

Guidelines for FMS Personnel for H1N1

The H1N1 virus is a new influenza virus first identified in April of 2009. It is believed to be spread in the same ways that typical influenza is. What is different is that it is a “novel” virus in that similar viruses have not been present for a long time and that people thought to be most susceptible are NOT the elderly who may have some antibodies developed from past exposures, but younger people who have not.

The Center for Disease Control (CDC) has provided information to help us deal with the virus and to prevent its spread. This information summarizes these recommendations.



These are recommendations from the CDC for persons in non-health care occupations to take when there is known or suspected H1N1 in the community:

No single action will provide complete protection, but an approach combining the following steps can help decrease the likelihood of transmission of the virus.

- Wash your hands frequently with soap and water, or use an alcohol-based hand cleaner (i.e., hand sanitizer) when soap and water are not available
- Cover your mouth and nose with a tissue when coughing or sneezing, or cough or sneeze into your sleeve, to reduce virus dispersal
- Avoid touching your eyes, nose and mouth
- If you have flu symptoms (fever plus at least cough or sore throat and possibly other symptoms like runny nose, bodyaches, headaches, chills, fatigue, vomiting and diarrhea) stay home and keep away from others as much as possible for at least 24 hours after the fever is gone, except to get medical attention or other necessities.
- Avoid close contact (i.e. being within about 6 feet) with persons with flu symptoms

You may also benefit from protective gloves being offered by the University:

Protective gloves are available for persons who will be working in areas where persons with suspected or verified influenza are being housed. These gloves may provide additional protection from virus transmission, but **DO NOT** eliminate the need for **FREQUENT** hand washing with soap and water. Gloves should not be reused and should be removed “inside-out” so that any contamination on the surface remains inside after removal.

Information about respiratory protection directly from the CDC:

Use of N95 respirators or facemasks generally is not recommended for workers in non-healthcare occupational settings for general work activities. For specific work activities that involve contact with people who have influenza-like illness (ILI), such as escorting a person with ILI, interviewing a person with ILI, providing assistance to an individual with ILI, the following are recommended:

- workers should try to maintain a distance of 6 feet or more from the person with ILI;
- workers should keep their interactions with the ill person as brief as possible;
- the ill person should be asked to follow good cough etiquette and hand hygiene and to wear a facemask, if able, and one is available;
- workers at increased risk of severe illness from influenza infection should avoid people with ILI (possibly by temporary reassignment); and,
- where workers cannot avoid close contact with persons with ILI, some workers may choose to wear a facemask or N95 respirator on a voluntary basis

Special at-risk groups for H1N1 exposure have been identified by the CDC. These persons should NOT be placed in situations where there is potential for H1N1 exposure.

- Pregnant women
- Adults and children who have asthma, chronic pulmonary, cardiovascular, hepatic, hematological, neurologic, neuromuscular, or metabolic disorders such as diabetes
- Adults and children who have immunosuppression (including immunosuppression caused by medications or by HIV)