Difference between Seasonal Flu and Pandemic Flu

Seasonal flu
- Outbreaks follow predictable seasonal patterns; occurs annually in winter and temperate climates
- Usually some immunity built up from previous exposure
- Very young and elderly at higher risk for infection and complications
- Health systems able to meet public needs
- Vaccine based on known flu strains available
- Adequate supply of antiviral medications
- Average US deaths approx. 36,000 per year
- Symptoms: fever, cough, runny nose, aches
- Modest impact on society, ie school closings, work force stay at home
- Manageable impact on economy

Pandemic Flu
- Occurs rarely (3 x in 20th century)
- No previous exposure; little or no immunity
- Healthy people increase risk for complications.
- Health systems overwhelmed
- Vaccine most likely not available in early stages
- Effective anti-virals may be in limited supply
- Large number of deaths (1918-500,000 deaths)
- Symptoms more severe, complications more frequent
- Major impact on society (travel restrictions, closings of schools, businesses, cancellations of public gatherings)
- Potential severe impact
SUBJECT: Pandemic Influenza
These guidelines will serve as protocols for the management of influenza should it reach pandemic proportions.

Guidelines:

1. These guidelines may change as needed in accordance to the CDC recommendations.

2. Director of Medical Services will monitor Pandemic Flu activity by regularly checking the:
   a. Local public health notices for reporting pandemic flu activity worldwide.
   b. Website pandemicflu.gov

3. Individual Case Management:
   a. If Flu activity is considered to be pandemic, Director of Medical Services will alert international student office, President’s office, and Health Center staff to notify students/staff regarding health risks and symptoms to report if traveling to/from affected areas. Travelers will be requested to monitor their health and report symptoms of flu that occur within 10 days of travel. Non-essential travel will be discouraged.
   b. A sign will be posted at the clinic entrance asking patients with fever and/or respiratory symptoms and recent travel to Pandemic Flu affected area and/or exposure to a flu patient to self-identify to staff immediately.
   c. If a patient with a history of travel returning from a country with current Pandemic Flu activity and flu symptoms (fever, cough and/or sore throat):
      i. Calls: advise them to report to the Health Clinic, not to use public transportation, to use hand hygiene and to cover their mouth if coughing/sneezing.
      ii. If after Infirmary hours, students should report to Mars Hill Medical Center.
      iii. Presents to the Infirmary with the above history: staff will observe droplet precautions:
         1. Give the patient a surgical mask to wear
         2. Wear protective mask and other PPE as recommended by the CDC.
         3. Place the student in an exam room, have patient wash hands with hand sanitizer, close door to exam room, and post with a sign stating: “Isolation” and notify provider. Put oximeter in room. Keep door closed at all times.
   iv. Provider will:
      1. Observe droplet precautions
         a. Wear protective mask, long sleeve gown, gloves and face shield.
         b. Perform clinical evaluation.
d. If the patient meets the definition for Pandemic Flu (A suspect case requires: (1) Travel to an area with documented pandemic flu activity (2) Close contact with flu patient (3) Fever with respiratory illness), the medical provider/staff will:

i. Refer to Mars Hill Medical Center (MHMC) for lab influenza testing
   1. Complete required forms in conjunction with the Madison County Health Department (MCHD)
   2. Notify the MCHD for testing and follow-up
      During office hours: 828-649-3531
   3. Specimen collection should be completed at MHMC per contract as referrals.
      a. For lab questions call clinical staff at MHMC at 828-689-3507
   4. Notify the MCHD of any patient that meets criteria for testing.

ii. Discuss quarantine measures with the patient:
   1. Quarantine guidelines will depend on the current CDC recommendations.
   2. Teach good respiratory hygiene and cough etiquette
   3. Assist in arranging transportation for the patient to appropriate caregivers
   4. Transfer to hospital per local hospital protocol if indicated

iii. Close contacts are defined as a household contact and anyone who had face-to-face contact with a confirmed case-patient in the 10 days before onset of illness.
   1. Notify MCHD
   2. Contacts should be monitored for fever and respiratory symptoms for 10 days following their last exposure to the confirmed case.
      a. Use the proper surveillance form per MCHD.
   3. Contacts may be placed on home quarantine at the discretion of local public health officials. Factors in this decision include:
      a. The likelihood of the virus spreading from human-to-human based on the current status worldwide
      b. The compliance of the contact to monitor signs and symptoms and report to local public health officials.
   4. Contacts with fever and at least one sign or symptom of flu should be tested for influenza and placed on home isolation until the test results are known.

4. Individuals arriving from Pandemic flu affected areas within the past 10 days and:
   a. Are asymptomatic may engage in normal activities
   b. Have mild symptoms may be quarantined for 72 hours at home with primary caregiver that can monitor their health status. Consider influenza testing.
i. If symptoms resolve or improve, patient may return to normal activities 24 hours after symptoms have resolved.

ii. If symptoms worsen, patient should seek further clinical evaluation.

5. Local Pandemic Flu
   a. The Crisis team will meet regularly as changes in situation occur to decide on closing of campus activity. (Including classes) The President of MHU will ultimately make this decision in accordance with NC public health guidelines.
   b. Any college employee with respiratory symptoms will be asked to remain at home.
   c. Care of students
      i. Hand sanitizer will be placed in the waiting area of Infirmary and all students arriving and leaving will be encouraged to use it liberally.
      ii. All asymptomatic students living in the residence halls will be directed to return home.
      iii. Symptomatic students:
          1. will be directed to return home in private vehicles. Students should cover their mouth when sneezing/coughing and wash their hands with hand sanitizer.
          2. that can not travel home by private vehicle or are international students will be quarantined and housed in Apartment Unit B.
             a. medical provider(s) will triage students daily. Triage may be accomplished in person or via phone depending on the severity of the student and the state of the provider. Acutely ill students (students with compromised respiratory function, dehydration or impending shock) will be transferred to the hospital either by private car or by ambulance per hospital protocol (MSJ).
             b. Arrangements will be made to provide delivery of meals if cafeteria services available.
             c. Isolation will be enforced until afebrile for 24 hours or longer per the recommendation of the MCHD per the NC Department of Public Health.
   d. Vaccination
      i. Vaccinate all health care workers with the most recent Influenza vaccine. Cost to be determined at individual expense.
      ii. If a vaccine is available, the Infirmary or MCHD will hold vaccine clinics. Cost to be determined at individual expense. If a limited supply were available, health care personnel and students/staff ages 18-44 with any chronic medical condition (asthma, diabetes, immunocomprised, cardiac or pulmonary disorders) would receive first priority for vaccination according to public health recommendations.
   e. Communication
      i. Campus
1. Information regarding Pandemic Flu will be posted on the main page of the Mars Hill University website, announcements would be sent out via email and an informational handout will be massed produced for distribution as per the Campus Crisis Manual.

2. Director of Public relations will handle media as per the Campus Crisis Manual. “Contact Now” emergency call system will be activated as needed.

ii. Public Health
   1. The Medical Director will be in daily communication with the MCHD

iii. Mars Hill University Community
   1. The Dean of Students will coordinate communication with the administration as needed through the Director of Communications.

F. Reopening of classes and campus activities will follow the direction of the North Carolina Department of Public Health. Triage of students, faculty, and staff may be required prior to being allowed to return to campus.

Additional Resources
www.ready.gov  “Every Business Should Have a Plan” from Homeland Security
www.cdc.gov
www.panflu.gov