

INFLUENZA – At-a-Glance

DEFINITION	<p>Influenza, commonly known as "the 'flu'", is an infectious disease caused by an influenza virus. Symptoms can be mild to severe. Symptoms can include pyrexia, coryzal symptoms, muscle pains, headache, sore throat, and lethargy. In the paediatric patient there may be nausea and vomiting.</p>
MANAGEMENT	<p>If a flu swab is recommended, then a throat/nasopharyngeal swab needs to be collected using a viral transport medium swab.</p> <p>Isolate in a side room – use OUH ‘Droplets precautions’ isolation poster. Door must remain closed. If it is not possible to isolate, please seek advice from IPC team. STRICT attention to Droplets infection prevention and control precautions.</p> <ul style="list-style-type: none"> • Hand hygiene • Apron and gloves to be worn if in contact with blood or bodily fluids • HCWs assessing or caring for patients with a suspected (clinically diagnosed) or confirmed influenza are advised to wear a fluid repellent surgical mask (single use) when in close contact with the patient (within two metres) • FFP3 masks (single use) are required for patients undergoing aerosol-generating procedures • Eye protection should be worn when there is risk of exposure to blood and/or bodily fluids or during AGPs. • If the patient is transferred, please inform receiving staff of patient’s infection status, including radiology, theatres, or other hospital/health care settings. The patient should be asked to wear a fluid repellent surgical mask if tolerated. • When discharging infected patient to another healthcare setting, please complete the ‘Inter-Healthcare Infection Prevention and Control transfer form’. <p style="text-align: center;">Encourage patients to perform good respiratory hygiene and cough etiquette (Catch it, Bin it, Kill it)</p>
CLEANING	<ul style="list-style-type: none"> • Equipment- Single use / single patient use if possible. • A daily enhanced clean of the side room/ bed space for a patient with influenza should be requested via the help desk and a terminal clean on discharge. • All frequently touched surfaces should be clutter free and cleaned three times a day. • All equipment used MUST be decontaminated using CLINELL WIPES (green packet) before being brought out of the patient room and after every patient use.
STOP ISOLATION WHEN?	<p>These precautions should be implemented for patients with suspected or confirmed influenza for a minimum of 5 days after illness onset. Release from isolation after 5 days if clinically improved and free of fever for 24hours. Maximum 10 days isolation, no further testing required.</p> <p>If immunocompromised release from isolation following resolution of symptoms for 24hours. Viral shedding can be prolonged in immunocompromised patients. For advice on prolonging isolation, please contact micro/ID.</p>