



PROTECTING YOURSELF DURING THE RESPIRATORY ILLNESS SEASON: A PLAYBOOK FOR THE COMMUNITY

DECEMBER 14, 2020

The Leapfrog Group asked its Partners Advisory Committee to develop this guide for the community.

Acknowledgements

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INTRODUCTION

Now more than ever people across the United States must be in full preparation for respiratory season. Being prepared and maintaining a few simple practices will be our most powerful weapon to keep ourselves and families safe. In the third week of November alone, the human death toll from COVID-19 [was nearly 10,000](#), making the month the deadliest of the year since the pandemic began.¹ That's the equivalent of multiple plane crashes, every single day. With a whirlwind of news regarding COVID-19 continuously and relentlessly striking us from multiple angles each day, from how it is transmitted in different settings, to treatments and vaccinations, to testing, and continuous daily feeds on what to do and not do, it can be dizzying to keep up. It can also be confusing since much of the information can be inconsistent, causing more anxiety over the unknown.

How Respiratory Illnesses Are Spread

People can catch the viruses that cause COVID-19, influenza, and other seasonal respiratory illnesses through exposure to respiratory droplets. Respiratory droplets are droplets that you breathe out. When these droplets are infected with the virus, people can spread it to others. Here's how:

Contact transmission – direct contact with a person who has the virus. Examples include a handshake or a hug. Fomite transmission is term used to describe direct contact by touching a surface or an item that has become contaminated.

Droplet transmission – an infected person can breathe out droplets when breathing, speaking, singing, coughing, or sneezing. This can spread the virus when someone is close to the infectious person, within about 6 feet.

Airborne or Aerosol spread – droplets that you breathe out can remain in the air over longer distances (greater than 6 feet) and over longer periods of time (several hours).

Understanding the science of how these viruses spread helps us understand why the Four Pillars outlined below are so important in preventing the spread of COVID-19 and other respiratory illnesses.

The purpose of this playbook is to provide our readers with simple instructions on keeping ourselves and our families safe from not only SARS-CoV-2 (the virus that causes COVID-19 infection), but also influenza and other seasonal respiratory viruses that can progress into illness and sometimes death. The intended audience for this playbook is the general community. Healthcare professionals should reference [guidelines from the Centers for Disease Control and Prevention \(CDC\)](#).

There are four pillars to respiratory protection: [Hand hygiene](#), [social distancing](#), [mask wearing](#), and [surface disinfection](#).

Doing these four things consistently, as a bundled approach, will minimize your chances of being infected. Supplemental information regarding complementary best practices, including getting a flu shot and using antibiotics responsibly, is also included.

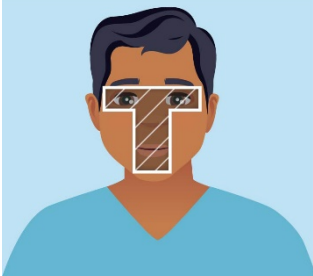
We are aligned with the recommendations of the CDC and are bound to reputable resources based on science. Each section provides simple but comprehensive information on the “why” behind each pillar with references or links to additional details for those wishing to learn more



PILLAR 1: HAND HYGIENE

When we are at home or out in the community, cleaning our hands or performing hand hygiene, is one of the most basic things we can do to stop the spread of germs and keep ourselves healthy, especially during respiratory illness season and at times of respiratory illness risk (e.g. pandemics).

AVOID TOUCHING YOUR T-ZONE Eyes, nose, and mouth



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Why is hand hygiene so important?

- Many germs are spread by hands. A person who is ill can spread germs to others directly, by shaking someone's hand, for example, or indirectly, by coughing or sneezing onto a surface or touching a surface after they have coughed or sneezed into their hands.
- Certain germs can live on surfaces for hours and sometimes even days.
- Most of the time our immune system helps us fight off germs, and we do not get sick. Sometimes we are exposed to too much of a particular germ at once or to a new germ to which we do not have immunity, and our bodies cannot fight off illness.
- Most people frequently touch their eyes, nose and mouth during the day, even if they are unaware that they are doing so. Our eyes, noses, and mouth are entry points for germs, so it is really important to clean our hands before and after we touch those areas or avoid touching them whenever possible.

Which type of hand hygiene product should I use and when should I use it?

Cleaning your hands well at key times is important to your health and keeping alcohol-based hand rub (ABHR), otherwise known as hand sanitizer, in your bag, car, etc. can help you be prepared when you do not have access to soap and water. However, there are a few times when using soap and water is best. In addition, while gloves are recommended in healthcare, they are not recommended for general use. However, if using gloves, hands should be cleaned immediately after removing gloves and gloves should be replaced and hands cleaned whenever you change activities.

When to Perform Hand Hygiene	With Soap and Water	With Alcohol-based Hand Rub (ABHR)
Before and after touching your eyes, nose, and face	✓	✓
After blowing your nose, coughing or sneezing	✓	✓
Before coming into your home from outside	✓	✓
Before and after entering a medical facility	✓	✓
Before and after caring for someone that is sick	✓	✓
Before and after caring for a cut or wound	✓	✓
After handling pets or animals	✓	✓
After touching garbage	✓	✓
After touching shared items in a public facility (e.g., touchscreens, elevator buttons, etc.)	✓	✓
After visiting a public location (e.g. shopping)	✓	✓
If your hands are visibly dirty/soiled or greasy	✓	
Before eating food	✓	
After using the toilet, assisting others with toileting, or changing diapers	✓	

Source: Adapted from <https://wwwdev.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/hand-sanitizer.html>

How to Clean Your Hands

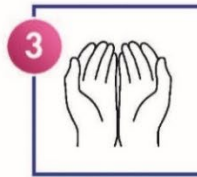
Using Alcohol-Based Hand Rub:



Apply product to the palm of one hand

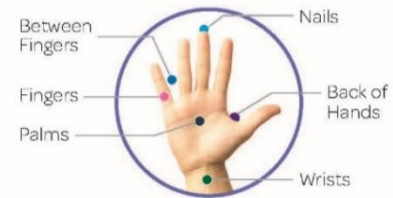


Rub hands together vigorously covering all surfaces thoroughly



Should take at least 15 seconds to dry completely

Where to Clean Your Hands:



Using Soap and Water:



Wet hands with lukewarm water



Apply the manufacturer's recommended amount of soap to hands



Rub hands together vigorously covering all surfaces thoroughly



Rinse hands with water



Dry hands with a disposable towel and use towel to turn off faucet

Centers for Disease Control and Prevention. Guidelines for hand hygiene in health-care settings—2002. Recommendations of the Healthcare Infection Control Practices Advisory Committee and the HICPAC/SHEA/APIC/IDSA Hand Hygiene Task Force. MMWR 2002;51(RR-16):1-45.

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Can you clean your hands too often?

Oftentimes people wonder if they can clean their hands too often. The answer is both yes and no. There are good germs and bad germs on our hands. The good germs live in the deeper layers of your skin, are healthy and are part of our normal microbial community. The bad ones (the ones picked up from touching contaminated surfaces, for example) are the ones we want to get rid of by cleaning our hands. Some people are concerned about killing too many good germs. The good news is that both hand washing with soap and water and ABHR target mostly bad germs, and even though some good germs are removed and killed too, they easily grow back. Hand hygiene does not contribute to the development of germs that are harder to kill or “resistant.”

Increase hand lotion use when:

- Weather is cold or dry
- Adjusting to new things for your hands (e.g. a new soap)
- Hands are dry from activities at work
- Hands are dry from activities outside of work, like gardening or cleaning
- Hands feel tight or dry and if they look red or flakey

Other key points and best practices for your hand hygiene:

- Hand hygiene is best practiced by using a good quality, fragrance free hand soap or ABHR.
- When washing hands, use warm water rather than hot to help protect your skin.
- Read the label for directions, ingredients and safety warnings.
- Be sure to choose an ABHR that contains 60-95% alcohol.

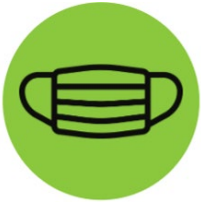


PILLAR 2: SOCIAL DISTANCING

Social distancing means keeping a safe space between yourself and other people that you do not live with. To practice social distancing, stay at least 6 feet (about 2 arms' length) from other people who are not from your household. This includes both indoor and outdoor spaces. Social distancing helps limit the chances you will come in contact with contaminated surfaces, droplets, and infected individuals.

Here are some tips for practicing social distancing:

1. **When using public transportation, try to keep at least 6 feet from other passengers or transit operators.** When using rideshares or taxis, avoid pooled rides where multiple passengers are picked up. Sit in the back seat in larger vehicles, so you can remain at least 6 feet away from the driver.
2. **Limit contact when running errands.** If you are in an area with high levels of COVID-19 activity, only do essential shopping and activities in person when you absolutely need to. Stay at least 6 feet away from others who are not from your household while shopping and when you are in line. Pay attention to any physical guides, such as tape markings on floors or signs on walls, to help stay 6 feet apart when in lines or moving around. Use drive-thru, curbside pick-up, or delivery services to limit face-to-face contact with others. Maintain physical distance between yourself and delivery people.
3. **Stay connected with friends and family who do not live in your home by calling, using video chat, or through social media.** If you do meet with others in person, stay at least 6 feet from others who are not from your household.
4. **Avoid crowded places where it may be hard to stay 6 feet apart,** you can't control the distance between you and another person, and/or you can't leave if social distancing is not being followed (e.g., an airplane, public transportation, elevators). If you are in a crowded space, try to keep as much distance as possible and encourage others to do the same, wear a mask and practice hand hygiene. Allow other people 6 feet of space when you pass by them in both indoor and outdoor settings.
5. **Outdoors vs. indoors – choose outdoors!** You are far less likely to touch an infected surface when outdoors. The airflow is better, too. Droplets in the air will get quickly diluted by fresh air and will fall to the ground rapidly where they can no longer be breathed in. You always have air flowing, and it is easier to keep more than six feet apart from people when you are outdoors. Think carefully about hosting or attending anything indoors. If you must gather indoors, please consider the recommendations from the CDC on [personal and social activities](#).



PILLAR 3: MASK WEARING

Since the start of the COVID-19 pandemic, more and more Americans are now wearing masks in recognition of the important role they play in stemming the spread of COVID-19 or other respiratory transmitted illnesses. Masks come in many styles and materials, but they generally work in the same way. Layers of fibers from the fabric block and capture large droplets and smaller particles that come from your nose and mouth. These large droplets and smaller particles can carry germs that cause respiratory illness. Masks offer some protection to you and are also meant to protect those around you, but they are not a substitute for social distancing. For preventing the spread of COVID-19, masks work most effectively when everyone wears them and remains physically distanced from others. Many places encourage or even require staff, employees, the public and/or guests/visitors to wear masks, depending on the local situation and illness rates.

The type of mask you wear and how it is worn matters. The guidance provided below is intended for the general community.

In a study conducted at Duke University,² researchers demonstrated the effectiveness of many different types of masks, ranging from types worn by health care workers to home-made masks.

✔ WHAT TO WEAR		VS.	✘ WHAT NOT TO WEAR		
Multi-layered cloth masks 	Disposable masks 		Bandanas 	Gaiter face masks 	Masks with vents 

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Best masks:

- Cloth masks with at least TWO layers that fit snugly and are worn properly
- Surgical masks (are meant to be worn once, so throw them away when you’re done with them)

Masks that are NOT recommended:

- Masks with vents or valves
- Bandanas
- Gaiters
- Any mask that doesn’t fit snugly, is dirty, or has rips or holes in it

If you don’t have a double-layer cloth mask, do the best you can with the face covering you have. Something is better than nothing! Wear a clean mask daily and change your mask if it becomes wet or dirty.

Always be sure to clean your hands before putting on your mask. Put it over your nose and mouth, secure it under your chin, and fit it snugly against the sides of your face (see a video [here](#)). Make sure you can breathe easily. When removing your mask, handle your mask only by the ear loops or ties. Untie the strings or remove the ear loops and place your disposable mask in the trash or place

your re-usable mask in a brown paper bag temporarily to re-use later or place it in a plastic bag if it is wet or dirty until you can wash it. Clean your hands immediately after touching your mask.

Do not wash disposable masks. To wash your re-usable mask, place it in the washing machine with your regular laundry. Launder it according to the fabric label. Dry your mask completely in a warm or hot dryer OR hang it to air dry, preferably in the sun. Do not wear a wet or damp mask as this can cause skin irritation and make it difficult to breathe. Refer to the CDC's guidelines for washing and storing masks [here](#).

WEARING YOUR MASK



Cover it!
Wear your mask over your mouth *and* nose, and make sure there are no tears or gaps where air can get in or out.



Be careful with it!
If you have to touch your mask, wash or sanitize your hands before and after.



Replace it!
If you're using a disposable mask, be sure to throw it away and use a new one each day. Washable masks should be laundered daily.

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When to wear a mask:

- When you're in public places, such as the store
- When you're outside and can't maintain at least a 6-foot distance from others
- When you are sick inside your house and can't maintain a 6-foot distance from others who live in your home
- When you are caring for someone who is sick

HOW NOT TO WEAR YOUR MASK

Below your nose



With gaps on the sides or too loose



Below your mouth



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There are some people who should not wear masks. They include:

- Children under the age of 2
- Those with medical conditions that make it difficult to breathe when wearing a mask (this is the only time a face shield alone is acceptable)
- Anyone who cannot remove a mask themselves or let someone know that they are having difficulty breathing, such as someone who is unconscious

There are some situations where a mask must be removed in public or it may not be possible to wear a mask. Below are a few examples of what you can do in these circumstances.

Situation	What to Do
Eating at a restaurant	Choose outdoor dining whenever possible. Wear your mask at all times, except when actively eating and drinking.
Playing sports	Choose outdoor activities over indoor activities. Wear a mask if possible. If you are unable to wear one due to difficulty breathing, choose a location with greater ventilation and maintain social distancing of at least 6-feet.
During a medical or dental appointment	Wear a mask at all times such as when checking in with reception or sitting in a waiting room. Remove your mask only when necessary, such as key moments during the exam when you are asked to remove it.



PILLAR 4: SURFACE DISINFECTING

Why is surface disinfection so important?

- Germs spread in many different ways. With illnesses like the flu and COVID-19, people can easily spread respiratory viruses through the air - by sneezing and coughing. When aerosolized droplets carrying the viruses get into the air, they often will fall onto many of the surfaces in a room – e.g., tabletops, the arms of chairs, desktops, people’s hands – almost anywhere you can think of.
- A very recent study from Australia’s national science agency, CISRO, showed that certain viruses can remain viable on surfaces as dried droplets for up to 28 days.³
- Cleaning and disinfecting potentially exposed surfaces periodically is important as part of a comprehensive infection reduction program.

What is the difference between cleaning, sanitizing and disinfecting?

According to the [CDC](#), the high-level differences are as follows:

- **Cleaning**
 - Cleaning refers to the removal of germs, dirt and impurities from surfaces. It doesn’t kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.
- **Disinfecting/sanitizing**
 - Disinfecting/sanitizing refers to using chemicals to kill germs on surfaces. This process doesn’t necessarily clean dirty surfaces or remove germs, but by killing germs on a surface after cleaning, it can further lower the risk of spreading infection.

The U.S. [Environmental Protection Agency](#) (EPA) is charged with approving chemicals that are used for sanitizing and disinfecting surfaces (e.g., surface disinfectants) and has very strict standards for determining which products can be called hard surface sanitizers and which are classified as disinfectants. After a hard surface is cleaned, an EPA registered disinfectant must be able to kill at least 99.99% of different types of germs on a hard surface in less than 10 minutes.

How do you know if the disinfectant you want to use is approved for use against the viruses that cause the flu or COVID-19?

- Every container of disinfectant should have what is referred to as an “EPA Reg. No.” on its label. It will typically look like this, for example: “EPA Reg. No. 84526-6” though it may have a longer number. If it does not have an EPA Reg. No., the product cannot claim to kill or control germs of any type.
- If the container does have an EPA registration number, there will likely be writing on the label that describes the specific germs that the chemical has been proven to kill or inactivate. That writing should contain a listing for at least one “Influenza” virus if it is to be used to protect you from the flu virus.
- If you want to use a disinfectant to also help protect you against COVID-19, you will likely have to look up the disinfectant on the [EPA’s website](#). The virus that causes COVID-19 has not been around long enough to be widely tested, but the EPA has created “List N” to name all the disinfectants that are qualified to inactivate viruses that are very similar to the SARS-Cov-2 virus that causes COVID-19.

Once I have a disinfectant, how can I use it?

- First and foremost, you should follow the directions that come with the product and read all the warnings on the label. The warnings can help keep you and your family stay safe, and they might suggest on what surfaces the disinfectant should and should not be used.
- All disinfectants available to consumers will require that the surfaces you are trying to disinfect stay visibly wet for what is known as the “contact time.” The contact time for any specific disinfectant should be in the use instructions on the container. (If in doubt, let the surfaces remain wet for 10 minutes before wiping the surface dry.)
- Disinfectants normally come in several different forms:
 - **As “wet wipes” in canisters for use directly on hard surfaces.** Because of the use of the wipe itself, you may need to pay even greater attention to ensure you leave the surface wet for the proper amount of time.
 - **As a liquid in a regular bottle.** The instructions for use of these products will often specify how they can be applied, either with a cloth, a sponge or in a separate spray bottle. If you use a cloth or a sponge, be sure to not overuse it or you will risk spreading the germs around on the surfaces. If you use a spray bottle, see the suggestions below. Again, all surfaces need to stay visibly wet for the required contact time.
 - **As a liquid in a spray bottle with a trigger.** While spray bottles can be easy to use, you need to be sure that the surfaces you are focusing on are sprayed completely and allowed to stay wet for the required time. Avoid spraying in such a way as to simply get large droplets on the surface with gaps between them – any viruses in the gaps will not be inactivated. A fine spray is much better.
 - **As a liquid in an aerosol can.** Normal aerosol cans of disinfectant are easy to use and typically produce a nice, fine spray. Keeping the surface wet and avoiding overspray and inhaling it remain issues to think about.
 - **As a liquid for use with a separate high-tech sprayer.** As the issue of infectious diseases has really caught our attention, there are sprayers on the market being purchased by consumers for disinfecting their houses and vehicles. One new popular option is the electrostatic sprayer, sometimes misleadingly called a fogger. These devices are excellent for use outdoors with plenty of ventilation or indoors with specialized Personal Protective Equipment (PPE) more commonly seen in hospitals and other public safety and commercial environments. The small, electrically charged droplets are not meant to be inhaled by you when you are applying the disinfectant, so caution is required (especially in enclosed spaces). The advantage is that the disinfectant will coat surfaces very easily and, when done properly, can stay wet for the disinfectant’s contact time (which is still required, just like any other spray disinfectant).

What about other devices like air purifiers and ultraviolet lights?

- Be very careful when reading about devices that claim to kill or eliminate viruses and bacteria. Because they are not regulated by any government agency, the manufacturers can make false and/or misleading claims. Buyer beware!
- Ultraviolet (UV) lights are used quite successfully for sanitizing surfaces in certain professional settings like hospitals and nursing homes, but these lighting “robots” are highly specialized and expensive. Even these robots have difficulty dealing effectively with germs if there are shadows or if the light is too far away from the surfaces being treated. UV light can be harmful to your eyes and your skin if you get overexposed to it.
- Like UV lights, some sophisticated air purifiers can help reduce the amount of germs in the air and, when used over an extended period of time, can perhaps reduce the numbers of germs on surfaces. Most home air purifiers will have little or no effect on the viruses that cause the flu or COVID-19.

The keys to keeping the surfaces with which you come in contact safer are to use an EPA approved chemical disinfectant (look for the EPA Reg. No. on the label) and follow the instructions that come with the product.

OTHER BEST PRACTICES

Vaccination

The primary goal during respiratory illness season is infection prevention. This includes the Four Pillars previously discussed – hand hygiene, social distancing, mask wearing, surface disinfection – as well as vaccination. Vaccination prevents specific diseases from occurring, which subsequently reduces the burden on you and the healthcare system and avoids future outbreaks. Vaccination may also prevent co-infections (two infections occurring together, e.g., influenza and COVID-19) and secondary infections (an infection that develops as a result of the initial infection, e.g., post-influenza bacterial pneumonia).

A recent [report](#) from the CDC showed a disturbing drop in routine childhood vaccinations due to the COVID-19 pandemic. Notably, the CDC and the American Academy of Pediatrics (AAP) recommend that every child continues to receive routine vaccinations during the pandemic.⁴ The importance of staying up to date on vaccinations is not limited to children. In fact, most illnesses, hospitalizations, and deaths from vaccine-preventable diseases occur in adults. In addition to [annual influenza vaccination](#),⁵ other vaccines may also be recommended for adults, depending on their risk factors, to prevent tetanus, diphtheria, and pertussis (whooping cough); pneumococcal diseases; shingles; hepatitis A and B; meningococcal disease; measles, mumps, and rubella; and human papillomavirus. The recommended vaccination schedules for children and adults can be found [here](#).

Vaccines for COVID-19 are quickly being developed and submitted to the U.S. Food and Drug Administration (FDA) for emergency use authorization. To stay informed about state specific vaccine distribution programs please visit the “COVID-19 Vaccine Operational Guidance” page of the CDC [here](#).

Other common-sense infection prevention measures include covering your cough and staying home when you are sick.

Responsible Antibiotic Use

If you do become ill, understanding when and when not to use antibiotics is critical. Antibiotics are medicines used to treat infections caused by bacteria. Bacteria can change over time and become resistant to certain antibiotics, meaning the antibiotics will not work anymore. Antibiotic resistance is bad – it causes infections that are more difficult and more expensive to treat and may even lead to death. The World Health Organization has named antibiotic resistance one of the most urgent threats we will face over the next decade.

Antibiotic resistance happens when bacteria are exposed to antibiotics; in other words, antibiotic use is a key driver of antibiotic resistance. Even more troubling is the fact that we use a lot of antibiotics when we don’t need them – one-third to one-half of all antibiotic prescriptions are not needed. Many respiratory illnesses, like the common cold, are caused by viruses, and antibiotics do not work against viruses (Table 1). However, there are other things you can do to help you feel better if you have a viral respiratory illness:

- ✓ Get plenty of rest.
- ✓ Stay hydrated. Make sure you’re drinking/eating fluids.
- ✓ Use a clean humidifier or cool mist vaporizer, or breathe in steam from a bowl of hot water or shower.
- ✓ Use saline nasal spray or drops to help a stuffy nose.
- ✓ Use lozenges to soothe a sore throat or cough (only if 4+ years old).
- ✓ Use honey to relieve cough for adults and children at least one year old.
- ✓ Ask your doctor or pharmacist about over-the-counter medicines that may help with symptom relief.
- ✓ Establish a relationship with a primary care provider, so you can contact them if any of the following occur:
 - Temperature of 100.4°F or higher or fever that lasts for more than 4 days
 - Shortness of breath or trouble breathing
 - Symptoms that last more than 10 days without improvement
 - Symptoms that improve but then return or worsen
 - Worsening of chronic medical conditions
 - Any other symptom that is severe and/or causes alarm

If you do visit a health care provider, and an antibiotic is prescribed, ask questions. What kind of infection do you have? Will you get better without it? What are the side effects? How long should you take it? Antibiotics save lives, and when an antibiotic is needed, the benefits far outweigh the potential risks. However, protecting yourself by being proactive is important. If you mutually agree that an antibiotic is necessary, make sure you:

- ✓ Take it exactly as prescribed.
- ✓ Do not skip doses.
- ✓ Do not share medication with others.
- ✓ Do not save it for later. Talk to your pharmacist about safe disposal of leftover medicines.

See [other resources](#) for additional information about responsible antibiotic use.

Table 1. Virus or Bacteria?

Common Condition	Common Cause			Are Antibiotics Needed?
	Bacteria	Bacteria or Virus	Virus	
Strep throat	✓			Yes
Whooping cough	✓			Yes
Urinary tract infection	✓			Yes
Sinus infection		✓		Maybe
Middle ear infection		✓		Maybe
Bronchitis/chest cold (in otherwise healthy children and adults)*		✓		No*
Common cold/runny nose			✓	No
Sore throat (except strep)			✓	No
Flu			✓	No

* Studies show that in otherwise healthy children and adults, antibiotics for bronchitis won't help you feel better.

Source: https://www.cdc.gov/antibiotic-use/community/pdfs/aaw/AU_viruses-or-bacteria-Chart_508.pdf

Resources

COVID-19

For more information on COVID-19, visit the Center for Disease Control and Prevention's website at <https://CDC.gov/coronavirus>

Vaccination

Vaccination During COVID-19: <https://www.cdc.gov/vaccines/parents/visit/vaccination-during-COVID-19.html>

Vaccines You Need as an Adult: <https://www.cdc.gov/vaccines/adults/index.html>

Prevent Seasonal Flu: <https://www.cdc.gov/flu/prevent/index.html>

Responsible Antibiotic Use

Choosing Wisely: <https://www.choosingwisely.org/patient-resources>

Be Antibiotics Aware: <https://www.cdc.gov/antibiotic-use/index.html>

Antibiotics and You: <http://antibioticsandyou.org/>

Colds, Flu, & Other Respiratory Illnesses in Adults: <https://www.choosingwisely.org/patient-resources/colds-flu-and-other-respiratory-illnesses-in-adults/>

Antibiotics for a Sore Throat, Cough, or Runny Nose in Children: <https://www.choosingwisely.org/patient-resources/antibiotics-for-respiratory-illness-in-children/>

Speak Up: Antibiotics – Know the Facts: <https://www.jointcommission.org/resources/for-consumers/speak-up-campaigns/antibiotics-know-the-facts/>

ABCs of Antibiotics: <http://professionals.site.apic.org/infographic/abcs-of-antibiotics/>

Using Antibiotics Wisely: <https://choosingwiselycanada.org/campaign/antibiotics/>

Do Bugs Need Drugs? – Early Childhood Education: <http://www.dobugsneeddrugs.org/educational-resources/daycare-early-childhood-education/>

Cold Standard Toolkit (for providers): <https://choosingwiselycanada.org/perspective/the-cold-standard/>

References

- ¹ Daily Updates of Totals by Week and State – Provisional Death Counts for Coronavirus Disease 2019 (COVID-19). Centers for Disease Control and Prevention. <https://www.cdc.gov/nchs/nvss/vsrr/COVID19/index.htm?fbclid=IwAR3hy7dIMLzeHegFWS8hzSzbyKJGDU8JYKX5DIStl0qTnnq-a75p1xKE-I>. Published December 10, 2020. Accessed December 10, 2020.
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