

# NEBRASKA DIVISION OF PUBLIC HEALTH RECOMMENDATIONS FOR THE PREVENTION AND CONTROL OF INFLUENZA IN LONG-TERM CARE FACILITIES

Monitor all residents and staff for symptoms consistent with influenza-like illness (ILI), defined as fever  $\geq 100^{\circ}$  F and either a cough, myalgia, rhinorrhea or sore throat.

Employees with ILI must be excluded from work until at least 24 hours after they no longer have a fever (without the use of fever-reducing medicines).

For confirmed or highly suspected cases of influenza, notify the facility medical director and administration and enhance surveillance for ILI among residents and staff.

If the definition of an outbreak is met, **NOTIFY** public health officials!!

**Test** residents who present with ILI by submitting respiratory specimens to a laboratory equipped to test for influenza \*\*\*

Within 48 hours of the onset of illness **treat** confirmed or highly **suspect** cases among residents and staff with oseltamivir (Tamiflu®) or zanamivir (Relenza®) to reduce the severity and shorten the duration of the illness.\*\*\*\*

For a **single** confirmed or a highly suspected case of influenza

For **two or more** confirmed or highly suspected cases of influenza

**Consider use of oseltamivir or zanamivir for chemoprophylaxis per recommendations used for multiple cases of influenza**

Restrict new admissions to the facility or to the area where the confirmed resident(s) reside **until one week** after the illness onset of the last confirmed or suspected case of influenza.

As much as possible, **restrict** the movement of residents and employees within the facility.

**Provide oseltamivir or zanamivir for chemoprophylaxis to:**

- **ALL** unvaccinated employees and those employees vaccinated for <2 weeks
- **ALL** residents regardless of vaccination status, unless exposure is limited to a specific wing or residential area. Then chemoprophylaxis can be limited to residents and staff of those areas.

*Chemoprophylaxis once initiated should continue for a minimum of 2 weeks, and 1 week after the onset of symptoms in the last confirmed or highly suspected case.*

\*\*\* Use of rapid influenza test result may not be recommended depending on the current level of influenza activity in the state.\*\*\*\* At the discretion of the clinician antiviral treatment can be initiated more than 48 hours post illness onset

For additional information, contact the Nebraska Office of Epidemiology at 402-471-2937 or your Local Public Health Department [http://dhhs.ne.gov/publichealth/Pages/puh\\_oph\\_lhd.aspx](http://dhhs.ne.gov/publichealth/Pages/puh_oph_lhd.aspx)