Q: How can I get tested to see if I have COVID-19?**

**A:** At this moment, testing for the virus that causes COVID-19 is available through different mechanisms in different locations. If you believe you have COVID-19, call your transplant team for further instructions, as they will be aware of what is available in your area.

**Q: Is it safe for me to go to the hospital for appointments?**

**A:** Healthcare facilities are evaluating patients for the risk of COVID-19, and if the suspicion is high, those patients are being isolated. Additional protective measures are being instituted as the outbreak progresses, including delaying routine visits for well transplant recipients who are at least several months post-transplant, in addition to Tele-Medicine and Telephone visits. Please contact your transplant coordinator for further instruction.

**Q: What can I do to prepare for an outbreak of COVID-19 in my area?**

**A:** We recommend that you be mindful of what is happening in your community by checking the local public health reports.

Some other things to consider:

- Avoid crowded areas and sick individuals
- Wash hand frequently
- Ensure you have enough supplies and medication o If possible, have at least 2 weeks of your medicines remaining at all times.
  - Check to see if your insurance allows for 90-day supply rather than a 30-day supply.
  - If you're insurance supplies 30 days at a time, do not wait until the day before to refill, but refill a week in advance each time.
- For your medicines, consider:
  - Mailed to your home
  - Using a pharmacy drive-thru
  - Having your caregiver pick up your medicines from the pharmacy so that you may avoid crowded places

**Q: I am awaiting a transplant. Could I get COVID-19 from my donor?**

**A:** The risk of acquiring COVID-19 from organ donation is low. Donors are being screened for COVID-19 symptoms and exposure history, including travel. Many Organ Procurement Organizations are testing some or all donors for COVID-19

Living donors who have been to high-risk areas or exposed to someone diagnosed or being evaluated for COVID-19 infection are generally being asked to postpone donation for 14 to 28 days after returning. Also, living donors are being asked to not travel to high-risk areas and to self-quarantine for at least 14 days before donation and monitor for symptoms.

**Q: What do I do if my community is “re-opening” or loosening stay at home orders?**

**A:** If you are being asked to return to work where you will have close interactions with people, you may be able to get a medical exemption and should discuss with your workplace and/or transplant team. You can also inquire about reassignment to an area with fewer person-to-person interactions. We recommend that you continue to practice social distancing as much as possible and continue to wear face coverings or masks when leaving the house until COVID-19 infections are minimal in your area

**Q: Where can I get up-to-date information about COVID-19?**

**A:** The CDC and WHO are working hard to maintain up to date information about the spread of COVID-19 including changing conditions in the United States.

For further information:

<https://www.cdc.gov/coronavirus/2019-ncov/index.html>

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>