

H1N1 influenza 09 (Human Swine Influenza - HSI)

Interim guidance for health care workers in recognition, investigation and infection control (23 May 2009)

1. Screening

SCREENING MAY OCCUR BY TELEPHONE OR PERSON AT A HOSPITAL TRIAGE STATION OR GP SURGERY

Fever – 38°C or greater, or a good history of fever*
AND at least one of the following:
 Rhinorrhea / nasal congestion
 Sore throat
 Cough

*If onset within 7 days of close contact with a confirmed case of HSI then documentation of fever is not required

AND

Onset which is

1. since (and including) 15 April 2009
- AND**
2. up to and including 7 days following close contact with a person who is a confirmed case or a suspected case with an influenza A positive test result.

OR

up to and including 7 days following travel to Mexico, USA, Canada, Japan or Panama (countries will be updated if evidence of community transmission)

YES

Case defined as a Suspected Case

NO

2. Inform

Immediately inform:

- your local Population Health Unit (see list over page)
- AND**
- Infectious Diseases Physician AND Hospital Infection Control Practitioner (hospitals only)

Investigate and manage as clinically indicated*

3. Infection control precautions

Standard, contact, and droplet precautions must be employed until either a diagnosis of human swine influenza is excluded or, for confirmed cases, until 7 days after the onset of symptoms or until fever has resolved, whichever is the longer.

Location: Isolate from other patients (single room in hospital if available)

Patient: to wear surgical mask.

Staff: All staff in room to wear P2 (N95) mask, long-sleeved gown, gloves, and eye protection whilst aerosol generating procedures are taking place, or if within 1 metre of a patient who is not able to wear a mask (e.g. taking nose or throat swabs). Protection with a surgical mask, eyewear, gloves and gown is required for staff if within 1 metre of a patient wearing a mask.

4. Investigations

- All ambulatory and ED patients: combined nose and throat swabs in viral transport medium (dry if VTM not available) for Influenza A PCR, if within 7 days of onset of symptoms.
- All patients: as clinically indicated, serology for respiratory viruses and other respiratory pathogens (mycoplasma, legionella etc).
- Chest X ray and other blood tests as indicated.
- **Indicate clearly on the request form that human swine influenza is being considered in the differential diagnosis.**
- **Mark all tests URGENT**

* **Alternative diagnosis:** Manage as clinically indicated. Patients with influenza like illness (ILI) who do not fit the criteria for human swine influenza may have seasonal influenza or another respiratory pathogen and should be managed using appropriate precautions and diagnostic testing. **Nose and throat swabs for influenza PCR testing should be considered for all patients with ILI and fever.**

5. Management

- Continue management with appropriate infection control
- Commence antiviral treatment (can be arranged by Population Health if required)
- If discharged from hospital, patient should be isolated at home (discuss with Population Health – must provide patient address and phone number/s to facilitate follow-up, especially for travellers)
- Population Health to undertake contact tracing/manage contacts according to current protocols, using the above contact details
- Population Health to liaise with clinician to monitor human swine influenza test results and clinical progress

DEPENDING ON CLINICAL SEVERITY, ADMIT OR DISCHARGE HOME

If discharged, clinician to liaise with Population Health to ensure:

- patient and carers are given suitable information about treatment, isolation and infection control requirements
- appropriate contact tracing can occur
- test results are followed up
- patient is followed up in 24 hrs

BRISBANE NORTH

Brisbane Northside Population Health Unit
Locked Bag 2
STAFFORD DC QLD 4053
Ph: 07 3624 1111
Fx: 07 3624 1129

MORETON BAY

Brisbane Northside Population Health Unit
Locked Bag 2
STAFFORD DC QLD 4053
Ph: 07 3142 1800
Fx: 07 3142 1826

BRISBANE SOUTH

Brisbane Southside Population Health Unit
PO Box 333
ARCHERFIELD Q 4108
Ph: 07 3000 9148
Fx: 07 3000 9130

GOLD COAST

Gold Coast Population Health Unit
10-12 Young Street
PO Box 267
SOUTHPORT BC 4215
Ph: 07 5509 7222
Fx: 07 5561 1851

SUNSHINE COAST

Sunshine Coast Population Health Unit
PO Box 577
MAROOCHYDORE QLD 4558
Ph: 07 5409 6600
Fx: 07 5443 5488

BUNDABERG

Central Population Health Unit
Bundaberg Base Hospital
PO Box 185
BUNDABERG QLD 4670
Ph: 07 4150 2780
Fx: 07 4150 2729

Wide Bay Population Health Unit

PO Box 724
HERVEY BAY QLD 4655
Ph: 07 4120 6000
Fax: 07 4120 6009

Central Queensland Population Health Unit

PO Box 946
ROCKHAMPTON QLD 4700
Ph: 07 4920 6987
Fax: 07 4920 6865

CAIRNS

PO Box 1103
CAIRNS QLD 4870
Ph: 07 4050 3600
Fx: 07 4031 1440

TOWNSVILLE

Tropical Population Health Unit - Townsville
Locked Bag 16
AITKENVALE QLD 4814
Ph: 07 4753 9000
Fx: 07 4753 9001

DARLING DOWNS

PO Box 1775
TOOWOOMBA QLD 4350
Ph: 07 4631 9888
Fx: 07 4632 8563

AFTER HOURS CONTACT DETAILS:

Contact should be through your usual communication pathways. If you have difficulties, call the after hours Human Swine Influenza number - 3328 9971.

Further information can be obtained on the Queensland Health internal website at:

http://qheps.health.qld.gov.au/swine_flu/ and on the public website at: <http://www.health.qld.gov.au/swineflu/>