

MDS Alert

Clip and Save: CDC Protocols For Flu Outbreak

Try to contain the spread of infection and focus on prevention.

The 2017-2018 flu season has been brutal, and skilled nursing facilities have reported influenza outbreaks. Make sure your facility and staff are implementing the necessary precautions and isolation protocols to minimize flu risks.

The **Centers for Disease Control and Prevention** (CDC) describes a long-term care facility outbreak as involving a positive influenza case along with other cases of respiratory infection in two or more ill residents, according to their website's page on Interim Guidance for Influenza Outbreak Management in Long-Term Care Facilities.

If you're not sure whether an outbreak is occurring, the CDC recommends testing for flu "when any resident has signs and symptoms that could be due to influenza, and especially when two residents or more develop respiratory illness within 72 hours of each other."

If you suspect or confirm an outbreak of influenza, follow these steps, per CDC website guidance:

- "Conduct daily active surveillance until at least 1 week after the last confirmed influenza case occurred.
- "Test for influenza in the following:
 - o "Ill persons who are in the affected unit as well as previously unaffected units in the facility
 - o "Persons who develop acute respiratory illness symptoms more than 72 hours after beginning antiviral chemoprophylaxis
 - o "**Note:** Elderly persons and other long-term care residents, including those who are medically fragile and those with neurological or neurocognitive conditions, may manifest atypical signs and symptoms with influenza virus infection, and may not have fever.
- "Ensure that the laboratory performing the tests notifies the facility of tests results promptly.
- "The local health and state health departments should be notified of every suspected or confirmed influenza outbreak in a long-term care facility, especially if a resident develops influenza while on or after receiving antiviral chemoprophylaxis."

Important: If your facility has a resident who is confirmed or suspected to have influenza, that resident should receive antiviral treatment immediately, the CDC says.

"The recommended dosing and duration of antiviral treatment is twice daily for 5 days. Longer treatment courses for patients who remain severely ill after 5 days of treatment can be considered. Dosage adjustment may be required for children and persons with certain underlying conditions. Clinicians should consult the manufacturers' package insert for recommended drug dosing adjustments and contraindications," the CDC says.

Containing the outbreak is crucial

When caring for a resident (or multiple residents) who are suspected or confirmed to have the flu, make sure everyone on your staff knows to follow these CDC-recommended droplet precautions (beyond standard precautions that everyone should practice at all times):

"Examples of Droplet Precautions include:

- "Placing ill residents in a private room. If a private room is not available, place (cohort) residents suspected of having influenza residents with one another;

- "Wear a facemask (e.g., surgical or procedure mask) upon entering the resident's room. Remove the facemask when leaving the resident's room and dispose of the facemask in a waste container.
- "If resident movement or transport is necessary, have the resident wear a facemask (e.g., surgical or procedure mask), if possible.
- "Communicate information about patients with suspected, probable, or confirmed influenza to appropriate personnel before transferring them to other departments."

Note: Your facility may decide to implement these standard hygiene and droplet precaution protocols longer than seven days after illness onset, because immunocompromised residents may shed the influenza virus for a longer amount of time, the CDC says. Residents may still shed influenza virus while receiving antiviral treatment.

Make These Practices Standard to Reduce Flu Transmission

The CDC encourages facilities to implement the following procedures to contain any spread of influenza:

- "Have symptomatic residents stay in their own rooms as much as possible, including restricting them from common activities, and have their meals served in their rooms when possible.
- "Limit the number of large group activities in the facility and consider serving all meals in resident rooms if possible when the outbreak is widespread (involving multiple units of the facility).
- "Avoid new admissions or transfers to wards with symptomatic residents.
- "Limit visitation and exclude ill persons from visiting the facility via posted notices. Consider restricting visitation by children during community outbreaks of influenza.
- "Monitor personnel absenteeism due to respiratory symptoms and exclude those with influenza-like symptoms from work until at least 24 hours after they no longer have a fever.
- "Restrict personnel movement from areas of the facility having illness to areas not affected by the outbreak."