

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

Last updated June 29, 2020

Information regarding COVID-19 is changing rapidly. This document will be updated with new information whenever possible. Please contact your transplant center with specific concerns. A PDF version of this information can be found [here](#).

To access this resource in Spanish, please [click here](#).

What is Coronavirus and what is COVID-19?

Coronaviruses are common viruses that cause the common cold, and do not usually cause serious symptoms. When new strains of viruses emerge, they can cause more severe diseases, as seen with the recent novel coronavirus called the Severe Acute Respiratory Syndrome 2 virus (SARS-CoV-2). This new coronavirus causes the disease called Coronavirus disease 2019 (COVID-19). This coronavirus appeared in December 2019 and has quickly spread all over the world.

How is COVID-19 Spread?

This new coronavirus, SARS-CoV-2, spreads from person to person through close contact, most often by respiratory droplets that are spread when an infected person coughs, sneezes or talks. It can also be spread by close contact interactions like hand shaking and hugging. It may be possible to catch the virus from a contaminated surface (such as door handles, tabletops, shopping carts) if you subsequently touch your mouth, nose or eyes. People are thought to be most contagious when they have symptoms, but even those who are not experiencing symptoms or have mild symptoms can spread the virus. Recent studies indicate that COVID-19 can be transmitted before infected individuals begin to show symptoms.

What are the symptoms of COVID-19?

- Fever
- Cough
- Shortness of breath or difficulty breathing
- Chills/repeated shaking
- Muscle pains
- Headache
- Sore throat
- Fatigue
- Nausea, diarrhea, abdominal pain
- New loss of smell and/or taste

- Some transplant recipients may develop pneumonia
- Rash

This list is not all-inclusive. If you develop symptoms concerning for COVID-19, contact your transplant center right away.

How is COVID-19 treated?

Most people with COVID 19 who have mild to moderate symptoms will recover on their own with supportive care. Less commonly, COVID-19 may be severe and have serious complications requiring hospitalization or death.

Currently, there are no treatments approved by the U.S. Food and Drug Administration (FDA) for COVID-19. There are many ongoing clinical trials for potential antiviral and immune based therapies for the treatment of COVID-19. Remdesivir, an antiviral medication, may be beneficial and the FDA has issued an Emergency Use Authorization (EUA), which allows for emergency use of remdesivir for the treatment of COVID-19.

At this time, there are no vaccines effective against this virus, although studies to develop these are ongoing.

- For information on COVID-19 Treatment, visit <https://www.covid19treatmentguidelines.nih.gov/whats-new/>
- For information on specific clinical trials underway for treatment of patients with COVID-19 infection, visit clinicaltrials.gov.

Frequently Asked Questions

Q: What can I do to protect myself and others from COVID-19?

A: There are several things you can do to protect yourself. Some examples include:

- Wash your hands or use hand sanitizer frequently
- Avoid touching your eyes, mouth, and nose
- Avoid large crowds
- Practice social distancing by staying at least six feet from other people and groups
- Frequently clean and disinfect high contact surfaces such as tables, doorknobs, and faucets
- Stay at home if you are sick
- Wear a face covering when you leave the house
- Practice cough and sneeze etiquette (see figure below)

PROPER COUGH & SNEEZE ETIQUETTE

1. Limit sneezing & coughing




Into your
elbow

Into a
tissue

2. Dispose of tissues



Directly
into
a trashcan

3. Wash your hands



At least 20
seconds

AST Power2Save
ONE TRANSPLANT FOR LIFE

[Here](#) is some additional advice from the CDC to protect the spread of COVID-19 in children.

Q: Is it safe for me to go outside or should I avoid public spaces? Should I wear a mask? Should I wear gloves?

A: In most areas of the country, it is safe to be outdoors provided you follow some basic safety guidelines. Local and state public health authorities will determine many of these, so it is important to stay up to date. Transplant recipients should **avoid crowds** and large gatherings, practice social distancing, and wash their hands often.

Wearing cloth face coverings in public settings is also mandatory or highly recommended for all individuals, and transplant candidates and recipients should follow that guidance.

The cloth face coverings [recommended by the CDC](#) are not surgical masks or N-95 respirators and they are not designed to protect the person wearing them. Rather, masks or cloth face coverings will prevent someone who does not know they are infected from spreading the virus to others. It is important to remember that the wearing of a mask should continue to be combined with good hand hygiene.



The [CDC does not recommend](#) wearing gloves under most circumstances. Instead, transplant candidates and recipients should wash their hands often.

Q: What is social distancing?

A: [Social distancing](#) is thought to be the best way to limit the spread of coronavirus. It means keeping space, at least 6 feet apart, between yourself and other people outside of your home, even when no one in that space has symptoms. This includes both indoor and outdoor places.

Q: Am I at higher risk of getting COVID-19?

A: We do not yet have specific information on whether COVID-19 infection will spread more easily among transplant candidates or recipients. However, experts are worried that this may be the case since chronic disease or immunosuppression usually lowers the amount of virus needed to cause infections. Most reports so far indicate transplant recipients are getting COVID-19 from the community, although frequent contact with the health care system may also be a risk. This is why it is important for you to take every precaution possible to avoid being infected.

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

A: The first step is to separate yourself from others. There are many different causes for fever, cough, shortness of breath, stomach upset, and flu-like symptoms, but you should get tested for COVID-19. It is

important to remember that most people, including transplant candidates and recipients, experience only mild to moderate symptoms recover from COVID-19 without problems. Many do not need hospitalization but are able to stay at home in isolation.

Other steps to take include:

- Contact **your transplant center FIRST** before going to a hospital or clinic.
- If you must leave home, place a surgical mask or cloth covering on when in public to avoid the spread of infection to anyone else.
- **Wash your hands** often with soap and water for at least 20 seconds. This is especially important after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- **Clean and disinfect** high-touch surfaces* in your “sick room” and bathroom; wear disposable gloves while disinfecting.
- If you are in home isolation, monitor your symptoms and seek emergency attention if you have trouble breathing, chest pain, confusion, severe fatigue.

*High-touch surface include phones, remote controls, counters, doorknobs, bathroom fixtures, toilets, keyboards, bedside tables

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

A: Testing availability has improved throughout the United States and is available through different mechanisms in different locations. If you believe you need to be tested for COVID-19, call your transplant team for further instructions, as they will be aware of what is available in your area.

There are 2 types of testing available at this time: [the direct viral test \(PCR\) and the antibody \(serology\) test](#). These 2 tests tell providers different things about a person’s exposure to COVID-19. The PCR test tells providers whether someone is currently infected, and it is performed by placing a swab into the nostril. The antibody test informs providers if someone was previously infected with COVID-19. From what we know so far, it takes about 1-3 weeks after the initial exposure for our bodies to develop antibodies. We do not know if having antibodies to this coronavirus protects from reinfection or how long that protection may last. We also do not know if everyone infected with SARS-CoV-2 will make the antibodies.

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

A: Healthcare facilities, including transplant centers, have put a lot of effort into keeping patients safe from COVID-19. A few examples of this include isolating patients with or suspected to have COVID-19 as well as limiting routine doctor and laboratory visits. Most centers are conducting telemedicine clinic visits to maintain safety. Please contact your transplant team for further information on these efforts.

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

A: The risk of acquiring COVID-19 from organ donation is unknown at this time but thought to be low. Organ procurement organizations are screening all potential donors for COVID-19 symptoms and exposure history. Most potential donors are tested for COVID-19.

The majority of transplant centers have also taken careful steps to screen living donors, including checking for symptoms, exposures and even viral testing. At some centers, living donors are being asked to not travel to high-risk areas and to isolate themselves before donation and monitor for symptoms.

Q: I had COVID-19. When can I stop self-isolating?

A: Even after recovering from COVID-19, you should stay home as much as possible, and practice social distancing. There are still many unanswered questions about COVID-19, including how long the virus remains in the body and whether it is possible to get sick with COVID-19 again. Contact your transplant center for guidance on when it will be safe to leave home for essential care, basic needs, and/or solitary exercise. Some basic parameters might include:

- your illness has resolved
- it has been at least 10 days since your symptoms first started
- you have not had a fever for three days without the use of fever reducing drugs like acetaminophen or ibuprofen
- your transplant center may require you to have a negative PCR test prior to re-entering the clinic

Q: I had COVID-19. When can I be cleared for transplant?

A: Transplant centers have different policies on this, and you should contact your specific center for more details once you are symptom free.

Q: Are there any travel or other restrictions for transplant recipients?

A: Travel increases your chances of getting and spreading COVID-19. Traveling may be especially dangerous if you, your travel companions, or those at your destination are at high-risk for contracting COVID-19

We currently recommend that transplant recipients:

- **Avoid all travel unless absolutely necessary** (no cruises, consider air travel only in dire circumstances). We also highly suggest that transplant recipients' immediate household contacts should postpone non-essential travel.
- **Stay home** as much as possible and put distance between you and other people if you must be out (stay 6 feet away, which is about two arm lengths).
- **Avoid crowds** (places of worship, concerts, shopping malls).

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

- [U.S. Department of State](#)
- [Centers for Disease Control and Prevention \(CDC\)](#)
- [World Health Organization \(WHO\)](#)
- [Public Health Agency of Canada](#)

Q: I am a transplant recipient and my partner/spouse/a household member is going back to work at a high risk job. What precautions should we take?

A: As some regions reopen, the [CDC](#) has issued extensive recommendations for people to safely go back to work. Regardless, transplant candidates and recipients should stay vigilant and continue safe practices to avoid infection from a family member. While there are no specific recommendations, some actions to consider include cleaning hands often, avoid sharing personal items (utensils, dishware), and for everyone in the household to closely monitor their symptoms. Your family member should also stay tuned to any reports of coworkers with suspected or confirmed COVID-19.

Q: My family member/co-worker is diagnosed with COVID-19, what should I do?

A: If a close contact is diagnosed or presumed to have COVID-19, you should:

- Avoid all further contact this person if possible (sleep in separate rooms, use separate bathrooms, avoid sharing food and dishes). Minimize shared spaces as much as possible and ensure good airflow. If this is not possible, ensure you are both wearing masks when within 6 feet of each other. Frequently clean and disinfect high contact surfaces such as light switches and doorknobs
- Let your transplant coordinator know that you have been in contact with someone diagnosed with COVID-19.
- Monitor for symptoms (see above) and contact your transplant coordinator immediately if you develop fever, cough or shortness of breath.
- Those with suspected or confirmed COVID-19 (including those awaiting test results) should stay at home and try to separate themselves from other people and animals in the household.

More detailed recommendations on home management of patients with COVID-19 can be found on the WHO and [CDC](#) websites.

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

A: If you are asked to return to work where you will have close interactions with people, you may be able to get a medical exemption and should discuss with your workplace and/or transplant team. You can also inquire about reassignment to an area with fewer person-to-person interactions. We recommend that you continue to practice social distancing and continue wearing face coverings or masks when leaving the house until COVID-19 infections are not reported in your area.

Q: How does COVID-19 impact children who are awaiting or received a transplant?

A: Children of all ages can get infected with COVID-19, but children seem to have milder symptoms compared to adults. For example, it is less common for children to report fever, cough or shortness of breath. Severe COVID-19 cases do occur in children, and immunosuppression as well as underlying health conditions such as chronic heart and lung diseases appear to be risk factors. Fortunately, very few cases of children who are transplant recipients have been reported so far.

One unique presentation of COVID-19 in children is multisystem inflammatory syndrome (MIS-C). MIS-C is a very rare condition where several parts in the body show high levels of inflammation. This can be severe at times and may require hospitalization. Although experts do not know what exactly causes MIS-C, there appears to be a connection to COVID-19. More information on MIS-C can be found [here](#).

Q: My child had a transplant. Is it safe for her/him to go back to school (or camp) when it reopens?

A: Before your child returns to school/camp please consider factors such as the number of cases in your community, the protective measures the school or camp is enforcing, and if social distancing is possible. We recommend your child wear a mask while at school or camp and continue frequent hand washing. Monitor your child closely for symptoms and call your physician immediately if they develop symptoms. Even with safety plans in place, some high-risk children may need to continue distance learning.

Q: My child had a transplant. Can we visit friends or family?

A: When deciding whether to visit friends and family it is important to consider the potential risks factors involved:

- The rate of transmission in your community
- Who is visiting (number of people, likelihood of COVID-19 exposure)
- Is anyone at risk for serious complications if they get COVID-19 (such as the elderly, those with underlying medical conditions, transplant recipients)
- Is it possible to remain socially distant during the visit

As the prevalence of COVID-19 in different parts of the country continues to vary, the risk of visiting others will change over time. It is important to keep up to date with your local public health department's and/or CDC's guidance. If you decide to see others, please continue to take [measures to protect](#) yourself and them (see question 1 above). We recommend discussion with your transplant team if you have specific concerns regarding visitation.

Q: I am a transplant recipient and my child is going back to school. What precautions should we take?

A: While there are no specific recommendations on this issue, transplant candidates and recipients should stay vigilant and continue with [safe practices](#). Some actions to consider include wearing masks at school, helping your child to clean their hands often, avoid sharing personal items, and closely

monitoring for symptoms. Also, stay tuned to any reports of students or teachers with suspected or confirmed COVID-19.

Q: How do I cope with stress and take care of my mental health?

A: We understand the uncertainty associated with the pandemic may be stressful for you.

We suggest the following to support yourself:

- Take breaks from watching, reading, or listening to news stories and social media.
- Take care of your body. Take deep breaths, stretch, or meditate. Try to eat healthy, well-balanced meals, exercise regularly, get plenty of sleep.
- Make time to unwind. Try to do some other activities you enjoy.
- Connect with others. Talk with people you trust about your concerns and how you are feeling.
- Call your healthcare provider if stress gets in the way of your daily activities for several days in a row.

Parents can find information about supporting their children during a COVID-19 outbreak on CDC's [Helping Children Cope](#) page.

Get immediate help in a crisis

- Call 911
- [Disaster Distress Helpline](#): 1-800-985-5990, or text TalkWithUs to 66746
- [National Suicide Prevention Lifeline](#): 1-800-273-TALK (8255)

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

A: The CDC and WHO are working hard to maintain up to date information about the spread of COVID-19 including changing conditions in the United States. Below is a list of some resources that may be helpful.

Resources for Patients

1. Get the latest public health information from CDC or WHO:
<https://www.coronavirus.gov>
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019>
2. Get the latest research information from NIH: <https://www.nih.gov/coronavirus>
3. For information on COVID-19 Treatment:
<https://www.covid19treatmentguidelines.nih.gov/whats-new/>

4. For information on specific clinical trials underway for treatment of patients with COVID-19 infection: clinicaltrials.gov.
5. Information from the American Society of Transplantation: <https://power2save.org/>
6. CDC information for COVID-19 and children: [Caring for Children](#)
7. COVID-19 information for parents from Pediatric Infectious Disease Society: [COVID-19 Resources](#)