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Checklist for Influenza Outbreaks in Long Term Care

Recognition, Reporting & Testing
Upon suspicion of an influenza outbreak, notify Maine CDC by calling 1-800-821-5821
Obtain an outbreak number from Field Epidemiologists for identification purposes: #
Maintain a line listing of symptomatic residents and staff
Collect and submit specimens from affected residents and staff as soon as an outbreak is suspected.
Follow HETL guidelines for specimen collection, handling, and transport; label specimens with outbreak #
Notify facility medical director that an influenza outbreak is suspected
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Control Measures for Facility
Infection Control:
Re-offer vaccine to all unvaccinated staff and residents
☐ Institute droplet precautions for symptomatic residents
Cohort ill residents as much as possible and suspend group activities
Minimize resident and staff movement between affected and unaffected units/wards
Enforce strict hand hygiene for all facility staff
Supplement hand washing with soap and water with ethanol or alcohol-based hand sanitizers
Begin treatment doses of antivirals to all symptomatic residents and staff, and begin prophylactic doses of
antivirals to all residents and unvaccinated staff (within 48 hours)
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Environmental Controls:
Clean all high traffic areas and high touch items (i.e. faucets, door handles, and toilet or bath rails)
Use EPA-registered disinfectants or detergents/disinfectants approved for use against influenza for routine
cleaning and disinfection
Administrative Controls:
Exclude ill staff from work for at least 24 hrs after symptoms have resolved without the use of anti-pyretics
Suspend group activities as much as possible until after the outbreak is contained
Post signage about the outbreak and proper hand hygiene
Limit new admissions to a non-infected wing, or close to new admissions altogether
Recommendations for Residents & Visitors
Encourage ill residents to stay in their room/apartment for at least 24 hours after symptoms resolve without
the use of anti-pyretics
Promote good hand hygiene for residents: after using the toilet, having contact with an ill individual, and
before preparing food, eating or drinking
Consider restricting visitation until the outbreak has subsided
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Internal and External Communications
Identify a single point of contact for internal communications
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Notify staff of outbreak and control measures and conduct enhanced surveillance for ill staff
Notify residents/guardians of outbreak and control measures and request ill residents report to nursing staff
Consider a final communication to staff, residents, and guardians when the outbreak has resolved