



## Washington State Hospital Association Swine Flu Outbreak Information for Hospitals

*Below are answers to some questions hospital leaders may anticipate in response to the swine flu outbreak. Please be sure to share this information with the staff members working on this issue within your hospital.*

### **What Should You Tell the Public Your Hospital Is Doing?**

*We recommend the following action statements:*

- Staff are washing hands to prevent the spread of infections
- Our hospital is actively monitoring for patients that may be infected
- Patients with flu-like symptoms are being placed in a private room and kept separate from other patients as recommended by the Centers for Disease Control and Prevention
- We are keeping up to date on the latest recommendations from the CDC and what additional precautions might be recommended
- Hospitals have been actively involved in planning for just such events for many years
- Our hope is this flu virus does not spread, but we have processes in place to support our communities should the outbreak become worse

*The information below was taken from the Centers for Disease Control and Prevention website at: [www.cdc.gov/swineflu](http://www.cdc.gov/swineflu). Additional information is also available from the Washington State Department of Health at [www.doh.wa.gov/swineflu/default.htm](http://www.doh.wa.gov/swineflu/default.htm) or contact your local public health department. We will update this document as more information becomes available.*

### **What is the Swine Flu?**

Swine Influenza (swine flu) is a respiratory disease of pigs caused by influenza viruses. People do not normally get swine flu, but human infections have been known to happen. The current swine flu virus can be spread from person-to-person. A person cannot get swine flu by eating pork.

### **Where has the Swine Flu Been Found?**

To date, the swine influenza A (H1N1) virus (SIV) has been confirmed in Southern California, Kansas, New York, Texas, and several other states as well as Mexico and British Columbia – with more cases being identified every day. The only deaths thus far have been in Mexico. There are no confirmed cases of swine flu in Washington State at this time.

### **What are the Symptoms of Swine Flu?**

The symptoms of swine flu in people are fever, tiredness, lack of appetite and coughing. Some people with swine flu also have a runny nose, sore throat, nausea, vomiting, and diarrhea.

### **How Long is Swine Flu Contagious?**

Persons with swine influenza A (H1N1) virus infection should be considered potentially contagious for up to 7 days following the start of the illness. Persons who continue to be ill longer than 7 days after the start of the illness should be considered potentially contagious until symptoms have resolved. Children,

especially younger children, might potentially be contagious for longer periods. The duration of time a person is infectious might vary by swine influenza virus strain.

### **How is Swine Flu Spread?**

Swine flu is spread in the same way other types of flu are spread. It is spread through coughing or sneezing by people with influenza. It is also spread by touching something with the virus on it and then touching your nose or mouth.

### **What Can Hospital Staff do to Prevent Getting the Flu?**

First and most important: *Hospital staff should wash their hands!* The flu can live at least two hours on surfaces such as bedside tables, rails, and doorknobs. Staff should also get plenty of rest, eat healthy, drink plenty of fluids, be physically active, and manage stress.

### **What Should Our Hospital Do if We Suspect a Patient of Having the Swine Flu?**

If swine flu is suspected, clinicians should obtain a respiratory swab for swine influenza testing and place it in a laboratory refrigerator (not a freezer). Once collected, the hospital should contact their state or local health department to facilitate transport to a state public health laboratory.

### **How Should We Care For Patients with Swine Flu?**

Patients with suspected or confirmed case-status should be placed in a *single-patient room* with the door closed. If available, an airborne infection isolation room (AIIR) with negative pressure air handling with 6 to 12 air changes per hour can be used. For suctioning, bronchoscopy, or intubation, use a procedure room with negative pressure air handling.

The *ill person should wear a surgical mask when outside of the patient room*, and should be encouraged to wash hands frequently and follow [respiratory hygiene practices](#). Cups and other utensils used by the ill person should be washed with soap and water before use by other persons. Routine cleaning and disinfection strategies used during influenza seasons can be applied to the environmental management of swine influenza. More information can be found at [http://www.cdc.gov/ncidod/dhqp/gl\\_envirioninfection.html](http://www.cdc.gov/ncidod/dhqp/gl_envirioninfection.html).

*Droplet and Contact precautions should be used* for all patient care activities, and maintained for 7 days after illness onset or until symptoms have resolved. Maintain adherence to *hand hygiene by washing with soap and water or using hand sanitizer* immediately after removing gloves and other equipment and after any contact with respiratory secretions.

Personnel providing care to or collecting clinical specimens from suspected or confirmed cases should *wear disposable non-sterile gloves, gowns, and eye protection* (e.g., goggles) to prevent conjunctival exposure.

Until more information is available on transmission:

- Personnel engaged in aerosol generating activities (e.g., collection of clinical specimens, endotracheal intubation, nebulizer treatment, bronchoscopy, and resuscitation involving emergency intubation or cardiac pulmonary resuscitation) for suspected or confirmed swine influenza A (H1N1) cases should wear a fit-tested disposable N95 respirator.
- Pending clarification of transmission patterns for this virus, personnel providing direct patient care for suspected or confirmed swine influenza A (H1N1) cases should wear a fit-tested disposable N95 respirator when entering the patient room.

### **How is the Swine Flu Treated?**

The CDC recommends the use of antiviral medications for the treatment and/or prevention of infection

with the swine influenza viruses. For more information on the latest recommendations go to <http://www.cdc.gov/swineflu/recommendations.htm>.

### **How Can Patients Help Prevent the Spread of Swine Flu?**

WSHA is preparing a fact sheet for patients. It includes advice such as:

- Asking caregivers and visitors to wash or sanitize their hands
- Cover nose and mouth with a tissue when coughing or sneezing
- Wash or sanitize their own hands often
- Avoid touching eyes, nose or mouth
- Try to avoid close contact with sick people
- Stay home from work or school when sick and limit contact with others to keep from infecting them.

### **What Should Hospital Leaders Tell People to Do If They Get Sick?**

#### ***We recommend sharing the following information:***

*If you live in areas where swine influenza cases have been identified and become ill with influenza-like symptoms, including fever, body aches, runny nose, sore throat, nausea, vomiting, or diarrhea, contact your health care provider, particularly if you are worried about your symptoms. Your health care provider will determine whether influenza testing or treatment is needed.*

*If you are sick, you should stay home and avoid contact with other people as much as possible to keep from spreading your illness to others.*

*If you become ill and experience any of the following warning signs, seek emergency medical care.*

*In children emergency warning signs that need urgent medical attention include:*

- *Fast breathing or trouble breathing*
- *Bluish skin color*
- *Not drinking enough fluids*
- *Not waking up or not interacting*
- *Being so irritable that the child does not want to be held*
- *Flu-like symptoms improve but then return with fever and worse cough*
- *Fever with a rash*

*In adults, emergency warning signs that need urgent medical attention include:*

- *Difficulty breathing or shortness of breath*
- *Pain or pressure in the chest or abdomen*
- *Sudden dizziness*
- *Confusion*
- *Severe or persistent vomiting*

*If you have additional questions about hospital Emergency Preparedness, please contact Peggi Shapiro, Director of Disaster Readiness at [peggis@wsha.org](mailto:peggis@wsha.org) or (206) 216-2864.*

*For more information on Patient Safety issues, please contact Carol Wagner, Vice President for Patient Safety at [Carolw@wsha.org](mailto:Carolw@wsha.org) or (206) 577-1831.*

*If you need assistance with media inquiries, please contact Beth Zborowsk, Director of Program Communications at [bethz@wsha.org](mailto:bethz@wsha.org) or (206) 577-1807.*