

## Novel Influenza A H1N1 (Previously Called Swine Flu)—Hospital Guidance #2

### Infection Control Interim Recommendations for Novel Influenza A H1N1

**PLEASE NOTE:** This advisory provides interim guidance. Because this is a rapidly evolving situation, guidance is likely to change in the upcoming days and weeks as more information becomes available.

#### **BACKGROUND**

Cases of H1N1 novel influenza virus infection have now been confirmed throughout the entire United States. Illness signs and symptoms have consisted of influenza-like illness (ILI), including fever, respiratory tract illness (cough, sore throat, runny nose), headache, muscle aches; some cases also have had vomiting and diarrhea. Epidemiologic and clinical data to date indicate that the novel influenza A (H1N1) virus appears to behave similarly to seasonal influenza in terms of the severity of illness and transmission of infection. In addition, enhanced laboratory surveillance has disclosed an unexpected rate of influenza cases due to seasonal types A/H1, A/H3, and B continuing to circulate in California.

Because of these factors, Los Angeles County is recommending the same infection control recommendations as those practiced for seasonal influenza infection. These infection control recommendations are being made in conjunction with enhanced surveillance among healthcare workers and hospitalized ILI patients to promptly identify signals of increasing severity or changing epidemiology of this virus. This revised recommendation represents the minimum level of infection control precautions; clinicians or infection preventionists may apply increased levels of infection control as indicated by a specific patient or situation. This guidance applies to all healthcare personnel (e.g. employees, students, contractors, attending clinicians, and volunteers) whose activities involve contact with patients.

#### **INTERIM RECOMMENDATIONS**

Droplet and standard precautions should be used for all patient care activities for all patients with symptoms of ILI, including patients with confirmed, probable, or suspect H1N1 novel influenza infections. Standard precautions include hand hygiene plus gloves, gown, face shield/eye protection as indicated by patient care activities and risk of exposure to blood/body fluids, plus donning a surgical mask. These precautions should be maintained until patient symptoms have resolved. More information on droplet precautions can be found at [http://www.cdc.gov/ncidod/dhqp/gl\\_isolation\\_droplet.html](http://www.cdc.gov/ncidod/dhqp/gl_isolation_droplet.html).

Personnel engaged in aerosol-generating activities (e.g., collection of clinical specimens, endotracheal intubation, nebulizer treatment, bronchoscopy, and resuscitation involving emergency intubation or cardio-pulmonary resuscitation) for suspected or confirmed respiratory infections including H1N1 novel influenza cases should wear a fit-tested disposable N95 respirator.

The ill person should wear a surgical mask when inside a healthcare facility to reduce exposing others, and should be encouraged to wash hands frequently and follow good respiratory hygiene practices.

For any questions, please call Acute Communicable Disease Control at 213-240-7941.

*Guidelines for the treatment and prophylaxis of Novel Influenza A H1N1 (Previously Called Swine Flu) are constantly evolving. Decisions will have to be made based on resources, personnel, local conditions, and the clinical picture of the patient(s) and their contacts. Therefore, clinicians may need to modify their treatment and prophylaxis based on changing guidelines.*