



COVID-19 Questions and Answers

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1. Q. What are the symptoms of possible COVID-19 infection?

A: Typical symptoms for COVID-19 can include, but are not limited to: a temperature at or above 100° Fahrenheit, night sweats or chills, a persistent cough, and/or shortness of breath. Individuals must be free of fever reducing medications (ibuprofen, acetaminophen, etc) when evaluating symptoms.

2. Q. What should I do if I think I have COVID-19?

A: Please contact your health care provider before visiting a medical treatment facility. TRICARE beneficiaries should call the Nurse Advice Line at one of the following toll-free numbers based on your location:

Bahrain: 800-06432
Belgium: 0800-81933
Germany: 0800-071-3516
Greece: 00-800-4414-1013
Italy: 800-979721
Spain: 900-82-2740
Turkey: 00-800-44-882-5287
UK: 0800-028-3263

*** To access the Nurse Advice Line (NAL) from a cell phone in Europe you must first call your clinic appointment line and choose the option for the Nurse Advice Line.***

Non-TRICARE beneficiaries should contact their primary care provider or Insurance Provider for advice.

As always, if you are experiencing respiratory distress, or believe you have a life threatening condition, please call emergency services or report to the closest emergency room.

3. Q. Who can get tested, and how?

A: The guidance is the same for all of Army Medical Treatment Facilities here in Europe. Our MTFs screen patients in accordance with Department of Defense and The Centers for Disease Control and Prevention guidelines. Initial entry screening at every MTF will consist of a questionnaire to determine if you have a fever or symptoms. Testing is based on four priorities:

- 1) A person who exhibits symptoms that include, but are not limited to as temperature of 100.4 F or higher, night sweats or chills, persistent cough and shortness of breath
- 2) A person that has been identified by a tracer team as having been in close contact with a person that is COVID-19 positive
- 3) A person who is in an identified “high risk” work area as defined by having two or more COVID-19 positive cases within the same workspace or workgroup
- 4) Other people identified by the Senior Responsible Officer as being at risk

These protocols will help your healthcare provider determine whether or not you need to be tested for COVID-19. Because there are limitations on testing at this time, we are testing the highest likelihood individuals to try to track the disease and attempt to slow its spread.

One important thing to remember is that our providers don't treat COVID-19. They treat its symptoms. So whether or not you have a positive test will not change the treatment you receive; it just allows us to track where and how the virus is spreading, and isolate people who have been infected. Our providers are taking all appropriate action to ensure the safety of our beneficiaries.

4. Q: What is considered “close contact,” and what should I do if I’ve come into close contact with a COVID-19 positive individual?

A: A contact event is generally described as: 1) being within six feet of a COVID-19 positive individual for 10 minutes or more, 2) being in an enclosed area or workspace (i.e., an office) with a COVID-19 positive individual for 10 minutes or more, or 3) contact with respiratory or bodily fluid (i.e., coughed or sneezed on, cared for at home, etc.) from a COVID-19 positive individual. If you have been in close contact with someone who is COVID-19 positive contact your health care provider as explained above.

As a close contact of someone who is COVID-19 positive, you are required to isolate in your residence for 14 days from last contact with the infected individual. See Guidelines for Isolation and Restriction of Movement below.

5. Q: What happens if someone tests negative for COVID-19?

A: If you have been identified as a close contact of someone who is COVID-19 positive, you are required to isolate in your home for 14 days from last close contact with the infected individual or a positive test result, whichever date is later.

If you tested negative for COVID-19, and have NOT had close contact with someone who is COVID-19 positive, continue to monitor for symptoms and contact your healthcare provider if you develop a fever greater than 100 F, accompanied by a cough and sore throat.

If you tested negative for COVID-19, but HAVE had close contact with someone who is COVID-19 positive you are still required to isolate in your residence for 14 days from last contact with the infected individual. You should continue to monitor for symptoms and contact your healthcare provider if you develop a fever greater than 100 F, accompanied by a cough and sore throat.

6. Q: What happens when someone tests positive for COVID-19?

A: Personnel who test positive for COVID-19 will isolate (completely restricted to quarters) for at least 14 days following the onset of symptoms. If an individual has completed 14 days in isolation since the onset of symptoms AND if the individual has been free of symptoms for three days, the individual is eligible for release. If the individual still has symptoms, he/she will remain in self-isolation until free of symptoms for three days. Release authority for positive individuals is a public health worker, functioning under the authority of a supervising garrison public health emergency officer.

7. Q: What is a Person Under Investigation (PUI)?

A: Individuals who have been in contact with a COVID-19 positive patient and have COVID-19 symptoms will be identified as a Person Under Investigation (PUI) and will be tested for the virus. These individuals will be isolated (completely restricted to quarters) for 14 days from the date of exposure. If, at the end of 14 days they have been free of symptoms for three consecutive days, they will be reviewed for release from self-isolation. Release authority for PUI individuals is a public health worker, functioning under the authority of a supervising garrison public health emergency officer.

8. Q: What does isolation and Restriction of Movement (ROM) mean?

A: Individuals who have been in contact with a COVID-19 positive individual but don't have symptoms will be placed under Restriction of Movement (ROM) and will isolate (completely restricted to quarters) for 14 days from date of exposure. If at the end of 14 days they have been free of symptoms for three consecutive days then they will be released. Release authority is the first O5 battalion commander in the chain of command or O6 staff supervisor in the supervisory chain of command. If directed to isolate yourself you must:

Stay within your home or quarters and monitor your health for signs of respiratory illness (cough, sore throat, shortness of breath, or fever exceeding 100 F).

Do not travel, visit public/crowded areas, or use public transportation.

If living with family members or roommates, maintain separate living space to the greatest extent possible.

While this does not preclude all personal contact, limit proximity to at least 6 feet as much as possible.

Increase hand washing frequency, particularly before and after personal interactions.

Open windows to increase air flow.

Use separate sleeping arrangements and hygiene areas when possible.

Do not prepare food for non-restricted individuals.

Sanitize shared spaces after utilization.

Personnel under ROM will immediately notify their chain of command and unit medical team if they experience a fever > 100 F, subjective fever (feeling warm and cold), coughing, difficulty breathing, or shortness of breath.

9. Q: What does quarantine mean?

A: This is a term to identify the status of a person who has had close contact with someone who is COVID-19 positive but is not showing any symptoms yet. The same procedures should be followed as for anyone who is isolated and on Restriction of Movement.

10. Q: What if one person in a family is identified as having had "close contact" with a COVID-19 positive person, what does that mean for the rest of their family?

A: Close contacts of someone who is COVID-19 positive, are placed on Restriction of Movement (ROM) and will isolate (completely restricted to quarters) for 14 days from date of exposure. The close contact should isolate from the rest of the family, but as long as that individual doesn't develop symptoms - then family members are not categorized or restricted. Family members should maintain separate living space to the greatest extent possible. While this does not preclude all personal contact, limit proximity to at least six feet as much as possible. If the close contact begins to develop symptoms, he/she becomes a PUI and all family members are placed on ROM (See definition and details in PUI and ROM definitions).

11. Q: What if one person in a family tests positive for COVID-19, what does that mean for the rest of their family?

A: Family members who have been in contact with a COVID-19 positive individual but don't have symptoms will be placed under Restriction of Movement (ROM) and will isolate (completely restricted to quarters) for 14 days from date of exposure. If at the end of 14 days they have been symptom free for three consecutive days, they will be released. Release authority is the first O5 battalion commander in the chain of command or O6 staff supervisor in the supervisory chain of command. Family members should stay within their home or quarters and monitor their health for signs of respiratory illness (cough, sore throat, shortness of breath, or fever exceeding 100 F).

Do not travel, visit public/crowded areas, or use public transportation.

Maintain separate living space to the greatest extent possible from the COVID-19 positive family member.

While this does not preclude all personal contact, limit proximity to at least 6 feet as much as possible.

Increase hand washing frequency, particularly before and after personal interactions.

Open windows to increase air flow.

Use separate sleeping arrangements and hygiene areas when possible.

Do not prepare food for non-restricted individuals.

Sanitize shared spaces after utilization.

Personnel under ROM will immediately notify their chain of command and unit medical team if they experience a fever > 100 F, subjective fever (feeling warm and cold), coughing, difficulty breathing, or shortness of breath.

12. Q: Who is responsible for supporting COVID-19 positive or ROM individuals?

A: The unit is required to support COVID-19 positive individuals and those on ROM.

13. Q. What do I do if my Installation Medical Treatment Facility is closed?

A: TRICARE beneficiaries should call the Nurse Advice Line at one of the following toll-free numbers based on your location:

Bahrain: 800-06432

Belgium: 0800-81933

Germany: 0800-071-3516

Greece: 00-800-4414-1013

Italy: 800-979721

Spain: 900-82-2740

Turkey: 00-800-44-882-5287

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Non-TRICARE beneficiaries should contact their primary care provider or Insurance Provider for advice.

As always, if you are experiencing respiratory distress, or believe you have a life threatening condition, please call emergency services or report to the closest emergency room.

14. Q. Does LRMC have a COVID-19 Screening Center?

A: LRMC's COVID-19 Screening Clinic located just outside of the Emergency Department Entrance, Bldg. 93761A, and is open 24/7. If you have COVID-19 symptoms and believe you may have come into contact with a suspected or known case of COVID-19, please first call the Nurse Advice Line for instructions, and then see us in the COVID-19 Screening Clinic.

The COVID-19 Screening Clinic is open to ALL members of the military community who are eligible for space-available care at LRMC. This includes all TRICARE beneficiaries, DOD Civilians, DODEA and NAF employees, and military retirees not enrolled to LRMC.

Please note: not all patients who come to the COVID-19 Screening Clinic will actually be tested for COVID-19. Through a variety of screening processes, to include potential testing for flu strains, the providers in the COVID-19 Screening Clinic will determine those patients with the highest likelihood of having COVID-19.

It is vital that patients manage expectations. Not everyone can be tested for COVID-19. We ask that patients not show to the COVID-19 Screening Clinic if you are feeling healthy and "just want to know;" you are putting yourself and your loved ones at risk through potential exposure.

15. Q. Are Army Medical Treatment Facilities in Europe seeing patients?

A: As the number of COVID-19 cases in Europe continues to grow, we have had to make some adjustments within our medical treatment facilities. Effective immediately, priority will be given to acute and emergent care and COVID-19 screening. We will also be prioritizing Preventive Health Assessments based on need. We remain committed to maintaining the health and readiness of our beneficiaries, but these changes could impact some routine appointments. Patients with appointments to address routine complaints of several weeks-months duration may be asked to adjust the timing of their appointments. If that happens, they will be contacted in advance by your Primary Care Team.

In an effort to minimize exposure risk and spread of COVID-19, we are also limiting points of entry to our clinics and we will be screening for COVID-19 risk indicators. Please fully cooperate with the clinic staff conducting the screenings and checkups. They are doing this to protect all Soldiers, family members and staff from the spread of infection.

We are committed to maintaining the overall health and Readiness of our military community while prioritizing acute and emergent care. We apologize for any inconvenience and will do our best to maximize access to care. If you have questions or need more information, please contact your primary care provider.

16. Q. Are Army Dental Clinics in Europe seeing patients?

A: Army Dental Clinics in Europe are only seeing emergency or urgent dental cases at the moment and have temporarily suspended all routine or elective appointments. Routine, or elective, appointments are those that do not require immediate or urgent care and can be postponed until risk of transmission of COVID-19 is lower. Elective care includes; routine cleanings, fillings or restorative work, including pediatric and orthodontic care. Patients with routine appointments will be notified of appointment cancellations and provided information on when and how to reschedule.

17. Q. If the bases in the Kaiserslautern Military Community area shut down, would that mean Army Health Clinics and LRMC would be closed too? If yes, how would medical care work (with referrals and billing)?

A: LRMC will remain open in the event of a base shutdown and will conduct screening for members of the military community. Wait times may vary depending on patient load.

Click here for more answers to commonly asked questions:

<https://phc.amedd.army.mil/topics/campaigns/covid19/Pages/Frequently-Asked-Questions.aspx>