

Preparing for H1N1 Flu in Your Office What you Need to Know

Is your office ready to handle the health of both staff and patients during this flu season? Use this Checklist as a guide to assist you, your patients and to keep your office staff informed.

Triaging Patient Calls:

Any Patient calling the office requesting for fever or any respiratory symptoms should be asked these two key questions:

1. Do you have a temperature of 100°F or 37.8°C or higher?
2. Do you have a sore throat, cough, headache, body aches, or runny nose?

Adult or pediatric patients who answer “yes” to both questions should be put into precautions upon arrival.

Patients should not be sent to the Emergency Room unless the patient experiences any of the following:

Children

- Fast breathing or trouble breathing
- Bluish skin color
- Not drinking enough fluids / symptoms of dehydration
- 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

Adults

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

*New CDC guidance indicates that patients with influenza-like illness should stay home for at least 24 hours after their fever is gone (without the use of fever-reducing medicine).

*Patients may be contagious from one day before they develop symptoms to up to seven days after they get sick. Children, especially younger children, might potentially be contagious for longer periods.

*For patients who are instructed to stay home, direct the patient to the home care instructions available on the CDC website: http://www.cdc.gov/h1n1flu/guidance_homecare.htm.

Office Preparations:

1. Post “Stop” patient instruction signs at all patient entrances and at check in station (sample attached)
2. Sanitizer, Tissues and Mask should be available at patient entrances with sign
3. Recommend a designated room for patients with symptoms, assure mask is worn by patient and accompanying family at all times unless
4. After symptomatic patient leaves the exam room, clean surfaces that may have been contaminated with respiratory/oral secretions.

Protection for Staff:

1. Conscious effort to wash hands before and after each patient encounter and throughout day
2. For any aerosol-generating procedures on suspected or confirmed patients, a fitted N95 mask should be worn with protective gear, such as goggles and gloves
3. All office staff should monitor themselves for symptoms consistent with H1N1 Flu. If symptomatic, should follow office absence policies.
4. Pregnant and Immuno-Compromised health care workers should not be assigned to care for H1N1 patients whenever possible
5. Initial doses of H1N1 vaccine will be targeted per CDC guidelines to: Pregnant women, Persons aged 6 months to 24 years, Caregivers of infants less than 6 months of age, Health care providers and first responders, Persons aged 25 to 64 years with underlying chronic conditions

Testing Guidelines:

1. Follow Washtenaw County Pandemic Group Recommendations of 2009 pandemic H1Ni Influenza A Testing and Treatment (documents attached)

Patient & Staff Education:

1. Attached CDC reference: “2009 H1N1 Flu and You” and “Seasonal and Novel H1N1 Flu: A Guide for Parents”

Sources: UMHS Ambulatory Care H1N1 Flu Guidelines, Washtenaw County Pandemic Group, www.cdc.gov/h1n1flu, www.HVPA.com