Coronavirus Disease 2019 (COVID-19) Frequently Asked Questions

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Acronyms and abbreviations used in this document:

- 2019-nCoV: 2019 Novel Coronavirus
- CDC: US Centers for Disease Control & Prevention
- COVID-19: Coronavirus Disease 2019
- EUA: Emergency Use Authorization
- FDA: US Food & Drug Administration
- HI-EMA: Hawaii Emergency Management Agency
- HDOH: State of Hawaii Department of Health
- MERS: Middle East Respiratory Syndrome
- SARS: Severe Acute Respiratory Syndrome
- SARS-CoV-2: Severe Acute Respiratory Syndrome Coronavirus 2
- UHM: University of Hawai‘i at Mānoa
- VAERS: Vaccine Adverse Event Reporting System
- WHO: World Health Organization

This document provides reliable and up-to-date information to the general public during the continuing COVID-19 global pandemic. Key messages are the importance of preventive measures, such as

- practicing social distancing during the COVID-19 pandemic
- frequent hand-washing
- wearing cloth face coverings (“masks”) when out in public
- avoiding touching your face with dirty hands
- staying home when you are sick
  - Do not go to work, school, and other activities if you are feeling ill.

Symptoms of COVID-19 include fever, cough, and shortness of breath or trouble breathing, as well as chills, muscle pain, sore throat, new loss of taste or smell, and others.

OVERVIEW

1. What is COVID-19?
2. How does COVID-19 spread?
3. Can someone spread COVID-19 if they have no symptoms?

SYMPTOMS AND TREATMENT

4. What are the symptoms of COVID-19?
5. Are there emergency signs of COVID-19? What should I do if I have them?
6. How long does it take for symptoms to appear?
7. Are there complications from COVID-19?
8. Should I be tested for COVID-19 infection?
9. If I test negative, does that mean I cannot get COVID-19?

10. What is a “close contact”?

11. Who is at greatest risk for severe illness from COVID-19?

12. What other conditions can make you vulnerable for severe illness from COVID-19?

13. Are children affected by COVID-19 in any unique way?

14. Are some ethnicities more likely to get coronavirus than others?

15. What is the test for SARS-CoV-2 or COVID-19? Can any laboratory in Hawaii test for it?

16. What is an antibody test?

17. I took a serological (blood) test that says I have antibodies for the virus that causes COVID-19. Does that mean I can stop quarantining or social distancing?

18. How is COVID-19 treated?

19. How long is a person with COVID-19 infection contagious? When can they be around others?

**SITUATION IN HAWAII AND THE UNITED STATES**

20. How many cases of COVID-19 have there been in Hawaii? How many deaths?


22. Is COVID-19 a danger in Hawaii?

23. What would happen if there is widespread person-to-person transmission in Hawaii or elsewhere in the United States? What is the reason we are trying hard to prevent this?

24. Does HDOH tell us where there is a confirmed case in Hawaii and where the case is located?

25. Does HDOH release the names of confirmed cases, deaths, or persons under investigation?

26. What is the guidance for home isolation and quarantine?

27. Can I get a “clearance letter” after my isolation or quarantine is over?

28. What are the differences between “isolation” and “quarantine”?

29. If I am working with COVID-19 patients or I know of someone who has COVID-19, what can I do to protect and help reduce stigma for that person?

30. When there are cases in Hawaii, how are they isolated? What are the procedures and protocols?

31. If I need to isolate but cannot safely do so at home, how can I use the “isolation and quarantine hotel” that I’ve heard about?

32. What is self-monitoring?

33. What is HDOH doing to monitor the situation with COVID-19?

34. What are hospitals in Hawaii doing about COVID-19?

**PREVENTION AND PROTECTION**

35. What measures are being done to prevent widespread transmission?

36. Is there a lockdown on Oahu because of high numbers of cases?

37. What are the restrictions on islands other than Oahu?

38. What kind of alcohol is safe to have in hand sanitizer?
39. Are there other safety concerns for alcohol-based hand sanitizers?
40. Should I delay other medical care due to COVID-19? How can I safely get medical care?
41. I am currently pregnant. What should I be aware of regarding COVID-19?
42. I have COVID-19. Can I breastfeed my baby?
43. Is there a vaccine for SARS-CoV-2 / COVID-19?
44. Does the flu shot provide any protection against COVID-19?
45. Why should I get the flu shot then?
46. Will wearing a mask protect me from COVID-19? Why should I wear a mask?
47. What other things should I know about wearing a cloth face covering ("mask")?
48. What is an N95 respirator? How is it different from a surgical mask?
49. What can I do to protect my mental and emotional health, or that of my family members, during the COVID-19 outbreak?
50. What can I do to protect my child’s mental and emotional health during the COVID-19 outbreak?

VACCINE-RELATED QUESTIONS
51. When will a COVID-19 vaccine be available in Hawaii?
52. How much will the COVID-19 vaccine cost?
53. How many doses of the vaccine are needed and why?
54. Who are the first people eligible to receive the COVID-19 vaccine?
55. How will I know when it’s my turn to receive the COVID-19 vaccine?
56. Will there be enough vaccine for everyone in Hawaii?
57. Can the COVID-19 vaccine give someone COVID-19?
58. Is the COVID-19 vaccine safe for pregnant or breastfeeding women?
59. Is the COVID-19 vaccine available for children or adolescents?
60. If I have already had COVID-19 and recovered, do I still need to get vaccinated with a COVID-19 vaccine when it’s available?
61. Can I take the COVID-19 vaccine with other vaccines, like the flu vaccine?
62. Do I need to wear a mask when I receive the COVID-19 vaccine?
63. Will I need to wear a mask and avoid close contact with other people after I have received two doses of the COVID-19 vaccine? When can I stop wearing a mask?
64. Are there other vaccines that can help prevent me from getting COVID-19? Does getting the annual flu shot help?
65. Does immunity after getting COVID-19 last longer than the protection you would get from a COVID-19 vaccine? How long will the vaccine protect people?
66. Does the COVID-19 vaccine have any side effects? Can it cause you to get sick?
67. What is “herd immunity” and how does it work? What percentage of the population needs to get vaccinated to have herd immunity to COVID-19?
68. Is the COVID-19 vaccine safe?
69. How do I report it if I have a problem or bad reaction after getting a COVID-19 vaccine?
70. **Why would a vaccine be needed if we can do other things, like social distancing and wearing masks, to prevent the virus that causes COVID-19 from spreading?**

**TRAVEL-RELATED QUESTIONS**

71. **Is it safe to travel within the United States during the COVID-19 outbreak?**
72. **Is it safe to travel internationally?**
73. **Is Hawaii quarantining travelers to our state?**
74. **Is Hawaii quarantining travelers between our islands?**
75. **Who has to use the Safe Travels online digital form for interisland travel and how do they do it? Is it mandatory?**
76. **Are there exceptions or alternatives to the 10-day quarantine for travelers to Hawaii?**
77. **What are the criteria for the pre-travel testing program?**
78. **Are any follow-up tests required besides the pre-travel negative test?**
79. **Who are the “trusted testing and travel partners” in the United States?**
80. **Who are the “trusted testing and travel partners” in Japan?**
81. **Who are the “trusted testing and travel partners” in Canada?**
82. **Are there special quarantine conditions for students attending University of Hawaii campuses across the state, such as UHM, Chaminade University, and Hawaii Pacific University?**

**OTHER QUESTIONS**

83. **Should I be worried about products imported from China?**
84. **What about animal products from China?**
85. **Is my pet at risk of getting COVID-19? Do animals in Hawaii have COVID-19?**
86. **If I think I or my family member has contracted COVID-19 but we have no health insurance due to a lost job or other situation, what should we do? Will we be turned away from a hospital?**
87. **Is there money available for people who have lost their jobs due to the pandemic or the pandemic response but may not be eligible for traditional unemployment insurance?**
88. **Is there rental assistance available for people who have lost income due to the pandemic?**
89. **What is the correct name of this outbreak’s disease and the virus that causes it?**
90. **What are coronaviruses?**
91. **Where can I find out more information?**

**OVERVIEW**

**What is COVID-19?**
COVID-19 is a new respiratory virus that was first identified in the central Chinese city of Wuhan, in Hubei Province, in December 2019. It has since spread across China and around the
world. On January 30, 2020, the WHO declared a Public Health Emergency of International Concern and on March 11 declared a pandemic (global outbreak of a disease). The most updated numbers can be found at the HDOH website: health.hawaii.gov/covid19.


How does COVID-19 spread?
We are still learning how COVID-19 spreads. Although SARS-CoV-2 (the virus that causes COVID-19) likely came from an animal source, it is now primarily spread from person-to-person. Some viruses are very contagious (like measles), while other viruses are less so. This virus spreads very easily and sustainably between people.

Like most coronaviruses (including the common cold), the virus causing COVID-19 spreads mainly through the tiny droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby and possibly be inhaled into the lungs. People infected with the virus causing COVID-19 can also spread the virus, even if they do not have symptoms of COVID-19.

At this time, our best research shows that COVID-19 is spread in the following ways:

- The virus causing COVID-19 spreads more efficiently than influenza, but not as efficiently as measles, which is highly contagious.
- It spreads most easily between people who are in close contact with one another (within about 6 feet).
- The virus travels through respiratory droplets produced, especially when an infected person coughs or sneezes, but possibly also when they talk, yell, or sing.
- These droplets can land in the mouth or nose of someone nearby or possibly inhaled into the lungs.
- COVID-19 may spread like this even if the infected person is not showing symptoms (“asymptomatic”) and does not know they are infected.
- There is evidence 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 eyes; however, this is not thought to be a main way the virus spreads.
- Mother-to-child transmission during pregnancy seems to be rare, but after birth a newborn is susceptible to person-to-person spread through respiratory droplets. (Please see I am currently pregnant and Can I breastfeed my baby? in a later section to see how pregnant and breastfeeding mothers can protect their child.)
- At this time there is no evidence that the virus spreads through food. The risk of getting COVID-19 from food you cook yourself or from handling and consuming food from restaurants and takeout or drive-thru meals is thought to be very low.
You can learn more about how COVID-19 spreads at the following website: 

Can someone spread COVID-19 if they have no symptoms?
Although the virus is usually spread from infected people who have symptoms of COVID-19 (“symptomatic”), we now know that people infected with the virus who have no symptoms (“asymptomatic”) or who are not yet showing symptoms (“pre-symptomatic”) can also spread the virus to other people. This is why it is important for people to wear face coverings in public or in close proximity to other people even if they think they are not infected.

SYMPTOMS AND TREATMENT

What are the symptoms of COVID-19?
Patients with COVID-19 generally report mild symptoms to severe illness, usually 2 to 14 days after exposure. If you have these symptoms, contact your healthcare provider:

- Fever or chills
- Cough
- Shortness of breath or trouble breathing
- Muscle or body aches
- Fatigue
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

Some patients may not report fever, especially the very young, elderly, immunosuppressed, and people taking certain fever-lowering medications. Most people have mild illness and are able to recover at home.

The above list does not include all possible symptoms. This list will be updated as CDC and other researchers learn more.

Are there emergency signs of COVID-19? What should I do if I have them?
People who have COVID-19 or think they have COVID-19 should watch for emergency warning signs and seek emergency medical care immediately, by calling 911 or calling ahead to their local emergency facility (and notifying the operator that they are seeking care for someone who has or may have COVID-19). These emergency warning signs include the following:

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
• Inability to wake or stay awake
• Bluish lips or face

How long does it take for symptoms to appear?
CDC believes the symptoms of COVID-19 may appear as early as 2 days after exposure and as long as 14 days after exposure.

Are there complications from COVID-19?
Many patients with COVID-19 have developed pneumonia in both lungs. In a small percentage of cases, death has occurred. Some people have developed long-term health conditions even after their COVID-19 infection has cleared.

Should I be tested for COVID-19 infection?
You should call ahead to a healthcare provider to find out about getting tested for COVID-19 infection if one of the following is true:

- You are a close contact of a person with a laboratory-confirmed COVID-19 infection, whether you are symptomatic or asymptomatic.
- You have recently traveled outside Hawaii and have symptoms of COVID-19.
- You have symptoms of respiratory illness (such as cough or shortness of breath).

People at higher risk for severe disease (older people, those with chronic medical conditions and immunosuppression) should also be prioritized for testing. They should contact a healthcare provider who can help determine whether they should be tested for COVID-19. You can also check out the CDC’s “Coronavirus Self-Checker” to see if you should contact a healthcare provider: [www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html](http://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/symptoms.html).

People who have traveled to areas that have community spread of COVID-19, which includes much of the US Mainland as well as other countries, should do the following:

- Monitor their health for 14 days after leaving those areas.
- Call their healthcare provider for guidance and tell them about their symptoms and travel history if they develop a fever or cough.


People who have tested positive for COVID-19 but have recovered from their symptoms may continue to test positive for three months or more without being able to spread the virus to others. These people should get tested again only if they develop new symptoms of COVID-19. They should speak with their healthcare provider about getting tested if they have been in close contact with someone who has COVID-19 in the last 14 days.
If I test negative, does that mean I cannot get COVID-19?
No. A negative test means you probably were not infected at the time your sample was collected. It does not mean you cannot get infected or get sick later.

What is a “close contact”?
A close contact is someone who meets one of the following descriptions:
- They have been within 6 feet of a COVID-19-infected person for 15 minutes or longer.
- They have been directly in contact with a COVID-19-infected person’s secretions (e.g., they were coughed on).

Who is at greatest risk for severe illness from COVID-19?
Those at higher risk include older adults and anyone with underlying health conditions, although people of all ages and healthy people are also at risk.

Those in the following groups are most vulnerable to severe illness from COVID-19:
- Older adults
  - Risk goes up with age, although all ages have some risk.
  - The greatest risk for severe illness is among those aged 85 and older.
- People of any age with these conditions:
  - Cancer
  - Chronic kidney disease
  - COPD (chronic obstructive pulmonary disease)
  - Weakened immune system (immunocompromised) from organ transplant
  - Obesity (body mass index [BMI] of 30 or higher)
  - Serious heart conditions (e.g., heart failure, coronary artery disease, or cardiomyopathies)
  - Sickle cell disease
  - Type-2 diabetes mellitus (formerly known as adult-onset diabetes)

What other conditions can make you vulnerable for severe illness from COVID-19?
Other conditions may put people at increased risk for severe illness from COVID-19, including children. These include the following:
- Asthma (moderate to severe)
- Cerebrovascular disease (affecting blood vessels and blood supply to the brain)
- Hypertension or high blood pressure
- Weakened immune system (immunocompromised) from blood or bone marrow transplant, immune deficiencies, HIV, use of corticosteroids, or use of other immune weakening medicines
- Neurologic conditions such as dementia
- Liver disease
- Pregnancy
- Pulmonary fibrosis (having damaged or scarred lung tissues)
• Smoking
• Vaping
• Thalassemia
• Type-1 diabetes mellitus
• Social determinants of health
  o Crowded housing, poor access to quality healthcare, lower income, incarceration, resident of long-term care facility, certain occupations

People with underlying medical conditions are advised to keep their healthcare appointments, practice preventive measures (e.g., social distancing, frequent hand-washing, wearing face coverings, etc.), and make sure to have at least a 30-day supply of prescription and non-prescription medicines.

Are children affected by COVID-19 in any unique way?
Although children are generally at much lower risk than older adults, there have been over 1,000 cases of a rare but serious condition associated with children called Multisystem Inflammatory Syndrome in Children (MIS-C). It can begin weeks after a child is infected with the virus causing COVID-19, even in children who had not shown symptoms of COVID-19. As of October 23, twenty deaths are considered likely due to MIS-C.

MIS-C has been described as inflammation across multiple body systems, potentially including the heart, lungs, kidneys, brain, skin, eyes, and gastrointestinal organs. Symptoms can include abdominal pain, vomiting, diarrhea, neck pain, rash, conjunctivitis, and fatigue.

You can learn more about MIS-C at the following CDC page: emergency.cdc.gov/han/2020/han00432.asp.

Are some ethnicities more likely to get coronavirus than others?
No, viruses cannot target people from specific populations, ethnicities, or racial backgrounds. People who have not been in contact with a person who is a confirmed or suspected case are not at greater risk of acquiring and spreading this new virus than others. In particular, people of Chinese or other East Asian descent are not more likely to get or spread the coronavirus.

There is increasing evidence, however, that certain racial and ethnic groups may be more adversely affected than other groups. This is largely due to inequities in social determinants of health, such as poverty and inadequate access to healthcare, that affect some groups worse than others. Some groups are also disproportionately represented in essential work settings and thus at greater risk. Such groups may include Pacific Islanders and foreign-born individuals, as well as Black Americans, people of Hispanic or Latino background, and Native Americans.

What is the test for SARS-CoV-2 or COVID-19? Can any laboratory in Hawaii test for it?
SARS-CoV-2 (the virus that causes COVID-19) is detected through laboratory testing of respiratory specimens and serum (blood). A viral test is looking for genetic material of the virus,
which will be in your respiratory samples if you are currently infected. An antibody test (see below) looks for antibodies.

Healthcare providers who think their patients may have COVID-19 can work with HDOH to have their specimens tested. Testing can be performed at the Hawaii State Laboratories Division, at CDC in Atlanta, Georgia, and at some commercial labs.

**What is an antibody test?**
An antibody test (also referred to as a serology test or serologic test) is a blood test that can see if you have antibodies against a microorganism, such as the virus that causes COVID-19. (Antibodies are specific proteins your body makes in response to infections.)

These are things you should know about antibody tests:

- **An antibody test might** determine if you have previously been exposed to that particular microorganism. According to CDC, it is possible that a positive test result means you have antibodies from an infection with another virus from the coronavirus family.

- **An antibody test should not be used to find out if you have a current infection because it can take 1 to 3 weeks after infection to make antibodies.** A viral test using samples from a person’s respiratory system is needed to determine if they are currently infected.

- CDC does not know yet if having antibodies to the virus can protect someone from getting infected with the virus again or how long that protection might last.

You can read more about antibody testing here: [www.cdc.gov/coronavirus/2019-ncov/lab/serology-testing.html](http://www.cdc.gov/coronavirus/2019-ncov/lab/serology-testing.html).

**I took a serological (blood) test that says I have antibodies for the virus that causes COVID-19. Does that mean I can stop quarantining or social distancing?**
No, if you have been ordered to quarantine, you must abide by the rules of your quarantine until the Department of Health tells you that you can stop.

Scientists are still conducting studies on serologic testing for COVID-19 and it is not clear if the presence of antibodies found in these tests accurately indicates immunity against COVID-19.

**How is COVID-19 treated?**
There are no specific antiviral treatments proven effective for COVID-19 at this time, although remdesivir has shown some promise for severe illness and possibly for shortening illness in others. Most people have mild illness and are able to recover at home; they may receive supportive care to help relieve symptoms. In severe cases, however, treatment should include care to support vital organ functions.
How long is a person with COVID-19 infection contagious? When can they be around others? CDC and others continue to study available data to better understand this. Very likely, as with other coronaviruses, a person is infectious as long as they are ill. However, we continue to monitor the situation to update the information.

Generally, if you have COVID-19, you can be around others in the following situations:

- You can be around others after you receive two negative test results in a row, at least 24 hours apart from each other.
- If you think or know you had COVID-19 and you had symptoms, then after all of the following:
  - 3 days with no fever
  - Symptoms improved
  - 10 days since symptoms first appeared
- If you tested positive for COVID-19 but had no symptoms:
  - 10 days after your test if you continue to have no symptoms
  - If you develop symptoms after testing positive, follow the guidance above for If you think or know you had COVID-19, and you had symptoms

**Situation in Hawaii and the United States**

How many cases of COVID-19 have there been in Hawaii? How many deaths? Hawaii has experienced well over ten thousand cases and over two hundred deaths. The latest numbers can be found at the HDOH website: [health.hawaii.gov/coronavirusdisease2019](http://health.hawaii.gov/coronavirusdisease2019).

Am I at risk for COVID-19 in the United States? Yes, people across the country are at risk for COVID-19. Millions of people are confirmed to have been infected across the US, with over 300,000 deaths associated with COVID-19. Even with stay-at-home orders having been in place across much of the United States since March, CDC expects many more cases to be identified in the coming months. The latest updates are available at CDC’s [COVID-19 website](http://www.cdc.gov/coronavirus2019-ncov/) and HDOH’s [COVID-19 website](http://health.hawaii.gov/coronavirusdisease2019/).

For the general public who has not encountered someone with COVID-19, the immediate risk to their health from COVID-19 is considered low if they take preventive measures such as wearing masks when in public spaces (including public transportation), practicing social distancing, and frequent hand washing, but as the outbreak continues, that risk can increase.

The following people are at increased risk:

- People in places where ongoing community spread is reported are at elevated risk of exposure.
- People who have traveled to places with ongoing community spread.
• Family members or close household contacts caring for people with COVID-19.
• Older adults and people with underlying medical conditions who may experience more severe illness if they become infected.

No matter what their risk is, everyone is advised to always wear masks in public (including public transportation), practice “social distancing” to protect themselves and others, and frequently wash their hands. Public health authorities such as CDC and HDOH want everyone to be prepared for the likelihood that COVID-19 will continue to spread widely in the United States for months to come.

Is COVID-19 a danger in Hawaii?
There have been over ten thousand cases of COVID-19 in Hawaii, with hundreds of deaths. So far, many cases have been travel-related or contacts of people who have traveled, but a number have been a part of local clusters, such as parties or in care facilities. CDC is notified of all cases and close contacts of the cases are identified and informed of their exposure, a process called “contact tracing.” This is done through local contact tracers and disease investigators, using information from positive cases as well as location data. Federal, state, and local officials in Hawaii recognize the seriousness of the situation and work diligently with federal officials around the clock to prevent spread of COVID-19 within our state.

HDOH is urging all residents to prepare for the likelihood that COVID-19 will continue to spread widely in our communities. HDOH wants the public to know and practice important preventive measures, such as social distancing, use of cloth facial coverings (“masks”) when out in public or around other people (including when using public transportation), and frequent handwashing with soap and water for 20 seconds or with alcohol-based hand sanitizer (containing at least 60 percent alcohol), to prevent spread of COVID-19. A short HDOH video demonstrating proper hand-washing technique can be found at: www.youtube.com/watch?v=W2r2iqbEM5s.

Regardless of how widespread COVID-19 becomes in Hawaii, our access to certain resources could still be impacted by this outbreak. Hawaii residents should make sure they and their household are prepared with a family emergency kit that lasts at least 14 days, in case a family member is quarantined or if there is a shortage of certain goods, such as medicine and food, in the event of a continuing pandemic. However, residents are reminded that hoarding goods may adversely affect other members of our island community. You can learn more about preparing a family emergency kit at health.hawaii.gov/prepare/protect-your-family.

HDOH is continually updating information as the situation evolves and federal guidance changes. We urge everyone to learn about COVID-19 by staying informed with credible sources, such as CDC’s website and HDOH’s two websites www.hawaii.covid19.com and health.hawaii.gov/covid19.
What would happen if there is widespread person-to-person transmission in Hawaii or elsewhere in the United States? What is the reason we are trying hard to prevent this?

While proactively carrying out prevention measures may slow the spread of COVID-19, it is important to be prepared for the possibility that it will become more widespread in Hawaii.

According to CDC, if there is widespread transmission of COVID-19 in a particular area, there would be large numbers of people needing medical care at the same time, overwhelming hospitals and healthcare providers and public health, with elevated rates of hospitalization, severe illness, long-term health problems and death. Other critical infrastructure, such as law enforcement, emergency medical services, and the transportation industry may also be affected.

At this time, there is no vaccine to protect against COVID-19 and no medications approved to treat it, so in order to prevent or reduce person-to-person transmission, Hawaii and other states have issued stay-at-home orders asking people to shelter in place for at least several weeks. (See What measures are being done to prevent widespread transmission? below.)

Does HDOH tell us where there is a confirmed case in Hawaii and where the case is located?

HDOH informs the public whenever there are new confirmed cases. A map of the areas where there have been cases can be found at this HDOH site: health.hawaii.gov/coronavirusdisease2019/what-you-should-know/current-situation-in-hawaii.

Does HDOH release the names of confirmed cases, deaths, or persons under investigation?

HDOH protects the privacy of persons and their households and does not release names or other information that could be used to identify a person infected with COVID-19, someone who has died, or someone under quarantine. HDOH may release information about the number of people infected based on county or ZIP code.

At the same time, those who may have been exposed have a right to know and to protect themselves. When HDOH identifies a potential case of COVID-19, a detailed investigation is performed that includes tracing and contacting all close contacts of that person during the time that they were infectious. Since the virus is spread by prolonged close contact, people who have briefly been in the same indoor environment or had brief interactions are not considered to be at risk for infection.

What is the guidance for home isolation and quarantine?

People who have tested positive for COVID-19 and the people they have come in close contact with, both at home and outside the household, must take precautions to protect themselves and the community by preventing further spread of the coronavirus.

**Person with COVID-19 (mild to moderate illness who is not severely immunocompromised)**

If you are a person with COVID-19, you must stay in isolation until the following conditions have been met:
• At least 10 days have passed since your symptoms first appeared and
• At least 24 hours have passed since your last fever without the use of fever-reducing medications and
• Your symptoms (e.g., cough, shortness of breath) have improved.

**Person with COVID-19 who has no symptoms (asymptomatic or pre-symptomatic)**

Even if you do not have any symptoms, if you have a positive COVID-19 laboratory test, **you must stay in isolation until at least 10 days have passed since your first positive test for COVID-19.** If you develop symptoms after testing positive, follow the guidance above for “**Person with COVID-19.**”

**Person who is a close contact of someone with COVID-19**

Until December 2, 2020, CDC had recommended that close contacts of someone with COVID-19 quarantine for 14 days, but this has been reduced to 10 days, with important conditions and exceptions outlined below.

This reduction in quarantine period from 14 days to 10 days for many cases is intended to increase community compliance, help preserve physical and mental health for those in quarantine, and reduce economic hardship resulting from quarantining, while still decreasing the chance of asymptomatic and pre-symptomatic spread as much as possible.

**Person who is a household contact of someone with COVID-19**

If you are in the same household of someone with COVID-19 and you have ongoing contact, **you must stay home in quarantine until 10 days after the person with COVID-19 is released from isolation.** An exception is made for people living or working in congregate settings (see below). During the quarantine you should do the following:

• Stay separate from others, especially people at higher risk for severe illness.
• Self-monitor for symptoms of COVID-19 (e.g., fever, cough, shortness of breath). If possible, check your temperature twice daily.
• If possible, stay at least 6 feet from other people and animals in your household.
• **Even though quarantine may end after 10 days, close contacts within the same household should continue self-monitoring for symptoms and adhere to all recommended prevention measures for the full 14 days (i.e., mask use, social distancing, frequent and thorough hand washing, avoiding crowds, thorough cleaning and disinfecting of area around them, using adequate indoor ventilation).**
• If COVID-19 symptoms appear, quarantine should continue for 14 days.

**Person who is a non-household contact of someone with COVID-19**

If you are a close contact of someone with COVID-19, but not from the same household, **you must stay home in quarantine until 10 days after your last contact with the person**
with COVID-19. An exception is made for people living or working in congregate settings (see below). During this time you should do the following:

- Stay separate from others, especially people at higher risk for severe illness.
- Self-monitor for symptoms of COVID-19 (e.g., fever, cough, shortness of breath). If possible, check your temperature twice daily.
- If possible, stay at least 6 feet from other people and animals in your household.
- Even though quarantine may end after 10 days, non-household close contacts should continue self-monitoring for symptoms and adhere to all recommended prevention measures for the full 14 days (i.e., mask use, social distancing, frequent and thorough hand washing, avoiding crowds, thorough cleaning and disinfecting of area around them, using adequate indoor ventilation).
- If COVID-19 symptoms appear, quarantine should continue for 14 days.
- Close contacts of a COVID-19 case who live or work in congregate settings must adhere to the original 10-day quarantine period. Congregate settings include, but are not limited to, the following:
  - Long-term care facilities
  - Group care homes
  - Assisted living facilities
  - Shelters
  - Military recruit housing
  - Residence halls (dormitories)

*Person who is a contact of a contact of someone with COVID-19*

A contact of a contact is someone who has not come in close contact with a COVID-19 case but has come in close contact with someone who is a close contact with a COVID-19 case. Examples of this include the following:

- Co-workers of household contacts
- Spouse, children, household members, and co-workers of non-household contacts

If the household/non-household contacts are not symptomatic, then the contacts of contacts who are healthy are not required to be in quarantine. That means they may leave the household as long as they follow recommendations for social distancing and face coverings.


*Can I get a “clearance letter” after my isolation or quarantine is over?*

Yes. HDOH provides clearance letters upon request, to inform your employer, school, etc., that you have successfully completed your isolation or quarantine and are able to return to work, study, etc.
You can request a clearance letter from the contact tracer or case investigator who you’ve been in touch with. Some healthcare providers may also be able to provide clearance letters, if you have been seeing them about COVID-19.

**What are the differences between “isolation” and “quarantine”?**
Isolation and quarantine are two important tools for protecting the public during the COVID-19 pandemic. Although some people use the terms interchangeably, they mean different things.

**Isolation**
- Isolation separates sick people from people who are not sick.
- **People who are in isolation must stay home.**
- In the home, anyone who is sick should separate themselves from others by staying in a specific “sick” bedroom or space and using a different bathroom.
- The sick person should wear a face covering if they are in contact with others.
- Isolation in a hotel may be possible for people who cannot safely isolate at home. See

**Quarantine**
- Quarantine separates someone who has been in contact with a person with COVID-19 from other people, in case they have been infected and become sick, to prevent spread.
- **People who are in self-quarantine must stay at home.**
- People in self-quarantine must separate themselves from household members as much as possible.
- People in self-quarantine should monitor their health and wear a face covering (“mask”) if they need to be in contact with others.
- **A mandatory 10-day quarantine is also currently required for travelers from out of state or other countries (“trans-Pacific travelers”) as well as travelers from Oahu to other islands (“inter-island travelers”), except those participating in the pre-travel testing program. Please see Is Hawaii quarantining travelers to our state? for more details on the mandatory 10-day quarantine, and Are there exceptions or alternatives to the 10-day quarantine for travelers to Hawaii? for more details on the pre-travel testing program.**

**If I am working with COVID-19 patients or I know of someone who has COVID-19, what can I do to protect and help reduce stigma for that person?**
There are several things you can do to protect individuals and reduce stigma:
- Maintain privacy and confidentiality of those seeking healthcare and those who may be part of any contact investigation or other services (e.g., wraparound services) related to the COVID-19 outbreak.
- Raise awareness of COVID-19 while showing empathy for people’s concerns and fears.
- Counter myths and rumors by sharing accurate information about how the virus spreads.
- Speak out against negative behaviors, including negative statements on social media about groups of people, or exclusion of people who pose no risk from regular activities.
• Share with others the need for social support for people who have experienced stigma, who have returned from an area with ongoing spread, or who are worried about friends or relatives in affected areas.

When there are cases in Hawaii, how are they isolated? What are the procedures and protocols?
HDOH coordinates closely with Hawaii’s healthcare facilities to ensure any clinic, hospital, or other healthcare setting is ready to care for a person infected or potentially infected with COVID-19 with appropriate isolation precautions. Cases not needing hospitalization will be subject to quarantine with close monitoring by public health and ready access to medical care.

If I need to isolate but cannot safely do so at home, how can I use the “isolation and quarantine hotel” that I’ve heard about?
Temporary housing is provided for people with COVID-19 to isolate themselves if they cannot safely do so at home. You can request assistance or a referral for this facility by calling the Hawaii CARES call center at 808-832-3100. An HDOH representative will help you complete a referral form over the telephone. You can also fill out an online form to request these services directly at go.hawaii.edu/323.

Referral does not guarantee placement in a hotel. Your form will be assessed by HDOH to determine eligibility before placement.

What is self-monitoring?
People with travel history to areas where there is widespread community transmission but who have no symptoms of COVID-19 may be asked to stay home or in their hotel room and self-monitor for 10 days and check themselves for symptoms of COVID-19 (sometimes called “self-quarantine”). If they develop a fever, cough, or other symptoms of COVID-19, they should call their healthcare provider for guidance and tell them about their symptoms and travel history. Go to this website for a list of areas with widespread community transmission and information about travel during COVID-19: www.cdc.gov/coronavirus/2019-ncov/travelers/index.html.

What is HDOH doing to monitor the situation with COVID-19?
Vigilance and monitoring
• HDOH is actively working to detect potential cases of COVID-19 as early as possible by monitoring its disease surveillance systems to identify persons that require investigation and testing and are reviewing internal protocols to ensure proper management of cases.

• HDOH is working with its federal airport partners (US Customs and Border Protections and CDC’s Division of Global Migration and Quarantine) who are performing enhanced screening to identify travelers from countries with widespread transmission of COVID-19. Its disease investigation staff are actively monitoring these individuals with daily phone calls to record their temperature and confirm that they are avoiding contact with the public.
• HDOH is in constant communication with the CDC, public health partners in other jurisdictions, and local legislators and state officials to ensure Hawaii is aware of new developments in the COVID-19 outbreak.

• Over the past 15 years HDOH has been developing and refining its respiratory disease surveillance systems following CDC guidelines. This system includes sentinel influenza-like illness surveillance sites, virologic surveillance, pneumonia and influenza associated mortality, and cluster/outbreak investigations. HDOH is monitoring these systems on a daily basis looking for changes that might indicate the presence of COVID-19 clusters.

**Preparation and Prevention**

• HDOH is working with the medical community to issue Medical Advisories and Alerts and to ensure that hospitals and providers are following infection control recommendations and are prepared to detect and treat any patient with symptoms and travel history consistent with COVID-19.

• HDOH is communicating regularly with its local partners in the travel industry and schools to address their concerns and ensure the latest and most accurate guidance and information are being shared with their staff.

**What are hospitals in Hawaii doing about COVID-19?**

HDOH is sharing with and updating infection control guidance to healthcare facilities to ensure hospitals and healthcare providers are prepared should they encounter a person potentially infected with COVID-19. Hospitals and healthcare providers, in turn, are reviewing their infection control policies and stepping up their ability to handle COVID-19 cases. Hospitals and HDOH are in regular communication with federal partners to ensure supplies of personal protective equipment for healthcare workers are adequate.

**Prevention and Protection**

**What measures are being done to prevent widespread transmission?**

Across the country, many large events that attract multiple people, including sporting events, entertainment, etc., have been canceled or postponed. Even as the country “reopens,” events that are encouraged to practice social distancing (i.e., having people at least six feet apart). In many areas, including Hawaii, school is being temporarily canceled.

Starting in mid- and late March, Governor David Ige issued several directives and restrictions to promote social distancing and control COVID-19 in Hawaii. They include the following:

• [Quarantining all travelers arriving in Hawaii](#), including state residents, for 10 days. (See [Is Hawaii quarantining travelers to our state?](#) below for more information.)

• Encouraging only essential workers go to their jobs, while others work from home if possible.
• Limiting social gatherings per CDC guidelines.
• Residents are asked to avoid any non-essential travel.
• Services and activities at places of worship are suspended.
• High-risk individuals are asked to stay home and take additional precautionary measures.
• Visitors are asked to postpone their vacations to Hawaii for the time being.

These measures continue to be in place with various degrees of restrictions. To learn more, visit the Governor's news page: governor.hawaii.gov/category/newsroom.

The State of Hawaii has plans to safely reopen the economy as conditions allow. The guidelines and other information can be found at this website: recoverynavigator.hawaii.gov. Reopening of businesses and resumption of activities are based on the businesses’ ability to keep both employees and customers safe and to continue following social distancing guidelines. They must implement physical distancing requirements such as capacity limits and ensuring 6 feet or more between individuals using floor markings and signage. They should also limit in-person work when possible, reduce the number of high-touch surfaces and objects, and communicate health and safety protocols to all employees, customers, and visitors.

**Is there a lockdown on Oahu because of high numbers of cases?**

The City & County of Honolulu has a system of restrictions based on four tiers. Tier 1, when COVID-19 cases are the highest and the community spread is greatest, has the most restrictions. As conditions improve, the City & County of Honolulu will move through other tiers with fewer restrictions.

Starting October 22 and going at least until November 18, the City & County of Honolulu will be at tier 2. Under these restrictions, people living on Oahu may leave their residence for essential activities (e.g., shopping for food, seeking medical care, exercise, caring for a family member, etc.), essential governmental functions, or operating essential businesses or designated businesses. Gatherings in groups of five or less will be allowed but with restrictions. Face coverings (“masks”) must be worn in public spaces during these times, including on public transportation. All such allowed activities must, to the extent possible, maintain social distancing requirements, including the six-foot physical distancing requirement for both employees and members of the public (both inside and outside the facility).

Other tier 2 restrictions include (but are not limited to) the following:

During this time, essential workers and businesses will be allowed to work, along with some others with restrictions, including:

• Healthcare operations
• Grocery stores
• Gas stations
• Banks and financial institutions
• Hardware stores
• Restaurants for delivery or carryout
• In-person spiritual services with modifications to prevent COVID-19 spread
• Childcare facilities as described in the order

Individuals can leave their residence for the following reasons:
• Performing essential activities or essential work
• Getting a COVID-19 test
• Engaging in outdoor activity as allowed by law
• Accessing the ocean for outdoor exercise purposes (e.g., surfing, solo paddling, swimming). Going across or through beaches is allowed for this purpose.

Among the restrictions:
• Restaurants may operate with strict social distancing guidelines in place (see www.oneoahu.org/faqs for details).
• Retail businesses, real estate businesses, auto dealerships, and golf courses may operate but with restrictions (e.g., by appointment, small groups, etc.). See www.oneoahu.org/faqs for details.
• Indoor and outdoor social gatherings of more than 5 people are not allowed.
• Groups no larger than five people can use beaches, parks, trails and camping. Canopy use is restricted depending on type of facility (see www.oneoahu.org/faqs for details).
• Salons may provide core services with proper social distancing.
• Gyms and fitness facility operators may provide services indoors and with social distancing, but only at 25% capacity.
• Zoos and golf courses are open, with restrictions.

Details on all current tier 2 restrictions in the City & County of Honolulu can be found at this website: www.oneoahu.org/reopening-details and www.oneoahu.org/reopening-tier2.

Information on the types of restrictions for each tier can be found at this website: www.oneoahu.org/reopening-strategy.

The City & County of Honolulu maintains an FAQ on the new stay-at-home order here: www.oneoahu.org/faqs.

What are the restrictions on islands other than Oahu?
Different restrictions are found in different counties throughout the state. To find out more, visit the URLs below:
• Kauai County (Kauai, Niihau)
  www.kauai.gov/COVID-19
• Maui County (Maui, Molokai, Lanai)
  www.maui县政府
• Hawaii County (Hawaii Island, aka Big Island)
How can I protect myself and my family? How can I prevent the spread COVID-19?

The best way to prevent transmission of any respiratory illness (including flu) is to follow everyday preventive actions:

- **Practice social distancing.**
  - Keep at least six feet away from other people (about two arms’ length), to keep droplets away from each other when speaking, coughing, or sneezing.
  - Avoid groups of more than a few people (local restrictions may prevent you from meeting in larger groups).
  - Limit close contact with others outside your household in both indoor and outdoor spaces.
  - Avoid close contact with people inside your home who are sick.
- **Cover your mouth and nose with a mask when around others.**
  - Wearing a mask in public settings and when around people who don’t like in your household, especially when other social distancing measures are difficult to do, is one of the most effective ways to prevent the spread of COVID-19.
- **Get your flu shot.** With current seasonal flu activity, it is likely there will be confusion as persons with flu will exhibit some of the same symptoms as COVID-19, such as fever and cough. We strongly recommend residents ages 6 months and older protect themselves against flu by receiving the seasonal flu vaccination.
- **Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating or preparing food; and after blowing your nose, coughing, or sneezing.**
- If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.
- **Avoid touching your eyes, nose, and mouth with unwashed hands.**
- **Avoid close contact with people who are sick, including at your home.**
- **Stay home when you are sick.**
- **Cover your cough or sneeze with a tissue; then throw the tissue in the trash.**
- **Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.** You can learn more about safely and effectively cleaning and disinfecting your home at this CDC site: [www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html](http://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/disinfecting-your-home.html).
- **When out in public or around other people, wear a mask.** Disinfect objects you will touch, like the cart or gasoline pump, using a disinfectant wipe.
- **Use online services instead of shopping in person when possible to avoid contact with other people.**
- **Monitor your health daily. Be alert for symptoms of COVID-19.**
- **Follow directions by state and local authorities, as well as HDOH and CDC.**
What kind of alcohol is safe to have in hand sanitizer?
The only forms of alcohol that can be safely used in hand sanitizer are isopropyl alcohol and ethanol (also known as ethyl alcohol). Some hand sanitizers have been found to contain methanol which is dangerous if absorbed through the skin and deadly if ingested.

The FDA has warned that some alcohol-based hand sanitizers may have been contaminated with methanol during manufacture and have since been recalled. More information on this warning and the recall, as well as a list of affected products, can be found at this FDA website: www.fda.gov/drugs/drug-safety-and-availability/fda-updates-hand-sanitizers-methanol.

Are there other safety concerns for alcohol-based hand sanitizers?
Although alcohol-based hand sanitizers are safe when used as directed, FDA provides several warnings:

• Hand sanitizer should never be ingested by mouth. FDA urges consumers not to drink any of these products.
• Some hand sanitizers do not contain a sufficient amount of ethanol or isopropyl alcohol to be effective. CDC recommends consumers use an alcohol-based hand sanitizer that contains at least 60 percent ethanol.
• Beware of false or misleading claims (e.g., prolonged protection for up to 24 hours, or “FDA-approved”)
• Be careful about hand sanitizers packaged to appear as drinks, candy, or liquor bottles, as their appearance could result in accidental ingestion, particularly by children who may not understand the product’s label. Small children are particularly at risk with these products since ingesting only a small amount of hand sanitizer may be lethal in a small child.

Should I delay other medical care due to COVID-19? How can I safely get medical care?
No, you should not delay care that you need to manage medical conditions or to address new health issues. However, you should take precautions to avoid unnecessary contact:

• Talk to your doctor online, by phone, or through email when possible.
• If you must visit in person, protect yourself and others with preventive measures.
• If you need emergency medical care, seek it immediately.
• Make sure your children receive their vaccinations on time, so they continue to be protected from deadly vaccine-preventable diseases. Call your pediatrician’s office to learn about the safety protocols they have in place.
• If possible, use drive-thru windows or curbside services, mail-order, or other delivery services to receive your medication.

I am currently pregnant. What should I be aware of regarding COVID-19?
Based on what is known at this time, pregnant people might be at an increased risk for severe illness from COVID-19 compared to non-pregnant people. Additionally, there may be an
increased risk of adverse pregnancy outcomes, such as preterm birth, among pregnant people with COVID-19.

Therefore, if you are pregnant, be careful to protect yourself and help reduce the spread of the virus that causes COVID-19 by doing the following:

- Limiting your interactions with other people as much as possible
- Taking precautions to prevent getting COVID-19 when you interact with others such as:
  - Avoiding people who are sick or who have been exposed to the virus
  - Frequent handwashing (especially if your hands are dirty or after touching other people, including children, and after touching surfaces outside your home or items you brought into your home)
  - Cleaning and disinfecting frequently touched surfaces

If you start feeling sick and think you may have COVID-19, call your healthcare provider.

You can find out more about how pregnant women can protect themselves and their child from COVID-19 at the following CDC site: www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/pregnancy-breastfeeding.html.

**I have COVID-19. Can I breastfeed my baby?**

You and your family should consult with your healthcare provider about whether to start or continue breastfeeding. Breastmilk provides protection against many illnesses and is the best source of nutrition for most infants. It is not known if mothers with COVID-19 can spread the virus to their babies in their breast milk, but limited data currently available suggests this is not likely.

If you have COVID-19 and choose to breastfeed, take precautions to avoid spreading the virus to your infant:

- Wash your hands before each feeding
- Wear a cloth face covering while breastfeeding.

If you have COVID-19 and choose to express your breast milk:

- Use a dedicated breast pump
- Wear a cloth face covering during expression
- Wash your hands before touching any pump or bottle parts and before expressing breast milk
- Follow recommendations for proper pump cleaning after each use
- If possible, expressed breast milk should be fed to your baby by a healthy caregiver who does not have COVID-19, is not at high-risk for severe illness from COVID-19, and is living in the same home.

You can find out more about how breastfeeding women can protect themselves and their child from COVID-19 at the following CDC site: www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/pregnancy-breastfeeding.html.
Is there a vaccine for SARS-CoV-2 / COVID-19?
The federal government has recently approved several vaccines for COVID-19. Groups of people most affected by COVID-19 will get the vaccine first, starting in mid-December, but it is expected that the general public will be able to get it in the coming months.

We will provide more information as it becomes available. Even as people get vaccinated, it is important to continue practicing preventive measures, such as wearing masks, practicing social distancing, frequent hand washing, etc. To find out more, see [When will a COVID-19 vaccine be available in Hawaii?](#) Below

Does the flu shot provide any protection against COVID-19?
The annual flu vaccination does not protect against COVID-19, but it is recommended for all persons age 6 months or older to protect against getting influenza (the flu).

Why should I get the flu shot then?
Symptoms of COVID-19 are similar to symptoms of influenza (the flu). Reducing the number of flu cases (by getting the flu shot) not only helps decrease the burden on healthcare providers and facilities, having fewer patients with flu-like symptoms makes it easier to detect those persons who might have COVID-19 infection.

More importantly, the flu shot also prevents you from getting flu and spreading it to others, especially very young people, elderly people, and those with compromised immune systems. For these people, flu can be severe or even deadly.

Will wearing a mask protect me from COVID-19? Why should I wear a mask?
CDC recommends that people wear cloth face coverings (frequently referred to as “masks”) in public settings when around people not living in their household, especially when other social distancing measures (like staying 6 feet apart) are difficult to maintain.

Masks, worn over both the nose and mouth, are a simple but very effective way to reduce the spread of COVID-19 when they are widely used by people in public settings (including on public transportation). Masks provide an extra layer to help prevent our respiratory droplets from traveling in the air and onto other people.

Guidance to wear masks is based on what is known about the role respiratory droplets play in the spread of the virus that causes COVID-19, as well as emerging evidence about how well face coverings can reduce the spray of droplets when worn over the nose and mouth. COVID-19 spreads mainly among people who are in close contact with one another (within about 6 feet), so using masks to block respiratory droplets is especially important where people are close to each other or where maintaining social distancing is difficult.

Whether you should wear a surgical mask, an N95 respirator (“N95 mask”), or a cloth facial covering (“cloth mask”) depends on your situation:
• *If you are sick*, wearing a face mask can help prevent others from being infected by the droplets from when you cough, sneeze, or even talk.

• *If you are a healthcare worker or are around COVID-19 patients*, surgical masks or N95 respirators, used with other PPE (personal protective equipment), can help prevent infection and spread of COVID-19.

• *For healthy or well people not in a healthcare setting*, wearing a surgical face mask or N95 respirator is not recommended to prevent infection. However, CDC advises that cloth facial coverings may provide significant protection against spread and recommends people wear them in settings where social distancing is difficult.
  
  - Because of shortages of surgical masks and N95 respirators in healthcare settings, which are “critical supplies” during the pandemic, at this time it is important to save those for healthcare workers.
  - The guidance to wear cloth face coverings (“masks”) is because of evidence that some people who *appear* to be well may be infected with the coronavirus causing COVID-19 but are asymptomatic (having no symptoms) or pre-symptomatic (they haven’t yet developed symptoms). This means that the virus (through speaking, coughing, or sneezing) can spread between people interacting in close proximity even if they don’t have symptoms of COVID-19.
  - Cloth masks can be made out of handkerchiefs, scarfs, and other cloth items.
  - Local regulations and some businesses may require use of cloth facial coverings.

**What other things should I know about wearing a cloth face covering (“mask”)?**

Important things to consider about wearing a cloth face covering:

- Wash your hands before putting on your face covering.
- Put your face covering over your nose and mouth and secure it under your chin.
- Try to fit your face covering snugly against the sides of your face.
- Make sure you can breathe easily while wearing the face covering.
- Be careful not to touch your eyes, nose, and mouth when removing your face covering and wash your hands immediately after removing it.
- Wash your cloth face covering after using it. You can wash it with regular laundry, using the warmest water appropriate for the cloth and drying it completely afterward. When drying it, use the highest heat setting and leave it in the dryer until completely dry. If air drying, lay it flat — in direct sunlight in possible — until it completely dries.

Although masks can provide protection from droplets that contain the virus, it is important to remember that the most critical preventive measures continue to be practicing social distancing, washing your hands (especially before touching your face, nose, or mouth), covering your nose and mouth with your elbow or a tissue when coughing or sneezing, limiting your contact with sick people, and staying home if you are sick.

CDC’s guidance on wearing cloth masks or other facial coverings can be found here:  
The Surgeon General demonstrates how to make a homemade cloth mask with household items: youtu.be/tPx1yqvfJgf4.

What is an N95 respirator? How is it different from a surgical mask?
N95 respirators (sometimes call “N95 masks”) are tight-fitting protective devices that cover the face and can filter out 95% of airborne particles, including droplets. They require fit testing to insure a proper seal on the user’s face.

Surgical masks (also called “face masks”) are looser fitting than N95 respirators, so they do not provide an effective barrier against particles. However, they can provide significant protection against droplets, including large respiratory particles. You can find more information about N95 respirators and surgical masks at this CDC page: www.cdc.gov/coronavirus/2019-ncov/hcp/respirator-use-faq.html.

What can I do to protect my mental and emotional health, or that of my family members, during the COVID-19 outbreak?
The COVID-19 outbreak is a very stressful situation for everyone, including children, made worse by economic uncertainty and the ongoing stay-at-home orders. Stress during an infectious disease outbreak can include the following:

- fear and worry about your own health and the health of your loved ones
- changes in sleep or eating patterns
- difficulty sleeping or concentrating
- worsening of chronic health problems
- worsening of mental or emotional health conditions
- increased use of alcohol, tobacco, or other drugs

Everyone is vulnerable to stress, but some people are more at risk:

- older people or those with chronic disease who may be at higher risk of severe illness due to COVID-19
- children and teens
- people who are helping with the COVID-19 outbreak response, such as doctors, nurses, other healthcare workers, first responders, and those whose jobs are considered “essential” who must go to work in what may seem like risky conditions

It is important to find ways to cope with the stress and protect yourself from becoming overwhelmed during the outbreak. Consider doing the following to protect yourself:

- taking breaks from watching, reading, or listening to news stories about COVID-19, including on social media
- taking care of your mind and body:
  - taking deep breaths, stretching, and/or meditation
  - eating healthy and well-balanced meals
  - exercising regularly
• getting plenty of sleep
• avoiding alcohol and drugs
• taking time to unwind by doing activities you enjoy (as long as they are allowed within the stay-at-home order)
• connecting with others and talking with people you trust about your concerns and how you are feeling, by phone or video chat (e.g., FaceTime, Skype) if necessary
• knowing the facts about COVID-19 and understanding the risk to reduce stress from uncertainty

It is important to take care of your mental health at this time. Call your healthcare provider if stress gets in the way of your daily activities for several days in a row. People with preexisting mental health conditions should continue their treatment and be aware of worsening symptoms.


If you or someone you care about is feeling overwhelmed with feelings of sadness, depression, anxiety, or desire to harm yourself or others, please do one of the following:

- call 911
- visit the [Disaster Distress Hotline](https://www.samhsa.gov/treatfind), call 1-800-985-5990, or text TalkWithUS at 66746
- visit the [National Domestic Violence Hotline](https://www.thehotline.org/) or call 1-800-799-7233 or use TTY by dialing 1-800-787-3224

**What can I do to protect my child’s mental and emotional health during the COVID-19 outbreak?**
If you have children, watch out for signs of stress (e.g., excessive crying or irritation, worrying, unhealthy eating or sleeping habits, difficulty paying attention, poor school performance, etc.). You can support them by doing the following:

- talking with your child or teen about the COVID-19 outbreak
- answering their questions and sharing reliable information about it
- reassuring your child or teen that they are safe
- limiting your family’s exposure to news coverage
- keeping up with regular routines
- being a role model by taking care of your own mental and emotional health

VACCINE-RELATED QUESTIONS

When will a COVID-19 vaccine be available in Hawaii?
The first supply of the COVID-19 vaccine was made available in Hawaii starting in mid-December 2020. The number of doses in the initial phase is limited, so most people will have to wait until 2021. Supplies will increase over time, but it is expected that all adults will be able to get vaccinated in the first half of 2021 or soon thereafter. A vaccine for children under 16 will not be available until more studies are completed.

How much will the COVID-19 vaccine cost?
The COVID-19 vaccine is a national public health priority and is offered at no cost. It is being purchased by the federal government with taxpayer dollars.

How many doses of the vaccine are needed and why?
Most of the COVID-19 vaccines currently being considered for approval in the United States require two shots to be effective. The shots are spaced out by a number of weeks and you will be alerted when to get your second shot. If you have had your first shot, you will automatically be eligible to get the second shot when it is due.

Who are the first people eligible to receive the COVID-19 vaccine?
Eligibility recommendations for the first supply of COVID-19 vaccine are based on who is most at risk. In Hawaii, this has been determined to be the following:

- Essential healthcare workers, such as:
  - High-risk healthcare workers involved in direct patient care and workers who provide transportation, environmental services, and other healthcare facility services and who are at risk of exposure to COVID-19
- Residents and staff of congregate long-term care facilities (e.g., “nursing homes”)
- Other essential workers, such as:
  - First responders, including police and firefighters; corrections officers; transportation workers; workers in the education sector; food and agriculture workers; and utility employees.
- Adults with high-risk medical conditions
- Adults 65 years of age and older.

People who do not fall within these groups will be able to receive COVID-19 vaccines in coming months as they become available. This information will be made public as it becomes available. You can read about CDC vaccine recommendations at the following site:


How will I know when it’s my turn to receive the COVID-19 vaccine?
HDOH will share this information in a variety of ways as more vaccines become available. You may hear from your healthcare provider, your employer, announcements from state and local leaders, or the media. HDOH maintains the latest information on the vaccine’s status in Hawaii.
Will there be enough vaccine for everyone in Hawaii?
Yes. Although the initial supply is limited, millions more doses are being made and everyone in Hawaii will eventually be able to be vaccinated.

Can the COVID-19 vaccine give someone COVID-19?
No, you cannot get COVID-19 from the COVID-19 vaccine. The mRNA vaccines for COVID-19 do not use the live virus that causes COVID-19 so it is safe.

Is the COVID-19 vaccine safe for pregnant or breastfeeding women?
At this time, HDOH is following CDC guidance on vaccinating those who are pregnant or breastfeeding. The vaccine has not been studied in pregnant or breastfeeding women and their infants, but mRNA vaccines (including the COVID-19 vaccine) are not thought to pose a risk to these groups. On the other hand, getting COVID-19 is known to put a woman at higher risk of serious illness.

If you are pregnant or breastfeeding and you are part of a group that is recommended to receive a COVID-19 vaccine, you may choose to be vaccinated. Other things to consider:
- COVID-19 risks of severe illness or adverse outcomes are known to be higher for pregnant women and their fetuses.
- You should talk to your healthcare provider you are seeing for your pregnancy care to discuss whether or not to get a COVID-19 vaccine.
- Getting the vaccine is a personal decision.

You can learn more about vaccines for pregnant women at this CDC site: www.cdc.gov/vaccines/pregnancy/index.html.

Is the COVID-19 vaccine available for children or adolescents?
Several vaccines are being studied and getting recommendations from the FDA and CDC. So far, no vaccine has been studied in children younger than 16, so a COVID-19 vaccine is not yet available for anyone younger than 16. At this time, one recommended vaccine is for people 16 and older, and one recommended vaccine is for people 18 and older. Information will be made public as it becomes available in the coming year.

If I have already had COVID-19 and recovered, do I still need to get vaccinated with a COVID-19 vaccine when it’s available?
At this time there is not enough information to say if or how long after infection someone is protected from getting COVID-19 again through “natural immunity.” Early evidence suggests natural immunity from COVID-19 may not last very long, but more studies are needed to better understand this.

At least one vaccine has been studied in persons with a prior COVID-19 infection and found to
be safe. CDC and HDOH recommend that vaccination should be offered to persons regardless of history of prior COVID-19 infection.

There is no recommended minimum wait time between infection and vaccination, current evidence suggests that reinfection is uncommon in the 90 days after initial infection. So, persons who had COVID-19 in the past 90 days may choose to wait to be vaccinated until near the end of 90 days, if they want to do so.

No one should be vaccinated while they are currently sick with a COVID-19 infection. Vaccinating should be postponed until the person has no more symptoms and criteria have been met for them to discontinue isolation.

Can I take the COVID-19 vaccine with other vaccines, like the flu vaccine?
No, you cannot. No other vaccine should be received between 14 days before you receive your COVID-19 vaccine and 14 days afterward.

Do I need to wear a mask when I receive the COVID-19 vaccine?
Yes, you should wear a mask that covers your nose and mouth whenever you are in public and close contact with people outside your household cannot be avoided, such as when you are getting a vaccine shot. (Anyone who has trouble breathing or who is unable to remove a mask without assistance should not wear a mask.)

Will I need to wear a mask and avoid close contact with other people after I have received two doses of the COVID-19 vaccine? When can I stop wearing a mask?
Yes, even after you have had both shots, you will need to wear a mask and practice other preventive measures, like avoiding close contact with other people. While experts learn more about the protection that COVID-19 vaccines provide under real-life conditions, it will be important for everyone to continue using all the tools available to us to help stop this pandemic, like covering your mouth and nose with a mask, washing hands often, and staying at least 6 feet away from others.

Experts need to understand more about the protection that COVID-19 vaccines provide before deciding to change recommendations on steps everyone should take to slow the spread of the virus that causes COVID-19. Other factors, including how many people get vaccinated and how the virus is spreading in communities, will also affect this decision. HDOH and state and local leaders will let the public know when it is safe to stop using these preventive measures.

Are there other vaccines that can help prevent me from getting COVID-19? Does getting the annual flu shot help?
No. A flu vaccine will not protect you from getting COVID-19, but it can prevent you from getting influenza (the flu) at the same time as COVID-19, which can keep you from getting more severe illness. Experts believe both will be spreading at the same time this coming winter.
Right now, there are two COVID-19 vaccines. COVID-19 Pfizer BioNTech Vaccine and COVID-19 Moderna Vaccine. These are the only vaccines that will protect against COVID-19 at this time.

Does immunity after getting COVID-19 last longer than the protection you would get from a COVID-19 vaccine? How long will the vaccine protect people?
The protection someone gains from having an infection (called “natural immunity”) varies depending on the disease, and it varies from person to person. The virus causing COVID-19 is new, so we don’t know how long natural immunity for COVID-19 might last.

Some early evidence—based on some people—seems to suggest that natural immunity may only last up to 90 days. Regarding COVID-19 vaccine, we don’t know how long immunity lasts until we have more data on how well they work.

Experts are working hard to learn more about COVID-19, including natural immunity and immunity from vaccines, and CDC and HDOH will let the public know as new evidence becomes available and recommendations change.

Does the COVID-19 vaccine have any side effects? Can it cause you to get sick?
Clinical trials for the COVID-19 vaccines have found that in general, most people do not have serious problems after being vaccinated.

At this time, the side effect that some people have had is a severe allergic reaction to the vaccine. If you know you are allergic to any ingredient in one of the vaccines, you should not get that vaccine. If you know you have allergies, but don’t know if you are allergic to an ingredient in the vaccines talk to your provider or the provider offering you the vaccine before getting vaccinated.

Some common but temporary side effects may be soreness, redness, or warmth in the arm where they got the shot. These symptoms usually go away on their own within a week. Some people report getting a headache or fever after receiving a vaccine.

These side effects are signs that your immune system is working as it should, to build protection against the disease for which you’re being vaccinated.

Because each vaccine will have different side effects, it is important that you learn about the specific vaccine you are offered when it’s your turn. Talk to your provider or the provider offering you the vaccine and ask questions before getting vaccinated.

What is “herd immunity” and how does it work? What percentage of the population needs to get vaccinated to have herd immunity to COVID-19?
Herd immunity refers to a situation where most of the population is immune to an infectious disease, either from previous infection or vaccination. This provides indirect protection (i.e., “herd immunity” or “herd protection”) to people who are not immune to the disease because it
makes it harder for the disease to spread.

Experts do not know what percentage of people would need to get vaccinated to achieve herd immunity for COVID-19.

**Is the COVID-19 vaccine safe?**
The COVID-19 vaccines being offered to the public meet the US Food & Drug Administration’s (FDA) standards for Emergency Use Authorization (EUA). All COVID-19 vaccines were rigorously tested in thousands of people to make sure that they are safe and that they work.

When a vaccine is granted EUA by the FDA, it means the benefits of this vaccine outweigh the harms of becoming infected with COVID-19.

It also means that even after the initial studies, safety is continuously checked. There are many safety monitoring systems that watch for adverse effects and possible side effects that were not seen in clinical trials. If an unexpected adverse event is seen, experts quickly study it further to assess whether it is a true safety concern. Experts then decide whether changes are needed in the vaccine recommendations.

HDOH is also monitoring for possible adverse events and for any announcements from FDA and CDC. This monitoring is critical to help ensure that the benefits continue to outweigh the risks for people who receive vaccines.

If any vaccine was found to be unsafe, FDA, CDC and HDOH would let the public and medical providers know.

**How do I report it if I have a problem or bad reaction after getting a COVID-19 vaccine?**

CDC and FDA encourage the public to report possible side effects (“adverse events”) through VAERS (Vaccine Adverse Event Reporting System) and V-safe.

An “adverse event” is any health problem that happens after a shot or other vaccine. An adverse event might be truly caused by a vaccine, or it might be pure coincidence (something that happened after vaccination but not caused by the vaccine).

One of the main jobs of CDC’s Immunization Safety Office is doing research to find out if adverse events that are reported by doctors, vaccine manufacturers, and the public are truly caused by a vaccine.

- **VAERS on the Internet**
  VAERS is a national system that collects data to look for side effects (“adverse events”) that are unexpected, appear to happen more often than expected, or occur in unusual patterns. CDC uses VAERS to monitor the safety of vaccines across the country, which is a top priority. The Vaccine Adverse Event Reporting System (VAERS) can be found at the
following website: vaers.hhs.gov/reportevent.html.

- **V-safe on your smartphone**
  You can also use a tool on your smartphone, called V-safe, to tell CDC about any side effects you have after getting the COVID-19 vaccine. V-safe will also provide you reminders if you need a second vaccine dose.

  V-safe uses text messages and web surveys to provide personalized health check-ins after you receive a COVID-19 vaccination. Through V-safe, you can quickly tell CDC if you have any problems you experience after getting the COVID-19 vaccine. Depending on your answers, someone from CDC may call to check on you and get more information.

  You can learn more about how to register and use V-safe at the following website: www.cdc.gov/coronavirus/2019-ncov/vaccines/safety/vsafe.html.

You can learn more about the difference between routine side effects and adverse events at this CDC website: www.cdc.gov/vaccinesafety/ensuringsafety/sideeffects/index.html.

**Why would a vaccine be needed if we can do other things, like social distancing and wearing masks, to prevent the virus that causes COVID-19 from spreading?**

Getting a vaccine is only one of several tools available to us to stop the COVID-19 pandemic. Vaccines work with your immune system so your body will be ready to fight the virus if you are exposed. Other steps, like covering your mouth and nose with a mask and staying at least 6 feet away from others, help reduce your chance of being exposed to the virus or spreading it to others.

**TRAVEL-RELATED QUESTIONS**

**Is it safe to travel within the United States during the COVID-19 outbreak?**


**Is it safe to travel internationally?**

On March 19, 2020, the US Department of State issued a global level 4 travel advisory that covers all countries (US Department of State Global Health Advisory) because of the COVID-19 global pandemic. The State Department advises the following:

- US citizens should avoid all international travel due to the global impact of COVID-19.
- In countries where commercial travel options are still available, US citizens who live in the US are advised to arrange for immediate return to the US unless they are prepared to remain abroad for an indefinite period.
- United States citizens who live abroad should avoid all international travel.
Their travel may be disrupted and they could be forced to remain outside of the US for an indefinite time, as many countries are experiencing COVID-19 outbreaks and implementing travel restrictions and mandatory quarantines, closing borders, and prohibiting non-citizens from entry with little advance notice.

The situation with COVID-19 continues to evolve and we cannot predict if other countries will still be considered “safe” for travel in the coming months. Anyone with plans to travel internationally should stay informed of the latest Traveler’s Health Recommendations for their specific destination.

Is Hawaii quarantining travelers to our state?
Governor Ige ordered a mandatory 10-day quarantine of all people traveling to Hawaii, including visitors and Hawaii residents, effective March 26. (Until December 17, this mandatory quarantine for travelers had been 14 days, but was reduced to 10 days due to changes in CDC guidance.) The order states:

- If you are a resident, your designated quarantine location is your place of residence.
- If you are a visitor, your designated quarantine location is your hotel room or rented lodging.
- You can only leave your designated quarantine location for medical emergencies or to seek medical care.

Visitors and residents under quarantine should obey the following guidelines:

- Do not visit any public spaces, including restaurants, pools, meeting rooms, and fitness centers.
- Do not allow visitors in or out of your designated quarantine location other than authorized healthcare providers or individuals authorized by the Director of HI-EMA to enter.

The Department of Transportation has a Q&A page on the travel-related 10-day quarantine orders (covering both travel to Hawaii and interisland travel) at the following website: [hidot.hawaii.gov/coronavirus](https://hidot.hawaii.gov/coronavirus).


Is Hawaii quarantining travelers between our islands?
Governor Ige has implemented a partial mandatory 10-day quarantine (formerly 14 days) of all people traveling to Kauai County, Maui County, Hawaii County, and Kalawao County, including visitors and Hawaii residents. The interisland quarantine is in effect at least until November 30, 2020. Interisland travelers to Oahu are not subject to the 10-day quarantine.
The interisland quarantine order states the following:

Interisland travelers to the above counties under this quarantine order must obey the following guidelines:

• Travelers must remain in their hotel room.
• Travelers can only order delivery food.
• Travelers cannot receive visitors.

Other information related to the interisland quarantine order:

• All people who travel to the above counties will be required to use the Safe Travels application to fill out an electronic Interisland Declaration Form that includes name, residential address, contact phone number, destination information, and purpose of travel.
• People traveling to the above counties to perform essential functions are also subject to self-quarantine, except when performing essential functions.
• People returning to their island of residence from interisland travel are no longer subject to quarantine if they were “performing critical infrastructure functions” or “traveling for purposes related to medical or health care,” but are required to wear appropriate gear (especially masks) and follow all social distancing requirements.
• Those traveling for medical or health care are not subject to the quarantine, as long as they wear appropriate protective gear and follow social distancing requirements.

All travelers between islands must use the Safe Travels application to obtain a quarantine order and provide information designed to monitor their health and to be used in contact tracing if necessary (see below).

More information on the travel to and within Hawaii, including a list of FAQs, can be found at this HDOH website: hawaiicovid19.com/travel.

Who has to use the Safe Travels online digital form for interisland travel and how do they do it? Is it mandatory?
Starting September 1, the online digital form called Safe Travels must be used by all air passengers traveling to Hawaii (trans-Pacific) or between islands (interisland), with the exception of interisland passengers traveling to Oahu from other islands.

The Safe Travels online form is to enforce the travel quarantine and, if necessary, help enable contact tracing. It is part of a multi-layered screening process for travelers which include temperature checks and secondary screening for those with symptoms or temperatures over 100.4°F.

Safe Travels can be accessed by computer or smartphone from any browser (e.g., Chrome, Safari, Firefox, Edge, etc.) other than Internet Explorer. After the form is completed, a QR code
is sent by email. The QR code must be shown to airport personnel so you can read, sign, and accept your Quarantine Order.

The Safe Travels online form should be completed in advance of departure. The health questionnaire within the Safe Travels digital platform is available for completion no more than 24 hours before your flight. The more current the information, the more useful it is. All passengers should allow extra time for the additional screening upon arrival.

- The form can only be completed electronically (there is no printable version available). The online form takes about 2 to 5 minutes to complete.
- The online form can be completed by computer or mobile device.
- There will be tablets available at the airport to accommodate those who were unable to complete the form before arriving at the airport.

Below are other details related to the form and screening:

- Even when traveling as a group, every adult needs to complete their own form.
- For minor children (i.e., less than 18 years old) these rules apply:
  - Parents or guardians flying with their minor child can add the minor to their online form, but should make sure the minor is added only to one adult’s form.
  - If the adult has an exemption from the mandatory quarantine order, the child must be added to the non-exempt adult’s profile, if it applies.
  - A child flying alone must have the entire form completed.
- Travelers who refuse to fill out the form will not be allowed to board their plane.
- At this time the form is available only in English, but airport screeners will be equipped to help passengers who require assistance in other languages.
- For their address, people traveling interisland for just the day should write down details of their travel, such as their car rental location, where they will be working, what sites they will be visiting, etc.
- Travelers with a fever will not be allowed to board their flight.
- Travelers directed to secondary screening based on their answers may be offered COVID-19 testing at no charge.

You can learn more about the Safe Travels application and get help using it at this website: ets.hawaii.gov/travelhelp or ets.hawaii.gov/safe-travels-information. For technical assistance, you can also call the Safe Travels Service Desk at 1-855-599-0888 (10 a.m. to 10 p.m. HST).

Additional FAQs for the Safe Travels application can be found here:
ets.hawaii.gov/travelhelp/additional-safe-travels-faqs.

More information on the quarantine and other restrictions for travelers to and within Hawaii, including a list of FAQs, can be found at this HDOH website: hawaiicovid19.com/travel.

HDOH maintains a flowchart to help travelers understand and plan for the quarantine:
hawaiicovid19.com/flying-into-hawaii.
Are there exceptions or alternatives to the 10-day quarantine for travelers to Hawaii? What is the “pre-travel testing program”?

Yes, since October 15, there has been a pre-travel testing alternative to the mandatory 10-day quarantine (previously 14 days) for travelers who arrive in Hawaii from United States locations, as well as Japan and Canada.

Beginning November 6, travelers from Japan are also able to participate in the pre-travel testing alternative (see Who are the “trusted testing and travel partners” in Japan? below). Travelers from Japan should note that they will be subject to a 10-day quarantine when they return to Japan.

Beginning in mid-December, travelers from Canada will also be able to participate in the pre-travel testing program (see Who are the “trusted testing and travel partners” in Canada? Below).

Travelers arriving in Hawaii who provide written confirmation of a negative COVID-19 test result from a State of Hawaii-approved COVID-19 testing facility (i.e., “trusted testing and travel partners”) will be exempt from the mandatory 10-day quarantine. Starting November 24, if a traveler’s test results are not available before boarding their final flight segment, the traveler must quarantine for 10 days or the length of their stay in Hawaii, whichever is shorter.

The earliest a traveler can take the pre-travel test is 72 hours before the final portion of their travel to Hawaii. Arriving travelers will also have their temperatures checked upon arrival and must fill out a travel and health form.

Travelers who would like to take advantage of the pre-travel testing program must upload their negative COVID-19 test result when they complete their travel and health forms on the Safe Travels digital system, found at travel.hawaii.gov (see Who has to use the Safe Travels online digital form? above for more information on the Safe Travels digital form).

- After making airline reservations, all adult travelers (18 years and older) must register at the Safe Travels digital system. They must upload their negative pre-travel COVID-19 test result and answer a health questionnaire at least 24 hours prior to departure.
- All travelers, including children 5 years and older, must provide a negative COVID-19 test result to avoid the mandatory 10-day quarantine. Children can be included on the Safe Travels form of an adult they are traveling with.

More details of the pre-travel testing alternative (e.g., types of state-approved tests allowed), as well as a list of FAQs, can be found at these HDOH websites: hawaiicovid19.com/travel and health.hawaii.gov/travel. Detailed information is also available at the Hawaii Tourism Authority website: www.hawaiitourismauthority.org/covid-19-updates/traveling-to-hawaii. For phone inquiries, call 1-800-GOHAWAII (1-800-464-2924). For email inquiries, write to info@gohawaii.com.
If you have technical problems with the Safe Travels form, contact the Safe Travels Service Desk at 1-855-599-0888 (10 a.m. to 10 p.m. HST) or visit their FAQ site: ets.hawaii.gov/travelhelp.

HDOH maintains a flowchart to help travelers understand and plan for the quarantine: hawaiicovid19.com/flying-into-hawaii.

What are the criteria for the pre-travel testing program?
Valid negative COVID-19 tests for the pre-travel testing program are subject to the following details:

- The test must be processed by a laboratory accepted by the State of Hawaii as a “trusted testing and travel partner” (see Who are the “trusted testing and travel partners” in the United States? and Who are the “trusted testing and travel partners” in Japan? below).
- The pre-travel negative test must be an FDA-approved NAAT test, processed by a CLIA-certified laboratory.
- The traveler is responsible for the cost of the pre-travel test.
- The traveler is responsible for making sure their test is appropriate for the pre-travel testing program. The State of Hawaii is not responsible for a traveler obtaining a test that is not accepted by this program. Any traveler without a negative test result from an accepted source will be subject to the 10-day mandatory quarantine.
- Antigen and antibody tests will not be accepted for this program.
- Starting November 24, test results that are still pending when the traveler arrives will not be accepted and the traveler will be required to quarantine for 10 days or until they leave Hawaii, whichever is shorter.
- Until November 24, if the test results are still pending when the traveler arrives in Hawaii, they must remain in quarantine until the negative test result is uploaded to their Safe Travels account and reported to HDOH, after which they will receive a confirmation they can leave quarantine.

Are any follow-up tests required besides the pre-travel negative test?
In addition to the pre-travel negative test taken no earlier than 72 hours before the final leg of travel to Hawaii, some counties in Hawaii are requiring follow-up testing after the traveler’s arrival:

- Kauai County (Kauai and Niihau) has established a voluntary testing program the third day after arrival.
- Maui County (Maui, Lanai, and Molokai) has established a voluntary post-arrival test.
- Hawaii County (Hawaii Island, aka Big Island) will require an antigen test for all arriving transpacific travelers who are participating in the pre-travel testing program.

At this time, the City and County of Honolulu (Oahu) is exploring its capacity for post-arrival testing but does not currently require a follow-up test.
Who are the “trusted testing and travel partners” in the United States?

As of November 20, 2020, trusted testing and travel partners include the following:

- AFC Urgent Care (afcurgentcareportland.com/traveling-hawaii)
- American Samoa Department of Health (www.americansamoa.gov/department-of-public-health)
- Atlas Genomics (www.atlas-genomics.com)
- Bartell Drugs (www.bartelldrugs.com/alaska-airlines-covid-testing)
- Capstone Clinic, Alaska (www.capstoneclinic.com/project/covid19-testing)
- Carbon Health (https://carbonhealth.com/alaska-airlines-to-hawaii-rapid-covid-testing)
- CityHealth Urgent Care (bayareacovid19testing.com)
- Clarity Lab Solutions (www.claritylabsolutions.com/traveling-to-hawaii.html)
- Clinical Laboratories of Hawaii (www.clinicallabs.com)
- Color (color.com/united-airlines-testing-program)
- Costco/AOVA (www.costco.com/product.1509147.html)
- CVS Health (www.cvs.com/selfpaytesting)
- Diagnostic Laboratory Services (dlslab.com/covid-collection)
- Discovery Health MD (www.discoveryhealthmd.com/covid-19-services/test-to-fly)
- GoHealth Urgent Care (www.gohealthuc.com/travel-testing)
- Hawaii Pacific Health (hawaiipacifichealth.org/covid19testing)
- Kaiser Permanente (kp.org/travel)
- Minit Medical (www.minitmed.com)
- Quest Diagnostics (www.questcovid19.com/hawaii)
- UC San Diego Health (no website currently available)
- University of Washington Medicine (testguide.labmed.uw.edu/public/guideline/hawaii_safe_travels)
- Urgent Care Hawaii (ucarehi.com)
- Vault Health (learn.vaulthealth.com/state-of-hawaii)
- Walgreens (https://www.walgreens.com/findcare/covid19/testing)
- WestPac Labs (www.westpacificlab.com/covid-19/hawaii)
- XpresCheck (www.xprescheck.com and xprescheck.com/hawaii)

Details on how to obtain testing at each of these partners can be found at the following HDOH website: hawaiicovid19.com/travel-partners.

Who are the “trusted testing and travel partners” in Japan?

As of October 27, 2020, trusted testing and travel partners in Japan include the following:

- Sapporo Higashi Tokushukai Hospital, Hokkaido (www.higashi-tokushukai.or.jp)
- St Luke’s International Hospital, Tokyo (hospital.luke.ac.jp)
- Nishi-Shinbashi Clinic, Tokyo (www.tramedic.com)
- Kameda Kyobashi Clinic, Tokyo (testguide.labmed.uw.edu/public/guideline/hawaii_safe_travels)
- Tokyo Medical University Hospital, Tokyo (hosppinfo.tokyo-med.ac.jp)
Details on how to obtain testing at each of these partners can be found at the following HDOH website: hawaiicovid19.com/travel-partners.

Who are the “trusted testing and travel partners” in Canada?
Canadian airlines WestJet and Air Canada will be identifying testing entities in Canada, with the approval of HDOH, that will be used as “trusted testing and travel partners” for the pre-travel testing program. Information will be made available at the following websites:

- WestJet: www.westjet.com/en-ca/travel-info/covid-testing
- Air Canada: www.aircanada.com/ca/en/aco/home.html#

Are there special quarantine conditions for students attending University of Hawaii campuses across the state, such as UHM, Chaminade University, and Hawaii Pacific University?
Yes. University students from out-of-state who are studying on Oahu and Kauai can participate in modified quarantine procedures that create a so-called “modified quarantine bubble” (MQB) The MQB allows these students to avoid the standard 14-day quarantine when courses begin in the fall semester. (Students began moving into UHM residence halls on Monday, August 17, and courses begin on Monday, August 24.)

The MQB includes the following requirements:
- All students planning to participate in the MQB must have tested negative for COVID-19, either within 72 hours of their departure when they flew to Hawaii or within 48 hours of their arrival in Hawaii.
  - Anyone not receiving a negative test must follow the mandatory 14-day quarantine for all travelers to Hawaii.
• More information on MQB quarantine options can be found here: manoa.hawaii.edu/moving-forward/modified-quarantine-uhm-students/#three-options.

• To participate in the MQB, students must declare they have no symptoms of COVID-19 and have had no exposure to COVID-19 in the 14 days prior to travel.

• Students planning to participate in the MQB must not use public transportation to travel from the airport to their university. Only non-pooled rideshare services (e.g., Uber, Lyft) or a university shuttle are permitted for travel to the university.

• Students in MQB living in university housing must arrange meals for purchase during the 14-day quarantine period.

• Students in MQB must carry a copy of an official email from the university explaining their exemption status.

You can learn more about the modified quarantine program for university students at these URLs, including three MQB options:

• University of Hawaii at Manoa manoa.hawaii.edu/moving-forward/modified-quarantine-uhm-students

• Chaminade University chaminade.edu/27487/important-travel-update-for-out-of-state-students

• Hawaii Pacific University https://www.hpu.edu/security/covid/covid-19.html

• University of Hawaii at Hilo hilo.hawaii.edu/covid19/quarantine-faq.php

You can read more UHM’s COVID-19 guidelines at this URL: manoa.hawaii.edu/covid19/guidelines.

OTHER QUESTIONS

Should I be worried about products imported from China?
There is no evidence you can become infected with COVID-19 from a product imported from China. COVID-19 appears to be related to coronaviruses like SARS and MERS which do not survive long on surfaces. Instead, they are usually spread from person-to-person through respiratory droplets.

What about animal products from China?
CDC currently has no evidence that animals or animal products imported from China pose a risk for spreading COVID-19. Information will be updated as it becomes available.
Is my pet at risk of getting COVID-19? Do animals in Hawaii have COVID-19?

Although this coronavirus seems to have come from an animal source, it is now spreading from person-to-person. We are still learning about how COVID-19 spreads, and there has been some evidence that a small number of pets, including dogs and cats, have been infected with the virus that causes COVID-19, mostly after close contact with people with COVID-19. To protect your pets, CDC suggests taking precautions similar to those you would take to protect yourself and family members:

- Do not let your pets interact with people or other animals outside your household.
  - Keep cats indoors, if possible, to prevent them from interacting with other animals or people.
  - Walk dogs on a leash, staying at least 6 feet from other people and animals.
  - Avoid dog parks or other public places where a large number of people and dogs may gather.
- Talk to your veterinarian if your pet gets sick or you are concerned about their health.

If you or someone in your household becomes infected with COVID-19, you should restrict contact with your pets and other animals just as you would with people:

- When possible, have another member of your household care for your pets while you are sick.
- Avoid contact with your pet, including petting, snuggling, being kissed or licked, and sharing food or bedding.
- If you must care for your pet or be around animals while you are sick, wear a cloth face covering and wash your hands before and after you interact with them. Washing your hands after handling animals, their food, waste, or supplies is always a good idea.


If I think I or my family member has contracted COVID-19 but we have no health insurance due to a lost job or other situation, what should we do? Will we be turned away from a hospital?

Hospitals in Hawaii do not turn away emergency cases, regardless of insurance coverage. However, any individual or family that has lost health coverage due to job loss or other circumstances is encouraged to contact federal and Hawaii state resources to obtain health insurance, such as the federal government’s healthcare marketplace or Hawaii’s Quest.

You can find out about your eligibility for free or subsidized healthcare coverage by visiting [www.healthcare.gov/connect](http://www.healthcare.gov/connect) or [humanservices.hawaii.gov/mqd](http://humanservices.hawaii.gov/mqd) or by calling Quest at 1-877-628-5076.
Is there money available for people who have lost their jobs due to the pandemic or the pandemic response but may not be eligible for traditional unemployment insurance?
The federal government passed a law, the CARES Act, that provides unemployment benefits for people who do not qualify for traditional unemployment benefits. It is called Pandemic Unemployment Assistance (PUA) and includes the following types of workers:
• workers who are self-employed, including “gig workers,” freelancers, and independent contractors
• workers seeking part-time employment
• people with an insufficient work history to qualify for benefits
• people who have exhausted all rights to regular or extended benefits under state or federal law or to Pandemic Emergency Unemployment Compensation (PEUC)
• people who have been laid off from churches or religious institutions
• people who are otherwise not qualified for regular or extended benefits under PEUC
To apply for PUA, go to this website: pua.hawaii.gov.

You can learn more about PUA, including detailed information about applying and processing, by visiting this link: https://labor.hawaii.gov/pua/

Is there rental assistance available for people who have lost income due to the pandemic?
Yes. The State of Hawaii launched the Rent Relief and Housing Assistance Program (RRHAP) to assist Hawaii renters who have experienced a reduction in income because of unemployment or a reduction in work hours due to the pandemic.

Residents of the City & County of Honolulu will receive $2,000 per household, while residents of other counties will receive $1,500 per household. Payments will be made directly to the landlord. The program is funded by the federal CARES Act appropriations and provides at-risk renters with assistance to make monthly rent as well as financial counseling. The program is administered by non-profit partners Catholic Charities Hawaii and Aloha United Way.

Applications are being accepted now for housing payments due between August 1, 2020, and December 28, 2020. The following are required to receive assistance:
• Must be age 18 or older
• Proof of being a full-time Hawaii resident
• Proof of being a valid and current tenant of your primary residence in Hawaii
• Can demonstrate loss of income directly resulting from the COVID-19 pandemic
• Household income does not exceed 100% Area Median Income

For more information and FAQs, please visit www.hihousinghelp.com.

What is the correct name of this outbreak’s disease and the virus that causes it?
Global experts on viruses have officially named the virus causing the outbreak “SARS-CoV-2.” This is an abbreviation of “Severe Acute Respiratory Syndrome Coronavirus 2.” After
researching the new coronavirus, scientists determined it is closely related to the virus that caused the SARS epidemic in 2002 and 2003. The virus that caused SARS is known as SARS-CoV, so this new coronavirus is called SARS-CoV-2.

Although the virus is known as SARS-CoV-2, the illness it causes is now officially called COVID-19 (short for coronavirus disease 2019). Shortly after the outbreak first started in Wuhan, China, the virus and illness were often referred to as “2019 Novel Coronavirus,” which was usually abbreviated as “2019-nCoV.” The name “COVID-19” has officially replaced “2019 Novel Coronavirus” and “2019-nCoV.”

Names like “Wuhan Virus” and “Chinese Virus” are not official or used by the medical or public health communities and are considered derogatory and inappropriate.

What are coronaviruses?
They are common in many different species of animals, including camels, cattle, cats, and bats. Rarely, these animal coronaviruses can infect people and then spread between people.

Human coronaviruses are also common throughout the world and can cause mild to moderate illness (for example, “the common cold”). Some coronaviruses that infect humans are known to cause severe illness, like the coronaviruses that cause MERS and SARS.

COVID-19 is a pneumonia-type illness caused by a new (or novel) coronavirus called SARS-CoV-2 that originated in Wuhan, China. It may have originated in animals, but it can now be spread from person-to-person.

So is COVID-19 the same as SARS and MERS?
No, they are different coronaviruses.

Where can I find out more information?

Finally, you can contact HDOH’s partners at Aloha United Way from anywhere in Hawaii for information and referral services:

- Call 2-1-1.
- Text 877-275-6569 (include your zip code)
- Chat at www.auw211.org.
- Email info211@auw.org.