



- Please see the [Seasonal Influenza Protocol](#) in IP&C Manual for the complete protocol
- These highlights **do not** refer to Pandemic Influenza

SEASONAL INFLUENZA	
Contact IP&C	<ul style="list-style-type: none"> • For any patients presenting with Influenza Like Illness
GENERAL SEASONAL INFLUENZA INFORMATION	
Period of Communicability	<ul style="list-style-type: none"> • Adults: 1 day before symptom onset and until approximately 5 days after • Children: several days before symptom onset and until 7 – 10 days after • Immune-compromised persons may shed virus for longer periods; treatment decreases duration/ degree of shedding in most populations
Transmission (Droplet/Contact)	<ul style="list-style-type: none"> • Person-to-person transmission through large respiratory droplets when infected persons cough/sneeze • Direct or indirect contact with respiratory secretions (e.g., touching surfaces contaminated with influenza virus and then touching the eyes, nose or mouth) • Individuals with asymptomatic infection can transmit virus to susceptible individuals
Signs & Symptoms	<ul style="list-style-type: none"> • May not have similar signs and symptoms to other viral respiratory diseases • Approximately 50% will not develop classic symptoms described below. Patients less than 5 years or greater than 65 years of age or immune compromised patients may not present with a fever <p style="text-align: center;"> <i>Fever/chills</i> <i>Cough (usually dry, often severe)</i> <i>Sore throat</i> <i>Muscle pain</i> <i>Joint pain</i> <i>Extreme weakness</i> <i>Headache</i> <i>Stuffy/runny nose</i> </p>
INFECTION PREVENTION & CONTROL MEASURES	
Patients with signs/symptoms of Influenza Like Illness (ILI)	<ul style="list-style-type: none"> • Instruct the patient to cover his/her cough • Ask patient to don a procedure mask until appropriate room placement established • Implement Droplet/Contact Precautions immediately
Additional Precautions & Personal Protective Equipment (PPE)	<ul style="list-style-type: none"> • Droplet/Contact Precautions required • Post sign on door/curtain of the room/bed space • Provide PPE as per signage: gloves, gowns, procedure masks, eye protection • NOTE: do not reuse disposable eye wear; discard after each use • Dedicated patient equipment 
Patient Accommodation	<ul style="list-style-type: none"> • Place patient in a private room; no special air handling/ventilation necessary • If a private room is unavailable, appropriately cohort patients: <ul style="list-style-type: none"> - Consider cohorting with low risk roommate and consult site ICP
Testing	 <ul style="list-style-type: none"> • Collect nasopharyngeal (NP) swabs for influenza detection using a flocked swab and use Cadham Provincial Lab requisition: <ul style="list-style-type: none"> - Viral transport media has a short expiry date; order supply accordingly • Testing in the CRITICAL CARE setting in intubated patients should include an ETT specimen <i>in addition</i> to the NP swab. Collect ETT secretions using viral media in a VTM vial or sterile urine container
Transport of Patients with Suspected or Confirmed Influenza	<ul style="list-style-type: none"> • Notify Patient Transport Services & the receiving department regarding need for Droplet/Contact Precautions <i>in advance</i> of the transport/procedure • Patient performs hand hygiene and dons procedure mask • Staff performs hand hygiene and dons PPE (gown, gloves, mask, eye protection)
Discontinuation of Droplet/Contact Precautions	<ul style="list-style-type: none"> • Consult the site ICP. Discontinue Precautions with the following guidelines: <ul style="list-style-type: none"> • For non-ventilated, confirmed or suspected influenza cases - after resolution of respiratory symptoms. • For ventilated, confirmed or suspected influenza cases - after clinical improvement. Do NOT discontinue Precautions based on duration of treatment or negative influenza results. • Chronic respiratory symptoms and/or a post-viral cough do not require maintenance of precautions • If the NP swab result is negative, DO NOT immediately discontinue precautions if the patient continues to have symptoms of a febrile respiratory illness
Signs of Clinical Improvement	<ul style="list-style-type: none"> • Signs of clinical improvement in the non-ventilated patient could include: decreased cough; decreased sputum production; improved oxygen saturation • Signs of clinical improvement in the ventilated patient could include: discontinuation of mechanical ventilation (i.e., ventilator); afebrile; decreased respiratory secretions; improved respiratory pressures (clinical judgment of Attending Physician/Respiratory Therapist)
Visitor Management	<ul style="list-style-type: none"> • Educate visitors regarding hand hygiene, Respiratory Hygiene, and use of PPE • Advise visitors with symptoms of a respiratory infection to stay home (exceptions may be considered in extenuating circumstances; contact IP&C)