



H1N1 TOP 10 REMINDERS FOR STAFF

Revised 09/01/09

- 1) **ANY** patient admitted with "flu like" symptoms (fever greater than 100°F or 37.8°C, chills, sore throat, cough, fatigue, headache and body aches) should be placed in any private room on Standard Plus Droplet Precautions. If symptoms include diarrhea, Contact Precautions should be added. Patients with a diagnosis of pneumonia should be asked about current or recent presence of "flu like" symptoms as noted above; if response is "yes," they should be placed on Standard Plus Droplet Precautions. Be sure to enter type of precautions instituted on Patient Factor Screen. Discontinuation of Precautions should be cleared by Infection Control.
- 2) The orange facemask with ear loops now used was selected a few years ago as a superior mask. Its protective ability when properly worn is similar to that of an N95 and should be worn when caring for a patient known or suspected of having influenza. Use N-95 respirators and eye protection for aerosol-generating procedures including: bronchoscopy, open suctioning of airway secretions, resuscitation involving emergency intubation or cardiopulmonary resuscitation (CPR), obtaining an NP culture and endotracheal intubation and sputum induction. Masks should be removed upon exiting a room and discarded -- **SINGLE USE ONLY**.
- 3) Hand hygiene, hand hygiene, hand hygiene.
- 4) Educate patient and family. If the patient leaves the room, he/she needs to wear the orange mask with ear loops. Visitors/family need to wear the mask when in the room with the patient. Make sure to demonstrate/emphasize proper hand hygiene.
- 5) Testing for H1N1 may be ordered as a rapid screen for influenza A and/or a viral culture. This is done by using a kit provided by the lab and collecting an NP specimen. For details on how to collect an NP sample go to: <http://video.cdc.gov/asxgen/nip/isd/swabdemo.wmv>
Infection Control or Microbiology should be contacted if specific testing for PCR-H1N1 is requested.
- 6) Anyone with any of the following symptoms should stay home: fever, cough, runny nose, sore throat, fatigue, body aches, and in some cases, nausea, diarrhea and/or vomiting. Managers/Supervisors should refer employees with symptoms to the Employee Health Office (EHO) for assessment. The current Centers for Disease Control (CDC) recommendations for use of Tamiflu will be followed by the EHO. If employees and doctors meet CDC criteria, the EHO will provide a course of Tamiflu (on weekends, employees are referred to Baptist Medical Plaza Urgent Care Centers). Employees should stay home for 7 days from the day symptoms first appear, or until 24 hours after symptoms have gone away (whichever is longer). Those off duty due to a "flu-like" illness should report to the EHO or their designee for clearance before returning to work.
- 7) Pay strict attention to cough etiquette. Use a tissue to cover your mouth and nose when you cough, or cough into your sleeve or upper arm. Drop your tissue into a waste basket. As always, clean your hands often with soap and water or with a hand sanitizer.
- 8) Pregnant women who will likely be in **direct** contact with patients with confirmed, probable, or suspected influenza A H1N1 (e.g., a nurse, physician, or respiratory therapist caring for hospitalized patients), should, whenever **possible**, not be assigned to care for these patients.
- 9) It is still unclear how much H1N1 vaccine will be provided to Baptist Health. As the H1N1 vaccine becomes available, Baptist Health will follow the CDC guidelines for vaccine distribution. We strongly urge everyone to take the seasonal influenza vaccine already available through EHO. Watch the intranet Sun page and employee newsletters for information.
- 10) Remember your Infection Control representatives are available 24/7/365. Call their office or find them through the affiliate operator.