

MV Transportation Coronavirus COVID-19 Operations Response Plan

Ver. March 03, 2020



MV TRANSPORTATION, INC.

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EXECUTIVE SUMMARY

MV Transportation and Butler Transit Authority (BTA) have devised this operations action plan to handle the COVID-19 Coronavirus disease and spread in the Butler area. This plan outlines the steps that MV and BTA will take for the safety of our employees and customers and the impact on operations. Our foremost concern is the safety and well-being of our employees and our customers. There may be changes to service patterns; customer concerns, and issues with employees that need to be prepared for. The goal is to outline the areas that contingencies have been developed. This is a working plan, as such, the plan will evolve as more details regarding the coronavirus come to light.

MV SAFETY / OPERATIONS PLAN

SITUATION:

The World Health Organization (WHO) has declared a global health emergency over a new coronavirus, known as COVID-19, that has killed more than 3,000 people worldwide following an outbreak in the central Chinese city of Wuhan. More than 89,000 cases of the infection have been reported globally, most of them in mainland China.

According to the WHO, coronaviruses are a family of viruses that cause illnesses ranging from the common cold to more severe diseases such as severe acute respiratory syndrome (SARS) and the Middle East respiratory syndrome (MERS). These viruses were originally believed to have been transmitted between animals and people. SARS, for instance, was transmitted from civet cats to humans while MERS moved to humans from a type of camel.

COVID-19, identified by Chinese authorities on January 7, 2020, is a new strain that had not been previously identified in humans. Little is known about it, although human-to-human transmission has been confirmed. According to the WHO, signs of infection include fever, cough, shortness of breath and breathing difficulties. In more severe cases, it can lead to pneumonia, multiple organ failure and even death.

Current estimates of the incubation period - the amount of time between infection and the onset of symptoms - range from one to 14 days. Most infected people show symptoms within five to six days. However, infected patients can also be asymptomatic, meaning they do not display any symptoms despite having the virus in their systems.

King County, Washington Public Transit Example Response

Public health officials in King County, Washington have confirmed the death of three individuals infected with COVID-19. One of those individuals was confirmed to have ridden MV Transportation-operated King County Access paratransit service during the prior week, accentuating the need for MV and our customers to be prepared for proactively addressing and responding to the health emergency.

A summary of MV and King County's response included:

- As a precaution, MV placed four employees who were potentially exposed to the infected passenger on paid administrative leave and have asked that they remain at home, for the next 4-5 days.
- The vehicle in question was pulled from service for additional cleaning precautions.
- The MV General Manager and our primary customer have been in contact with county health officials.
- Due to HIPPA Laws, no customer name or information has been publicly released.

EMPLOYEE SAFETY

The safety of MV's and BTA's employees, as well as the safety and wellbeing of our customers is our foremost concern. MV will not unnecessarily jeopardize the well-being and safety of our employees during the virus outbreak.

Following the current top health care providers, we are asking any employee who may have driven infected or exposed customers to remain at home as a precaution. MV will put these drivers who may have been exposed on paid administrative leave.

If an employee expects that they may have become exposed to a passenger or patient with the virus, the employee is to stay at home, and to seek medical attention. Employees will be able to use sick time for days off.

AWARENESS CAMPAIGN

MV's corporate safety team has developed awareness flyers and information regarding COVID-19 and how to protect against the virus. BTA has also provided MV with flyers for all the vehicles, common areas and public spaces at the yard.

MV will be conducting safety campaigns and meetings with employees for awareness and precautions for the virus, including reminders to regularly wash their hands and to avoid close contact with any person who exhibits symptoms of the virus.

PASSENGERS

MV recommends that customers who have been exposed to the virus, or have the virus, to avoid public transportation. If a customer calls into the customer service/dispatch line or the BTA main line stating they have been exposed to the virus, it is recommended to inform the customer to take medical transportation to hospitals or health clinics.

ALARM / PANIC

MV anticipates a certain amount of possible fear and alarm within our customer base and with our employees. Our corporate team will be doing our best to alleviate fears, by being open and straightforward with our team. MV anticipates potential call off rates from our workforce during the virus outbreak. We also expect a decline in customers taking fixed route services.

There will also be a lot of misunderstanding of the virus. MV will be expecting customers and drivers to refuse to travel to certain centers / hospitals or other locations where the virus may have been detected or the rumor thereof.

STATE AND LOCAL AUTHORITIES

State and local public health authorities may decide to:

Temporary Closures of schools such as Butler College. MV and BTA will be contacting the College to determine the action plans in the event of a Virus outbreak to coordinating the need or reduction of transit services.

Social Distancing: Request or recommend people increase their social distancing during the outbreak. Workplace social distancing measure, such as replacing in person meetings with teleworking. Modifying or cancelling mass gatherings.

SAFETY BLITZES / CAMPAIGNS

MV will be conducting Safety Blitzes and Campaigns for our workforce, to discuss the virus and protective measures that can be taken for their wellbeing. Division Safety Managers will lead the blitz at all facilities, putting flyers in vehicles, and talking to drivers.

TRACKING & REPORTING

If any MV employee is verified to be directly exposed to a confirmed report of the virus at work (ex. a confirmed passenger on an MV-operated route), formal notification should be initiated immediately by sending an email with all the key details to coronasupport@mvtransit.com to ensure proper awareness and tracking is initiated.

Call Off Service Plan

If MV experiences high call off rates during the virus outbreak, MV will recommend to BTA that service levels be reduced based on the total number of operators available per day.

As an action plan MV will use the following service stages. However, please keep in mind that based on the severity of call off rates due to possible virus outbreak the stages could fluctuate up or down throughout each day of service. Also, service stages may vary based on each type of service – Commuter and Local.

When service impacts or changes are known, MV will immediately share all updates via the BTA Rider Alert system. Therefore, MV recommends that all customer sign-up for the BTA rider alerts via email and text by visiting www.bta.com.

Stage 1: No Service Changes.

Stage 2: Reduced Service Based on possible staff availability

The following Weekday Service is projected to operate with 7 less drivers. Saturday service is projected to operate with 2 less drivers, and no Sunday Service.

Commuter Service Weekdays – MV will strive to operate the following trips arriving in Pittsburgh on Weekdays.

Commuter A Weekday Pittsburgh Arrivals	Commuter B Weekdays Pittsburgh Arrivals		
5:50 AM	5:20 AM		
6:40 AM	6:30 AM		

Local Routes Weekdays – Services maybe reduced per need		

Stage 3:

All Weekday Commuter Service with no service arriving in Pittsburgh at 4:05 PM and no service departing Pittsburgh at 5:20 PM.

All Weekday Local Service will operate as per driver availability

No Weekend Service on any route.

Stage 4:

Complete service shutdown.

MEDIA COMMUNICATION

Jeff Womack, MV Chief Marketing Officer, will be the point of contact for any requested media response for MV. MV's initial response to the situation is as follows:

MV Transportation is working closely with our customers on the response to COVID-19. The safety and wellbeing of our passengers and our employees is our foremost consideration. MV is taking all precautions with the additional cleaning of our vehicles where warranted and informing our customers and employees of the outbreak. We encourage all passengers to follow the advice of the CDC and local public health officials and ensure that they utilize hand sanitizer and wash their hands frequently to prevent the spread of the virus. Customers who have been in contact with the virus are encouraged to stay at home and used medical transportation for medical emergencies.

MV FACILITIES

MV has and will continue to conduct thorough cleaning of drivers' lounges, break areas and office areas.

MEMO TO EMPLOYEES

MV will issue the following memo to employees regarding novel coronavirus. It will be posted throughout the facility. The goal is to make sure our employees are safe and aware of the situation. MV will remain open and honest throughout the process.

Team,

By now you are aware of the global coronavirus health emergency (COVID-19), now spread to over 50 countries including the United States. Public health officials continue to stress that the most at-risk populations are the elderly and those with pre-existing medical conditions with most cases believed to be mild and the risk remains low for people in our community at this time.

With our important role providing public transportation, it is imperative that we each do our part to minimize the spread of any infectious disease:

- Stay home when sick and avoid close contact with others. Make use of your sick leave and please ensure you discuss absences with your supervisor beforehand and follow your department's sick leave policies.
- If you are returning after visiting a high-risk area (Level 3 Travel Notice) as defined by the Centers for Disease Control (CDC), do not return to work for 14 days, as per CDC recommendation. Please discuss this with your supervisor.

Steps you can take to prevent spread of flu and the common cold will also help prevent coronavirus:

- Wash hands often with soap & water for at least 20 seconds. If not available, use hand sanitizer.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid contact with people who are sick.
- Cover your mouth/nose with a tissue or sleeve when coughing or sneezing.

We will continue to monitor this situation and as new information becomes available, will provide additional updates. You can find the latest information on the [CDC](#) website.

INCREASED VEHICLE CLEANING STANDARDS

In collaboration with our national cleaner supplier, ZEP, we will increase our use of the Spirit II disinfecting product on all vehicles and other hard surfaces throughout the yard.

Zep Spirit II is a Zep GreenLink product with an improved formula. It is a ready-to-use, hospital-grade, non-phenolic, germicidal cleaner and deodorant. It will quickly cut through grease and heavy soil. Spirit II will kill Tuberculosis, Canine Parvovirus, and HIV-1 on pre-cleaned, inanimate, non-porous surfaces. It conforms to CDC Bloodborne-Pathogens procedures for environmental surfaces. Use of Zep Spirit requires no dilution, mixing or measuring required, and is EPA registered. Zep Spirit II (EPA Reg # 1839-83-1270) has demonstrated effectiveness against viruses similar to COVID-19 on hard non-porous surfaces. Therefore, this product will be used against COVID-19 and should be used in accordance with the directions for use against Human Rotavirus, Rhinovirus Type 39, Hepatitis A virus, Poliovirus Type 1, and Canine Parvovirus on hard, non-porous surfaces. Refer to the CDC website (<https://www.cdc.gov/coronavirus/2019-ncov/index.html>) for additional information.

MV's utility team will continue to provide the following cleaning services on vehicles using the Zep Spirit II daily:

- Mopping of entire floor space
- Wiping down of all hand holds, driver area and window seals using Spirit II
- Wiping down of all ADA securement straps including floor mounts, lap & shoulder belts

MV's utility team will continue to provide the following weekly detailing service on vehicles using the Zep Spirit II:

- Vacuuming of entire bus
- Disinfecting of all hard surfaces using Spirit II
- Cleaning of all Windows
- Disinfecting all fabric seats

CORPORATE PURCHASING

MV has reached out to our corporate purchasing team to purchase individual hand sanitizers for employees. Face masks are only effective for people who have the virus, but do not stop people from getting the virus. Good hand washing practices is a more effective tool.

SCHOOL CLOSURES

MV expects potential school and facility closures as additional cases of the virus emerge. We recommend customers check local media sources throughout the week.

CUSTOMERS EXHIBITING SYMPTOMS OF FLU, COLD OR SUSPECTED CORONAVIRUS

MV anticipates that drivers and other passengers on vehicles will be concerned with customers being picked up exhibiting cold and flu symptoms. In these cases, if the driver refuses the trip, MV will do our best to get the fixed route run rescheduled with another operator. However, we encourage all customers with these symptoms to stay at home.

EMPLOYEE ATTENDANCE

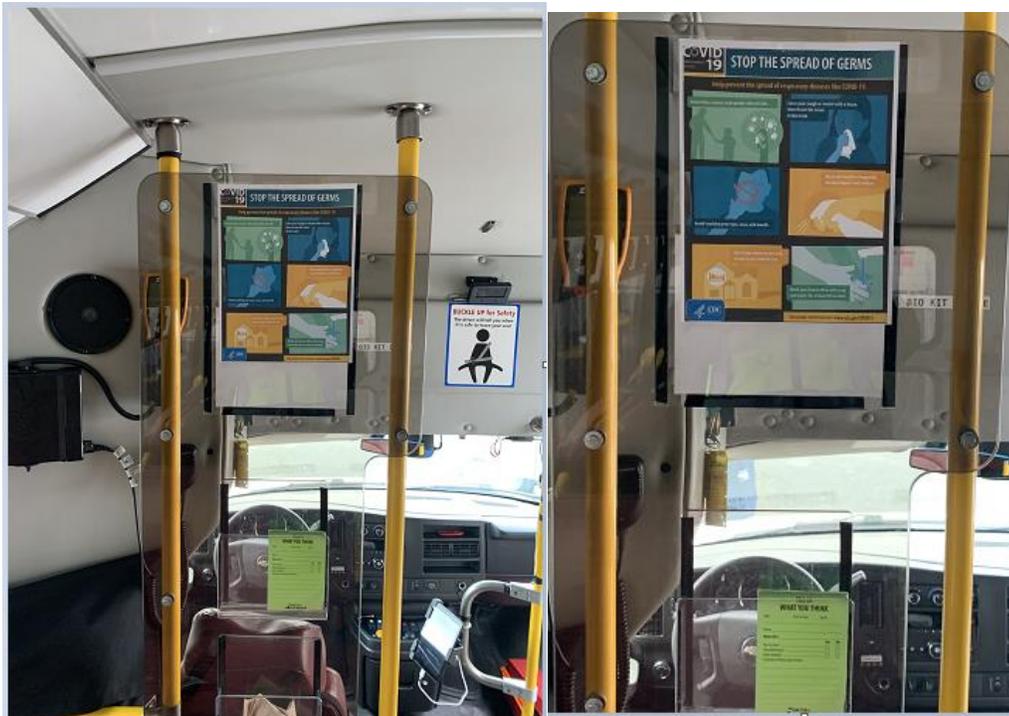
MV will be maintaining attendance trackers and will be monitoring the impact of employee call offs. MV will do it's best to anticipate call off rates and will inform BTA of any immediate concerns with staffing.

REGULAR UPDATE MEETINGS

MV is conducting regular calls regarding COVID-19 and operations service planning activities which will continue throughout the crisis. MV’s Donora team will establish a regular cadence of meetings with MMVTA to discuss the impact on service and overall health concerns.

MV AWARENESS CAMPAIGN

MV published the following awareness flyers on Friday Feb. 28th, 2020 for all MV divisions to post to help raise awareness to the Coronavirus and good health practices.



COVID-19
CORONAVIRUS DISEASE

SYMPTOMS OF CORONAVIRUS DISEASE 2019

Patients with COVID-19 have experienced mild to severe respiratory illness.

Symptoms* can include

- FEVER** (Illustration of a person with a fever holding their head)
- COUGH** (Illustration of a person coughing into a tissue)
- SHORTNESS OF BREATH** (Illustration of a person with blue arrows indicating difficulty breathing)

*Symptoms may appear 2-14 days after exposure.

If you have been in China or in close contact with someone with confirmed COVID-19 in the past 2 weeks and develop symptoms, call your doctor.



For more information: www.cdc.gov/COVID19

CH1120-A



What to do if you are sick with coronavirus disease 2019 (COVID-19)

If you are sick with COVID-19 or suspect you are infected with the virus that causes COVID-19, follow the steps below to help prevent the disease from spreading to people in your home and community.

Stay home except to get medical care

You should restrict activities outside your home, except for getting medical care. Do not go to work, school, or public areas. Avoid using public transportation, ride-sharing, or taxis.

Separate yourself from other people and animals in your home

People: As much as possible, you should stay in a specific room and away from other people in your home. Also, you should use a separate bathroom, if available.

Animals: Do not handle pets or other animals while sick. See [COVID-19 and Animals](#) for more information.

Call ahead before visiting your doctor

If you have a medical appointment, call the healthcare provider and tell them that you have or may have COVID-19. This will help the healthcare provider's office take steps to keep other people from getting infected or exposed.

Wear a facemask

You should wear a facemask when you are around other people (e.g., sharing a room or vehicle) or pets and before you enter a healthcare provider's office. If you are not able to wear a facemask (for example, because it causes trouble breathing), then people who live with you should not stay in the same room with you, or they should wear a facemask if they enter your room.

Cover your coughs and sneezes

Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can; immediately wash your hands with soap and water for at least 20 seconds or clean your hands with an alcohol-based hand sanitizer that contains at least 60 to 95% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used preferentially if hands are visibly dirty.

Avoid sharing personal household items

You should not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people or pets in your home. After using these items, they should be washed thoroughly with soap and water.

Clean your hands often

Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry. Soap and water should be used preferentially if hands are visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.

Clean all "high-touch" surfaces every day

High touch surfaces include counters, tabletops, doorknobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe, according to the label instructions. Labels contain instructions for safe and effective use of the cleaning product including precautions you should take when applying the product, such as wearing gloves and making sure you have good ventilation during use of the product.

Monitor your symptoms

Seek prompt medical attention if your illness is worsening (e.g., difficulty breathing). **Before** seeking care, call your healthcare provider and tell them that you have, or are being evaluated for, COVID-19. Put on a facemask before you enter the facility. These steps will help the healthcare provider's office to keep other people in the office or waiting room from getting infected or exposed.

Ask your healthcare provider to call the local or state health department. Persons who are placed under active monitoring or facilitated self-monitoring should follow instructions provided by their local health department or occupational health professionals, as appropriate.

If you have a medical emergency and need to call 911, notify the dispatch personnel that you have, or are being evaluated for COVID-19. If possible, put on a facemask before emergency medical services arrive.

Discontinuing home isolation

Patients with confirmed COVID-19 should remain under home isolation precautions until the risk of secondary transmission to others is thought to be low. The decision to discontinue home isolation precautions should be made on a case-by-case basis, in consultation with healthcare providers and state and local health departments.



STAY HOME

For more information: www.cdc.gov/COVID19



CDC Protects and Prepares Communities

CDC is aggressively responding to the global outbreak of COVID-19 and preparing for the potential of community spread in the U.S.

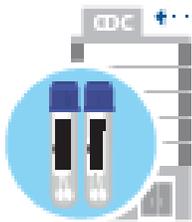
Travel

- Conducts outreach to travelers
- Issues travel notices



Laboratory and diagnostics

- Develops diagnostic tests
- Confirms all positive test results submitted by states



Schools

- Provides guidance for schools including school closures and online education options



Businesses

- Provides business guidance including recommendations for sick leave policies and continuity of operations

Community members

- Shares information on symptoms and prevention
- Provides information on home care
- Encourages social distancing

Health departments

- Assesses state and local readiness to implement community mitigation measures
- Links public health agencies and healthcare systems



Healthcare professionals

- Develops guidance for healthcare professionals
- Conducts clinical outreach and education



Healthcare systems

- Develops preparedness checklists for health systems
- Provides guidance for PPE supply planning, healthcare system screening, and infection control
- Leverages existing telehealth tools to redirect persons to the right level of care



11/20/20 10:00:00

For more information: www.cdc.gov/COVID19



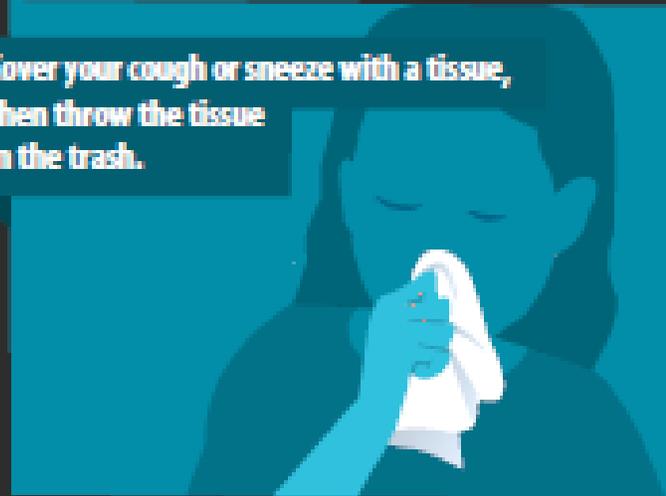
STOP THE SPREAD OF GERMS

Help prevent the spread of respiratory diseases like COVID-19.

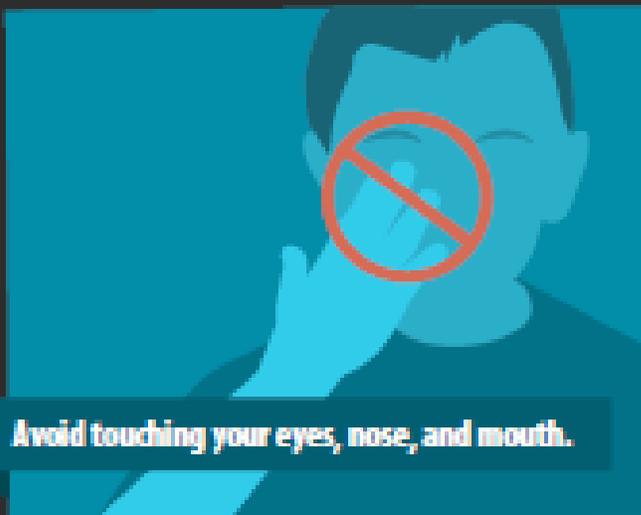
Avoid close contact with people who are sick.



Cover your cough or sneeze with a tissue, then throw the tissue in the trash.



Avoid touching your eyes, nose, and mouth.



Clean and disinfect frequently touched objects and surfaces.



Stay home when you are sick, except to get medical care.



Wash your hands often with soap and water for at least 20 seconds.



EMPLOYEE EAP HOTLINE

MVs **Employee Assistance Program** provider is aware of the coronavirus situation and is ready to field employee calls where needed. EAP posters will be posted in each of the facilities.



LifeWorks **Welcome to LifeWorks!**

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LifeWorks is an exciting and innovative well-being solution that:

- Supports you with a confidential Employee Assistance Program (EAP) and well-being resource, available 24/7 by phone, online, and by mobile app.
- Connects you to information, tips, and updates to support your well-being and success at work.
- Rewards you with a range of special offers and Perks, helping you save money on daily essentials and luxury brands.

Watch for your one-time sign-up instructions to create your personal account on the LifeWorks platform.

Online:

Download the free app for iOS or Android - simply search for "LifeWorks".

For EAP services, we are here for you any time 24/7:

Call us:

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Share LifeWorks with your friends and family
You can invite family members and significant others to access confidential help and advice on hundreds of topics available on the LifeWorks platform. Simply access the LifeWorks website, then under "Profile" select "Family" and "Invite Family Members".

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APPENDIX A- CDC LITERATURE

CDC: COVID 19 (CORONAVIRUS)

Background

CDC is responding to an outbreak of respiratory disease caused by a novel (new) coronavirus that was first detected in China and which has now been detected in 60 locations internationally, including in the United States. The virus has been named “SARS-CoV-2” and the disease it causes has been named “coronavirus disease 2019” (abbreviated “COVID-19”).

On January 30, 2020, the International Health Regulations Emergency Committee of the World Health Organization declared the outbreak a “public health emergency of international concern” (PHEIC). On January 31, 2020, Health and Human Services Secretary Alex M. Azar II declared a public health emergency (PHE) for the United States to aid the nation’s healthcare community in responding to COVID-19.

Source and Spread of the Virus

Coronaviruses are a large family of viruses that are common in people and many different species of animals, including camels, cattle, cats, and bats. Rarely, animal coronaviruses can infect people and then spread between people such as with MERS-CoV, SARS-CoV, and now with this new virus (named SARS-CoV-2).

The SARS-CoV-2 virus is a betacoronavirus, like MERS-CoV and SARS-CoV. All three of these viruses have their origins in bats. The sequences from U.S. patients are similar to the one that China initially posted, suggesting a likely single, recent emergence of this virus from an animal reservoir.

Early on, many of the patients at the epicenter of the outbreak in Wuhan, Hubei Province, China had some link to a large seafood and live animal market, suggesting animal-to-person spread. Later, a growing number of patients reportedly did not have exposure to animal markets, indicating person-to-person spread. Person-to-person spread was subsequently reported outside Hubei and in countries outside China, including in the United States. Some international destinations now have apparent community spread with the virus that causes COVID-19, meaning some people have been infected who are not sure how or where they became infected. Learn what is known about the spread of newly emerged coronaviruses.

COVID-19 cases in the U.S.

Situation in U.S.

Imported cases of COVID-19 in travelers have been detected in the U.S.

Person-to-person spread of COVID-19 was first reported among close contacts of returned travelers from Wuhan.

During the week of February 23, CDC reported community spread of the virus that causes COVID-19 in California (in two places), Oregon and Washington. Community spread in Washington resulted in the first death in the United States from COVID-19, as well as the first reported case of COVID-19 in a health care worker, and the first potential outbreak in a long-term care facility.

Illness Severity

Both MERS-CoV and SARS-CoV have been known to cause severe illness in people. The complete clinical picture with regard to COVID-19 is not fully understood. Reported illnesses have ranged from mild to severe, including illness resulting in death. Learn more about the symptoms associated with COVID-19.

There are ongoing investigations to learn more. This is a rapidly evolving situation and information will be updated as it becomes available.

Risk Assessment

Outbreaks of novel virus infections among people are always of public health concern. The risk from these outbreaks depends on characteristics of the virus, including how well it spreads between people, the severity of resulting illness, and the medical or other measures available to control the impact of the virus (for example, vaccine or treatment medications). The fact that this disease has caused illness, including illness resulting in death, and sustained person-to-person spread is concerning. These factors meet two of the criteria of a pandemic. As community spread is detected in more and more countries, the world moves closer toward meeting the third criteria, worldwide spread of the new virus.

While there is still much to learn about the unfolding situations in California, Oregon and Washington, preliminary information raises the level of concern about the immediate threat for COVID-19 for certain communities in the United States. The potential public health threat posed by COVID-19 is very high, to the United States and globally.

At this time, however, most people in the United States will have little immediate risk of exposure to this virus. This virus is NOT currently spreading widely in the United States. However, it is important to note that current global circumstances suggest it is likely that this virus will cause a pandemic. This is a rapidly evolving situation and the risk assessment will be updated as needed.

Current risk assessment:

For the general American public, who are unlikely to be exposed to this virus at this time, the immediate health risk from COVID-19 is considered low.

People in communities where ongoing community spread with the virus that causes COVID-19 has been reported are at elevated though still relatively low risk of exposure.

Healthcare workers caring for patients with COVID-19 are at elevated risk of exposure.

Close contacts of persons with COVID-19 also are at elevated risk of exposure.

Travelers returning from affected international locations where community spread is occurring also are at elevated risk of exposure.

CDC has developed guidance to help in the risk assessment and management of people with potential exposures to COVID-19.

What May Happen

More cases of COVID-19 are likely to be identified in the coming days, including more cases in the United States. It's also likely that person-to-person spread will continue to occur, including in communities in the United States. It's likely that at some point, widespread transmission of COVID-19 in the United States will occur.

Widespread transmission of COVID-19 would translate into large numbers of people needing medical care at the same time. Schools, childcare centers, workplaces, and other places for mass gatherings may experience more absenteeism. Public health and healthcare systems may become overloaded, with elevated rates of hospitalizations and deaths. Other critical infrastructure, such as law enforcement, emergency medical services, and transportation industry may also be affected. Health care providers and hospitals may be overwhelmed. At this time, there is no vaccine to protect against COVID-19 and no medications approved to treat it. Nonpharmaceutical interventions would be the most important response strategy.

CDC Response

Global efforts at this time are focused concurrently on containing the spread and mitigating the impact of this virus. The federal government is working closely with state, local, tribal, and territorial partners, as well as public health partners, to respond to this public health threat. The public health response is multi-layered, with the goal of detecting and minimizing introductions of this virus in the United States. CDC is operationalizing all of its pandemic preparedness and response plans, working on multiple fronts to meet these goals, including specific measures to prepare communities to respond to local transmission of the virus that causes COVID-19. There is an abundance of pandemic guidance developed in anticipation of an influenza pandemic that is being repurposed and adapted for a COVID-19 pandemic.

Highlights of CDC's Response

CDC established a COVID-19 Incident Management System on January 7, 2020. On January 21, CDC activated its Emergency Operations Center to better provide ongoing support to the COVID-19 response.

The U.S. government has taken unprecedented steps with respect to travel in response to the growing public health threat posed by this new coronavirus:

Effective February 2, at 5pm, the U.S. government suspended entry of foreign nationals who have been in China within the past 14 days.

U.S. citizens, residents, and their immediate family members who have been in Hubei province and other parts of mainland China are allowed to enter the United States, but they are subject to health monitoring and possible quarantine for up to 14 days.

On February 29, the U.S. government announced it was suspending entry of foreign nationals who have been in Iran within the past 14 days.

CDC has issued the following travel guidance related to COVID-19:

China — Level 3, Avoid Nonessential Travel — updated February 22;

Hong Kong — Level 1, Practice Usual Precautions — issued February 19;

Iran — Level 3, Avoid Nonessential Travel — updated February 28;

Italy — Level 3, Avoid Nonessential Travel — updated February 28;

Japan — Level 2, Practice Enhanced Precautions — updated February 22;

South Korea — Level 3, Avoid Nonessential Travel — updated February 24.

CDC also recommends that all travelers reconsider cruise ship voyages into or within Asia at this time.

CDC is issuing clinical guidance, including:

On January 30, CDC published guidance for healthcare professionals on the clinical care of COVID-19 patients.

On February 3, CDC posted guidance for assessing the potential risk for various exposures to COVID-19 and managing those people appropriately.

On February 27, CDC updated its criteria to guide evaluation of persons under investigation for COVID-19.

On February 28, CDC issued a Health Alert Network (HAN): Update and Interim Guidance on Outbreak of COVID-19.

CDC has deployed multidisciplinary teams to support state health departments case identification, contact tracing, clinical management, and communications.

CDC has worked with the Department of State, supporting the safe return of Americans who have been stranded as a result of the ongoing outbreaks of COVID-19 and related travel restrictions. CDC has worked to assess the health of passengers as they return to the United States and provided continued daily monitoring of people who are quarantined.

This is a picture of CDC's laboratory test kit for the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). CDC is shipping the test kits to laboratories CDC has designated as qualified, including U.S. state and local public health laboratories, Department of Defense (DOD) laboratories and select international laboratories. The test kits are bolstering global laboratory capacity for detecting SARS-CoV-2.

An important part of CDC's role during a public health emergency is to develop a test for the pathogen and equip state and local public health labs with testing capacity.

After distribution of a CDC rRT-PCR test to diagnose COVID-19 to state and local public health labs started, performance issues were identified related to a problem in the manufacturing of one of the reagents. Laboratories were not able to verify the test performance.

CDC worked on two potential resolutions to this problem.

CDC developed a new protocol that uses two of the three components of the original CDC test kit to detect the virus that causes COVID-19 after establishing that the third component, which was the problem with the original test, can be excluded from testing without affecting accuracy. CDC is working with FDA to amend the existing Emergency Use Authorization (EUA) for the test, but in the meantime, FDA granted discretionary authority for the use of the original test kits.

Public health laboratories can use the original CDC test kit to test for the virus that causes COVID-19 using the new protocol.

Further, newly manufactured kits have been provided to the International Reagent Resource for distribution.

Combined with other reagents that CDC has procured, there are enough testing kits to test more than 75,000 people.

In addition, CDC has two laboratories conducting testing for the virus that causes COVID-19. CDC can test approximately 350 specimens per day.

Commercial labs are working to develop their own tests that hopefully will be available soon. This will allow a greater number of tests to happen close to where potential cases are.

CDC has grown the COVID-19 virus in cell culture, which is necessary for further studies, including for additional genetic characterization. The cell-grown virus was sent to NIH's BEI Resources Repository for use by the broad scientific community.

[CDC Recommends](#)

Everyone can do their part to help us respond to this emerging public health threat:

It's currently flu and respiratory disease season and CDC recommends getting a flu vaccine, taking everyday preventive actions to help stop the spread of germs, and taking flu antivirals if prescribed.

If you are a healthcare provider, be on the look-out for:

People who recently traveled from China or another affected area and who have symptoms associated with COVID-19, and people who have been in close contact with someone with COVID-19 or pneumonia of unknown cause. (Consult the most recent definition for patients under investigation [PUIs].)

If you are a healthcare provider or a public health responder caring for a COVID-19 patient, please take care of yourself and follow recommended infection control procedures.

If you are a close contact of someone with COVID-19 and develop symptoms of COVID-19, call your healthcare provider and tell them about your symptoms and your exposure.

If you are a resident in a community where person-to-person spread of COVID-19 has been detected and you develop COVID-19 symptoms, call your healthcare provider and tell them about your symptoms.

For people who are ill with COVID-19, but are not sick enough to be hospitalized, please follow CDC guidance on how to reduce the risk of spreading your illness to others. People who are mildly ill with COVID-19 are able to isolate at home during their illness.

If you have been in China or another affected area or have been exposed to someone sick with COVID-19 in the last 14 days, you will face some limitations on your movement and activity for up to 14 days. Please follow instructions during this time. Your cooperation is integral to the ongoing public health response to try to slow spread of this virus.