

SEVERE ACUTE RESPIRATORY SYNDROME

NOTICE

Since 2004, there have not been any known cases of SARS reported anywhere in the world. The content in this PDF was developed for the 2003 SARS epidemic. But, some guidelines are still being used. Any new SARS updates will be posted on this Web site.



SEVERE ACUTE RESPIRATORY SYNDROME

Fact Sheet for SARS Patients and Their Close Contacts

Severe acute respiratory syndrome (SARS) is a viral respiratory illness caused by a coronavirus, called SARS-associated coronavirus (SARS-CoV). SARS was recognized as a global threat in March 2003, after first appearing in Southern China in November 2002. Over the next few months, the illness spread to more than two dozen countries in North America, South America, Europe, and Asia. Although the 2003 global outbreak was contained, it is possible that person-to-person transmission of SARS-CoV might recur. This fact sheet gives information about the illness and important instructions for preventing the spread of SARS. To find out more about SARS, visit CDC's SARS website www.cdc.gov/sars/ or the SARS website of the World Health Organization (WHO) www.who.int/csr/sars/en/.

Symptoms of SARS

The illness usually begins with a fever (measured temperature greater than 100.4°F [>38.0°C]). The fever is sometimes associated with chills or other symptoms, including headache, general feeling of discomfort, and body aches. Some people also have mild respiratory symptoms at the outset. About 10 percent to 20 percent of patients have diarrhea. After 2 to 7 days, SARS patients may develop a dry, nonproductive cough or feel short of breath. These symptoms might be accompanied by or progress to a ondition in which the oxygen levels in the blood are low (hypoxia). Most patients develop pneumonia.

How SARS spreads

The main way that SARS appears to spread is by close person-to-person contact. The virus that causes SARS is thought to be transmitted most readily by respiratory droplets (droplet spread) produced when an infected person coughs or sneeze. Droplet spread can happen when droplets from the cough or sneeze of an infected person are propelled a short distance (generally up to 3 feet) through the air and deposited on the mucous membranes of the mouth, nose, or eyes of persons who are nearby. The virus also can spread when a person touches a surface or object contaminated with infectious droplets and then touches his or her mouth, nose, or eye(s). In addition, it is possible that SARS-CoV might be spread more broadly through the air (airborne spread) or by other ways that are not now known.

What does "close contact" mean?

In the context of SARS, close contact means having cared for or lived with someone with SARS or having a high likelihood of direct contact with the respiratory secretions and/or body fluids of a patient known to have SARS. Examples include kissing or embracing, sharing eating or drinking utensils, talking to someone within 3 feet, physical examination, and any other direct physical contact between people. Close contact does not include activities such as walking by a person or briefly sitting across a waiting room or office.

Steps to protect yourself and the people around you

If you have SARS, or you have close contact with someone who does, follow these instructions:

If you think you (or someone in your family) might have SARS, you should:

- Call your healthcare provider as soon as possible. Call ahead and alert the healthcare provider before your visit so that precautions can be taken to keep from exposing other people.
- Cover your mouth and nose with a tissue when coughing or sneezing.

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- Be careful not to expose others. If you have been exposed to SARS and become ill with any symptoms, limit your activities outside the home. Avoid public transportation (e.g., bus, taxi). Do not go to work, school, out-of-home child care, church, or activities in other public areas until after you are told that you do not have SARS.
- Follow any other instructions provided by local health authorities.

If you have SARS and are being cared for at home, you should:

- Follow the instructions given by your healthcare provider.
- Limit your activities outside the home except as necessary for medical care. For example, do not go to work, school, or public areas. If you must leave the home, wear a mask, if tolerated. Do not use public transportation.
- Wash your hands often and well, especially after you blow your nose.
- Cover your mouth and nose with a tissue when you sneeze or cough.
- If possible, wear a surgical mask when around other people in your home. If you can't wear a mask, the members of your household should wear one when they are around you.
- Don't share silverware, towels, or bedding with anyone in your home until these items have been washed with soap and hot water.
- Be sure that surfaces (counters, tabletops, door knobs, bathroom fixtures, etc.) that have been contaminated by your body fluids (sweat, saliva, mucous, or even vomit or urine) are cleaned with a household disinfectant used according to the manufacturer's instructions. Be sure that the person who cleans the surfaces wears disposable gloves during all cleaning activities. Disposable gloves should be thrown out after use and should not be reused.
- Follow these instructions for 10 days after your fever and respiratory symptoms have gone away or until the health department says you can return to normal activities.

If you are caring for someone at home who has SARS, you should:

- Be sure that you understand and can help the SARS patient follow the healthcare provider's instructions for medication and care.
- Be sure that all members of your household are washing their hands frequently with soap and hot water or using an alcohol-based hand rub.
- Wear disposable gloves if you will have direct contact with body fluids of a SARS patient. However, wearing gloves is not a substitute for good hand hygiene. After contact with body fluids of a SARS patient, remove the gloves, throw them out, and wash your hands. Do not wash or reuse the gloves.
- Encourage the person with SARS to cover his or her mouth and nose with a tissue when coughing or sneezing. If possible, the person with SARS should wear a surgical mask during close contact with other people in the home. If the person with SARS cannot wear a surgical mask, other members of the household should wear one when in the room with that person.
- Do not use silverware, towels, bedding, clothing, or other items that have been used by the person with SARS until these items have been washed with soap and hot water.
- Clean surfaces in the patient's room and the bathroom fixtures used by the patient daily, with a household disinfectant used according to the manufacturer's instructions. When cleaning, wear disposable gloves, and dispose of them after use. Or, use household utility gloves.
- Limit the number of persons in the household to those who are essential for patient support. Other household members should either be relocated or minimize contact with the patient in the home. This is particularly important for persons at risk of serious complications of SARS (e.g., persons with underlying heart or lung disease, diabetes mellitus, older age).
- Unexposed persons who do not have an essential need to be in the home should not visit.

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- Follow these instructions for 10 days after the sick person's fever and respiratory symptoms have gone away or until the health department says the SARS patient can return to normal activities.
- For 10 days after your last exposure to the person with SARS, be vigilant for fever (i.e., measure your temperature twice daily), respiratory symptoms, and other early symptoms of SARS. Common early symptoms include chills, body aches, and headache. In some patients, body aches and headache may appear 12 to 24 hours before fever. Diarrhea, sore throat, and runny nose may also be early symptoms of SARS. If you do not have any of these symptoms, you do not need to limit your activities outside the home. You may go to work, school, out-of-home child care, church, or activities in other public areas.
- Follow any other instructions provided by local health authorities.
- If you start feeling sick, especially if you develop a fever, respiratory symptoms, or other early symptoms of SARS, contact your healthcare provider immediately, and tell the healthcare provider that you have had close contact with a SARS patient.

For more information, visit www.cdc.gov/sars or call the CDC public response hotline at (800) CDC-INFO (English), (888) 246-2857 (Español), or (888) 232-6348 (TTY)

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