

Cameron Kaiser, M.D.
Interim Public Health Officer

Susan D. Harrington, M.S., R.D.
Director, Dept. of Public Health

Public Health Influenza Advisory

October 30, 2012

The County of Riverside Department of Public Health (DOPH) provides this guidance based on current information. Updated guidance will be issued as new information becomes available.

SITUATION UPDATE

- The following recommendations take into account guidance issued by the U.S. Centers for Disease Control and Prevention (CDC) following recent increases in human cases of variant swine influenza (H3N2v and H1N2v). Statewide influenza activity continues to be sporadic. It is not known which strains will dominate during the 2012-2013 influenza season.
- Data collection for County of Riverside 2012-2013 influenza season began October 5th. To date the data shows; local levels of influenza-like-illness (ILI)* related activity at emergency departments, and the number of ILI* related deaths was **slightly below expected levels** seen during this time of the year. ILI* related visits to sentinel physician offices **were within levels normally** seen for this point in the influenza season.
- Vaccination and good infection control remain the best prevention strategies. This year's vaccine contains antigens from
 - A/California/7/2009 (H1N1)pdm09-like virus;
 - an A/Victoria/361/2011 (H3N2)-like virus;
 - a B/Wisconsin/1/2010-like virus (from the B/Yamagata lineage of viruses)

ACTIONS REQUESTED OF ALL CLINICIANS

- Report laboratory-confirmed** cases of seasonal influenza that meet the specified criteria and outbreaks of undiagnosed ILI* in residents of large groups or institutional settings to County of Riverside Disease Control by fax (951) 358-5102.
- Treat patients with suspected or confirmed influenza who are hospitalized for severe illness or who are at higher risk for influenza-related complications with oseltamivir or zanamivir. Treat early and empirically, without relying on lab test results. Influenza Antiviral Medication Summary for clinicians is located at <http://www.cdc.gov/flu/antivirals/index.htm>. Advise persons with ILI* to stay at home until 24 hours after fever resolves, except patients that require medical evaluation and care.
- Encourage and facilitate influenza vaccination for all persons 6 months of age and older. An **algorithm** to determine which children younger than age 9 years need two doses of vaccine is available at <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6132a3.htm#fig1>
- Pneumococcal vaccination is also recommended for those at increased risk of pneumococcal disease.
- Review immunization records to determine if vaccination with Tdap (or DTaP for children less than 7 years of age) is indicated.

*ILI is defined as fever (>37.8°C or 100°F) and either cough or sore throat (in the absence of a known cause).

INFLUENZA TESTING, SPECIMEN COLLECTION AND SUBMISSION

- Collection of Influenza Specimens: Acceptable specimens for submission to the Riverside County Public Health Laboratory are nasopharyngeal washes or swabs and oropharyngeal washes and swabs. If swabs are submitted, only Dacron-tipped swabs on an aluminum or plastic shaft should be placed in a standard container with 2-3 ml of viral transport medium. Calcium alginate swabs and cotton-tipped swabs with wooden shafts are unacceptable and will be rejected.
- Specimens should be collected within the first 24-72 hours of onset of symptoms and no later than 5 days after onset of symptoms. The closer the specimen is collected to the onset of symptoms, the better chance of isolating the Influenza virus.
- Specimens should be kept refrigerated at 4C until they can be transported to the lab. If the specimen cannot be transported on cold packs within three days of collection, it should be frozen at -70C and shipped on dry ice.
- The Riverside County Public Health Laboratory is able to receive specimens Monday through Friday.

Please contact County of Riverside Department of Public Health Laboratory at (951) 358-5070 for questions on specimen submission. Disease Control can be reached at (951) 358-5107 for questions on reporting influenza cases.

INFECTION CONTROL PRECAUTIONS FOR HEALTHCARE SETTINGS

All healthcare facilities should adopt standard and droplet precautions when caring for patients with ILI*, or suspected or confirmed influenza infection. Specifically:

- Request that all persons with fever and cough wear a face mask (if tolerated) in all health care settings
- Isolate unmasked patients with ILI* as soon as possible, ideally in a private exam room or at a distance of at least 3 feet from others
- Staff entering the exam room of any patient with ILI* should either ensure the patient is masked, or wear either a face mask or N-95 respirator pending diagnosis
- N-95 respirators should be used when performing aerosol generating procedures – for additional information on the use of N-95 respirators visit <http://www.cdph.ca.gov/programs/ohb/Pages/HCRespLinks.aspx>
- Reinforce effective hand hygiene
- Ensure the availability of materials for adhering to respiratory hygiene/cough etiquette in waiting areas for patients and visitors
- Post signs/visual alerts to encourage infection control measures

INFLUENZA SURVEILLANCE AND REPORTING

The California Department of Public Health has updated the influenza reporting guidance for the 2012 - 2013 Influenza Season. The reporting requirements are outlined below:

- Mandatory reporting of laboratory-confirmed** influenza in fatal cases age 0-64 years.
 - Complete the Severe Influenza Case History Form (ICU and Fatal Cases age 0-64 years) and fax to Disease Control at (951) 358-5102.
 - For reported cases of severe or fatal influenza it is recommended specimens be sent for further sub-typing/characterization. Specimen submission is also important for those cases with a history of recent exposure to swine or exposed to confirmed case of swine influenza (e.g. H3N2v or H1N2v). This will enable CDPH to closely monitor the strains of influenza viruses that may be causing severe disease or novel pandemic viruses and the emergence of antiviral resistance.

- Request for voluntary reporting of laboratory-confirmed** influenza cases age 0-64 years requiring intensive care.
 - Laboratory-confirmed** influenza cases age 0-64 years who were hospitalized in the intensive care unit remain reportable on voluntary bases. CDPH requests continuation of this enhanced surveillance. This information will assist in monitoring and characterizing populations at highest risk for severe disease.
 - Reported cases will be encouraged to have specimens sent for further sub-typing/characterization when indicated. This will enable CDPH to closely monitor the strains of influenza viruses that may be causing severe disease or novel pandemic viruses and the emergence of antiviral resistance.

**Laboratory confirmation can include any positive test performed by any clinical, commercial or local public health laboratory, including by positive rapid antigen testing. Since rapid antigen tests may yield a relatively high proportion of false positive results when influenza prevalence is low, it is recommended that a positive rapid antigen test result be followed up with confirmatory testing using one of the other indicated methods, such as direct fluorescence assay, culture or polymerase chain reaction (PCR).

REQUEST FOR SENTINEL PROVIDERS FOR INFLUENZA SURVEILLANCE

Primary care providers are invited to enroll as sentinel providers for influenza surveillance in Riverside County. Compiling and reporting data usually takes less than 30 minutes per week. If you are interested in participating, please contact Sharon Fortino, RN, Assistant Nurse Manager for the Communicable Disease Program at SFortino@rivcocha.org or (951) 358-5107.

INFLUENZA RESOURCES

- Post visual alerts (in appropriate languages) at the entrance to outpatient facilities (e.g., emergency departments, physician offices, outpatient clinics) instructing patients and persons who accompany them (e.g. family, friends) to inform healthcare personnel of symptoms of a respiratory infection when they first register for care and to practice Respiratory/Hygiene/Cough Etiquette.
- Cover your Cough
www.cdc.gov/flu/protect/covercough.htm (Tips to prevent the spread of germs from coughing)
- [http://www.cdph.ca.gov/HealthInfo/discond/Pages/Influenza\(Flu\).aspx](http://www.cdph.ca.gov/HealthInfo/discond/Pages/Influenza(Flu).aspx)
- <http://www.cdc.gov/flu/about/season/index.htm>
- <http://www.rivco-diseasecontrol.org>