Webpage: http://dhss.alaska.gov/dph/Epi/id/Pages/default.aspx



QUICK GUIDE FOR LONG-TERM CARE FACILITIES (LTCF): INFLUENZA OUTBREAKS INFLUENZA VACCINATION **AT A GLANCE** Vaccinations can decrease likelihood of an outbreak, and in the event of an outbreak, can Incubation 1-4 days (average decrease hospitalizations and deaths among residents. The Centers for Disease Control period 2 days) and Prevention (CDC) recommends annual influenza vaccination for everyone 6 months of age and older, especially residents and staff of LTCF's. Period of 1 day before Vaccinate newly admitted residents and newly hired staff throughout the flu season. communicability symptoms start up Keep a record of vaccination status of residents and staff. to 10 days after symptom onset **Report to Public** 1 confirmed **DIAGNOSIS** influenza positive Health case or Common symptoms of influenza include: fever, fatigue, headache, cough, sore throat, > 2 suspect cases runny or stuffy nose, chills, and muscle aches. with ILI among Elderly patients may experience more subtle symptoms, including anorexia, mental status residents within 72 State of Alaska – changes, pneumonia, low-grade or no fever, worsening of chronic respiratory conditions or hours of each Section of congestive heart failure. other **Epidemiology** Ph: 907-269-8000 Familiarize yourself with signs and symptoms of influenza-like illness (ILI) in the elderly. Fax: 907-563-7868 Public Health provides specimen collection kits and laboratory testing at no cost when a LTCF influenza outbreak is suspected. Contact the Alaska State Public Health Laboratory – http://dhss.alaska. Fairbanks at 907-371-1000 or Section of Epidemiology at 907-269-8000. gov/dph/Epi/Page s/pubs/conditions Even if it's not influenza season, influenza testing should occur when any resident has signs /default.aspx and symptoms that could be due to influenza, and especially when two residents or more develop respiratory illness within 72 hours of each other. Tamiflu Treatment: 75 mg TREATMENT vs. PROPHYLAXIS twice daily for 5 days Antiviral Treatment: Give antiviral medication to all residents and staff with confirmed or suspected ILI. Antiviral treatment can shorten the duration of fever, illness symptoms, and hospitalizations, and may reduce the risk of complications such as pneumonia and Prophylaxis: 75 respiratory failure or death. mg once daily for a minimum of 2 Do not wait for laboratory results to initiate treatment. weeks and for 7-10 Chemoprophylaxis: Give antiviral medication to all non-ill residents and consider for nondays after onset of ill, unvaccinated staff after a laboratory-confirmed case of influenza. It's important to last known case administer these courses of medication SIMULTANEOUSLY. Prophylaxis is approximately 70-90% effective in preventing influenza. **Lab Testing** (a)Rapid influenza PREVENTION OF ADDITIONAL CASES diagnostic test*; (b) RT-PCR Encourage residents and staff to minimize risk of infecting others. *negative test • Limit large group activities and consider serving all meals to residents in their rooms. does not rule out • Ill residents should stay in their rooms and limit time spent in common areas; all meals influenza should be served in their rooms if possible. **Further information including CDC** • Avoid new admissions or transfers to areas with symptomatic residents. guidelines: • Designate staff to care for ill residents and minimize staff movement between areas in http://dhss.alaska.gov/dph/Epi/id/Pages the facility with illness and areas not affected by the outbreak. /influenza/fluinfo.aspx • Limit visitation and exclude anyone with ILI from visiting the facility. • Monitor staff absenteeism for respiratory illness and exclude ill staff for at least 24 https://www.cdc.gov/flu/professionals/i hours after fever is gone without use of fever-reducing medications. ndex.htm Place signs around facility indicating that an outbreak is occurring. Regularly monitor the health of staff and residents.