



Infection Prevention Quick Guide: Influenza

Infection Prevention Checklist

Influenza (flu) is a respiratory illness that primarily spreads through large respiratory droplets when an infected person coughs, sneezes, talks, or breathes. Influenza vaccination is the best prevention strategy and should be routinely provided to all residents and healthcare personnel in the long-term care setting.



Resident Placement and Transmission-Based Precautions

For residents with suspected or confirmed influenza:

- The resident should be isolated in their room with the door closed.
- Place a sign outside of the room indicating the type of precautions, such as a [sign from CDC](#).
- Follow CDC recommendations for duration of isolation;
 - 7 days after symptom onset or until 24 hours after the resolution of fever and respiratory symptoms, whichever is longer.
 - Restrict residents to their rooms, except for medically necessary care. Residents should wear a mask if transport outside the room is necessary.
- Placing residents in a private room is preferred. If no private rooms exist, group residents with the same illness together, considering the presence of other communicable diseases including MDROs.
- Healthcare personnel should wear all recommended personal protective equipment (PPE), upon entering the room.
 - Wear eye protection if splashes or sprays are anticipated.
 - Discard PPE after each use.
- Perform appropriate hand hygiene frequently.



Environmental Cleaning and Disinfection:

- Standard cleaning and disinfectant procedures are adequate for influenza.
 - Use disinfecting products that are registered with the Environmental Protection Agency (EPA).



Communication

- Notify resident and staff of positive influenza result.
- Report to [SCPH Communicable Disease Unit \(CDU\)](#) if an outbreak is suspected.
 - An outbreak of influenza is defined as two or more cases with illness onsets within 72 hours of each other in residents on the same unit.
- Communicate information about resident's suspected or confirmed influenza status when transferring to other departments within the facility and when transferring to another facility.



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Clinical Management

- Administer antiviral treatment and chemoprophylaxis to residents and healthcare personnel when appropriate.
 - Refer to CDC for the most current recommendations:
<https://www.cdc.gov/flu/hcp/antivirals/summary-clinicians.html>

Look for More Cases

- Conduct active surveillance to promptly detect new cases in residents or staff.
 - Test residents or staff with acute respiratory illness or flu-like symptoms (e.g., cough, fever, sore throat).

Employee Health

- Staff should report flu-like illness symptoms to designated employee health personnel and should not work at any facility when sick.

Respiratory Etiquette

- Provide adequate supplies (tissues, face masks, trash cans, hand sanitizer) in common areas and resident rooms.
- Post signage or visual alerts to;
 - Encourage visitors to avoid visiting loved ones if they are sick
 - Describe how to use facemasks or tissues to [cover coughs and sneezes](#)
 - Describe how and when to perform hand hygiene

Additional Resources



CDC - Infection Prevention and Control Strategies for Seasonal Influenza in Healthcare Settings

<https://www.cdc.gov/flu/hcp/infection-control/healthcare-settings.html>



ODH - Influenza - Associated Conditions

<https://odh.ohio.gov/know-our-programs/infectious-disease-control-manual/section3/section-3-flu-conditions>



SCPH - Influenza Dashboard

<https://www.scph.org/dashboards>

