

It is recommended that all health care workers be vaccinated with the current WHO recommended influenza vaccine. This is an important infection control measure to prevent the spread of influenza from healthcare workers to their patients. Ensure adequate supply of vaccine.

2. **Respiratory Hygiene/Cough Etiquette**

Respiratory Hygiene/Cough Etiquette Programs should be ongoing at the first point of contact with a potentially infected person to prevent transmission of all respiratory tract infections in health-care settings, including influenza.

Respiratory/Cough Etiquette Program includes:

- posting visual alerts and instructional materials to:
 - teach appropriate hand hygiene and Standard Precautions
 - instruct patients and visitors with symptoms of a respiratory infection to inform health-care personnel and report to a specified screening and/or evaluation site;
- providing tissues to patients and visitors to cover their mouth and nose when coughing and sneezing;
- providing hand hygiene materials in waiting room areas (e.g., alcohol-based agents);
- ensuring supplies for hand washing are available at sinks;
- providing surgical masks to persons who are coughing;
- designating a separate waiting area (at least 3 feet away) in waiting rooms where patients and visitors with respiratory symptoms may be segregated;
- encouraging coughing persons to sit at least 3 feet away from others; and
- having health-care personnel observe Droplet Precautions in addition to Standard Precautions

3. **Education**

Health-care personnel who would be involved in caring for a patient with a novel strain of influenza should receive training in the above Respiratory Hygiene/Cough Etiquette program, emphasizing modes of transmission, appropriate infection control precautions and exposure control.

4. **Antivirals for Influenza**

Some antiviral drugs are clinically effective and may be used for both treatment and prevention of uncomplicated influenza A infection. See Part D: Antivirals for further discussion. CDC often issues guidance during the influenza season regarding use of antivirals. For healthcare workers needing to receive antiviral prophylaxis to prevent influenza infection:

- Pre-exposure antiviral prophylaxis should be taken for at least 6 weeks.
- Post-exposure prophylaxis should be taken for at least 7 days and should begin as soon as possible after exposure.

5. **Develop system-wide business continuity of operations plan to address potential personnel and bed shortages, as well as other issues that may arise during a pandemic.**

D. Pandemic Alert Phase 3

1. In a pandemic alert phase 3 in which a novel strain of influenza A has been detected in humans, with no or minimal human to human transmission of the virus, consider screening all patients hospitalized with pneumonia for the following characteristics that might indicate a higher index of suspicion for novel virus infection:

- In the 10 days before illness onset, travel to or close contact with other ill persons who recently traveled to a previously affected novel influenza A area.

2. Assess availability of vaccines, antiviral agents, supplies, and equipment both consumable (e.g., PPE) and durable (e.g., ventilators).

- Adequate supplies of vaccines, antiviral agents, supplies, and equipment will be determined and maintained within the facility.