

Severe Respiratory Illness (SRI) Management Update

Date: April 24, 2009

For Community Physicians

From the office of the Medical Officer of Health

SRI Context:

This week, there have been reports of clusters of severe respiratory illness in Mexico, and some swine flu cases in California and Texas. It is now known that the Mexican clusters are also due to swine flu. Therefore, you may be seeing patients and receiving calls about illness related to travel to these areas in community practices.

Please refer to the following recommendations in managing these patients.

Case Definition (ILI with Travel History):

- Respiratory symptoms including history of **fever >38.5°C** and with **new onset of cough** and constitutional symptoms

AND

- A positive response to one of the following questions:
 - “Did you travel outside of Canada in the past 10 days, particularly to Mexico, California or Texas?” **OR**
 - “Do you live with or were you in close contact with someone who has a similar illness and who traveled outside of Canada in the 10 days before he/she became sick?”

Reporting Requirements:

Community physician offices – Please report all suspect ILI cases associated with travel to the Medical Officer of Health on Call at (403)264-5615 for further investigation and management.

Laboratory Rule-Out/Rule-In Tests:

Notify receiving laboratory and arrange urgent transport of specimens marking them high priority with positive travel history. Copy all results to the Medical Officer of Health by fax (403)955-6755.

- **NP Swab or Aspirate and throat swab:** Order **Respiratory Virus Panel** (DFA, NAT) on ProvLab requisition (mark as “**EI 236**”). Send in M5 Universal Transport medium (pink) that is stored at room temperature.

Infection Control Recommendations:

Community Physician Office Setting: Droplet and Contact Precautions

For patients presenting with fever and cough:

- Advise to: cover mouth and nose when coughing or sneezing; do frequent hand hygiene; stay 1 metre distant from others in waiting room (or isolate in private room); wear surgical/procedure mask if isolation not possible

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Infection Control Recommendations (cont'd)

For patients with fever/cough and more severe respiratory symptoms (e.g., shortness of breath), ask about:

- travel outside Canada within the last 10 days, particularly to Mexico, California and Texas, or
- contact within last 10 days with a person with a similar illness who had traveled outside of Canada in the 10 days before they became ill.

If Yes to either question above:

- Isolate immediately - negative pressure isolation is not required. If unable to isolate immediately, ask patient to wear a procedure/surgical mask and to minimize contact with others by staying 1 metre (3 feet) away from them.
- In addition to standard practice, staff in direct contact with the patient with fever/cough illness should don appropriate Personal Protective Equipment (PPE) for organisms spread by droplet and contact:
 - **Gloves, gowns, mask.** [Procedure/surgical masks are considered adequate for routine care].
 - **Hand hygiene** must be done before and after use of gloves.
 - **Eye protection** should be worn as standard practice to prevent exposure to respiratory droplets.

Patient Care:

If patient not requiring referral to acute care, advise:

- Stay home until symptoms resolve; practice hand hygiene, cover coughs and sneezes, and limit contact with individuals at home.
- Symptomatic care (see AHW www.health.alberta.ca/health-info/influenza-self-care.html)
- If shortness of breath or respiratory distress occurs, go to Emergency Department and advise triage of symptoms and travel history immediately.

If patients require referral to acute care, notify receiving Emergency Department.

Additional References:

- Public Health Agency of Canada Travel Advisories: <http://www.phac-aspc.gc.ca/tmp-pmv/pub-eng.php>
- Nasopharyngeal Swab Collection: (videos on how to collect these specimens are available at <http://www.provlab.ab.ca/education.htm>). Information sheet is at http://www.calgaryhealthregion.ca/moh/pdf/throatswab_collection_instructions_version2.pdf