Implement "Cover your Cough" Education (also known as "respiratory hygiene / cough etiquette" or "good health manners")

Objective: Reduce the spread of illnesses (including influenza) spread via respiratory droplets in areas such as waiting rooms of Emergency Departments or outpatient clinics.

- All patients or visitors with fever + cough should be provided with a surgical mask.
- A screening form for swine influenza is available for use (attached). The screening form is available on http://health.state.tn.us/swineflu.htm
- Provide instructions on proper use and disposal of masks. Posters developed by CDC can be found at the following URL: http://www.cdc.gov/flu/protect/covercough.htm. Other educational materials can be found at http://www.publichealth.va.gov/InfectionDontPassItOn/
- For patients who cannot wear a surgical mask, provide tissues and instructions on when to use them (i.e., when coughing, sneezing, or controlling nasal secretions), how and where to dispose of them and the importance of hand hygiene after handling this material.
- Provide hand hygiene materials in waiting room areas and encourage patients with respiratory symptoms to perform hand hygiene. Alcohol concentrations of alcohol-based hand sanitizers should be between 60 and 95%.
- Designate an area in the waiting room where patients with respiratory symptoms can be segregated (ideally by at least 3 feet) from other patients who do not have respiratory symptoms.
- Place patients with respiratory symptoms in a private room (preferred) or cubicle as soon as possible.
- Implement use of surgical masks by healthcare personnel during the evaluation of patients with respiratory symptoms.
- Consider the installation of plexiglass barriers at the point of triage or registration to protect healthcare personnel from contact with respiratory droplets.
- If no barriers are present, instruct registration and triage staff to remain at least 3 feet from unmasked patients and to consider wearing surgical masks. If triage staff are in an area where aerosol-generating procedures are performed, N95 respirators should be considered.
- Continue to use droplet precautions to manage patients with respiratory symptoms until it is determined that the cause of symptoms is not an infectious agent that requires precautions beyond Standard Precautions.
- Staff should wear N-95 respirators if performing aerosol-generating procedures (including collection of respiratory specimens)
- CDC recommends wearing of N-95 respirators, gowns, gloves and eye-protection when obtaining upper respiratory specimens such as nasopharyngeal swabs

Interim Guidance for Antiviral Treatment

Objective: To reduce mortality and complications from influenza

- Antiviral treatment should be considered for confirmed, probable or suspected cases of swine-origin influenza A (H1N1) virus infection.
- Treatment of hospitalized patients and patients at higher risk for influenza complications should be prioritized.
- Use oseltamivir (Tamiflu) or zanamivir (Relenza)
- Dosage and duration of therapy is the same as for seasonal influenza.
- Secondary bacterial infections are possible during any influenza illness (consider methicillin-resistant *Staphylococcus aureus* [MRSA])
- Details can be found at: http://www.cdc.gov/swineflu/recommendations.htm

Interim Guidance for Antiviral Prophylaxis

Objective: To reduce mortality and complications from influenza

Antiviral chemoprophylaxis with either oseltamivir or zanamivir is ***recommended*** for the following individuals:

- Household close contacts who are at high-risk for complications of influenza (e.g., persons with certain chronic medical conditions, persons 65 or older, children younger than 5 years old, and pregnant women) of a confirmed or probable case.
- Health care workers or public health workers who were not using appropriate personal protective equipment during close contact with an ill confirmed, probable, or suspect case of swine-origin influenza A (H1N1) virus infection during the case's infectious period. See guidelines on personal protective equipment.

Antiviral chemoprophylaxis with either oseltamivir or zanamivir can be ***considered*** for the following persons who are at high-risk for complications of influenza (e.g., persons with certain chronic medical conditions, persons 65 years or older, children younger than 5 years old, and pregnant women)

- Household close contacts of a suspected case.
- Children attending school or daycare who had close contact (face-to-face) with a confirmed, probable, or suspected case.
- Health care workers who are working in an area of the healthcare facility that contains patients with confirmed swine-origin influenza A (H1N1) cases, or who is caring for patients with any acute febrile respiratory illness.
- Travelers to Mexico (Note: A travel warning is currently in effect indicating that nonessential travel to Mexico should be avoided.)
- First responders who are working in areas with confirmed cases of swine-origin influenza A (H1N1) virus infection.
- Prophylaxis is for 10 days after last contact with infectious patient
- Details can be found at: http://www.cdc.gov/swineflu/recommendations.htm

Interim Guidance for Diagnostic Testing for Novel H1N1 (Swine) Influenza:

Objective: To characterize the presence of novel/swine influenza virus in Tennessee, **not** to diagnose every ILI. Results of testing will **not** influence treatment decisions

- Instructions on collection and shipping of specimens (prefer nasopharyngeal swab or aspirate, nasal wash or aspirate rather than oropharyngeal) are attached.
    - Use only sterile Dacron or rayon swabs with plastic shafts or metal rods. Do **not** use calcium alginate swabs or swabs with wooden sticks, as they may contain substances that inactivate some viruses and inhibit PCR testing.
    - Place in viral transport medium
    - Refrigerate specimen, do **not** freeze.
    - Send to State Public Health Laboratory for PCR testing
        - Do **not** send to commercial/in-house laboratory
        - Due to risk to laboratory staff, viral cultures should **not** be performed.
        - Use Novel Influenza H1N1 PCR specimen form posted on the TDH website: http://health.state.tn.us/swineflu.htm