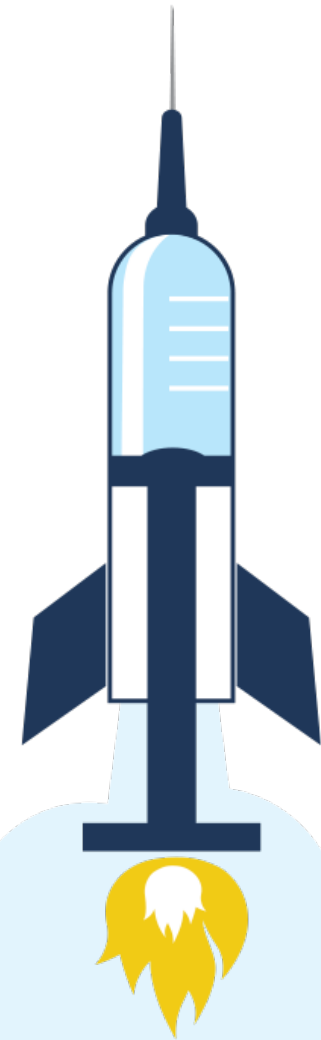


Respiratory Viral Outbreaks: A Case-Based Walkthrough

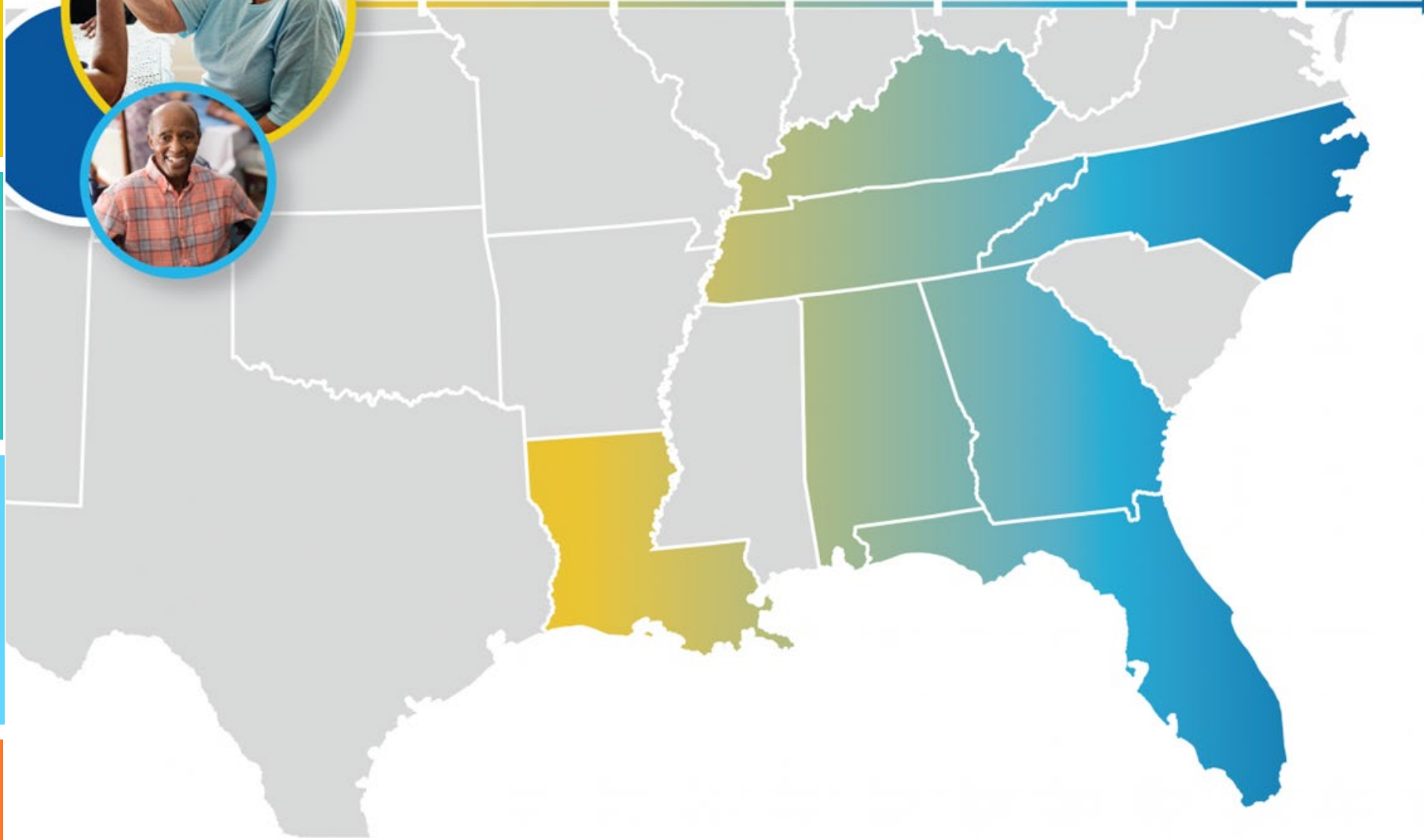
Swati Gaur, MD, MBA, CMD, AGSF
Medical Director, Post-Acute Care
Northeast Georgia Health System

 **ALLIANT**
HEALTH SOLUTIONS

QIN-QIO
Quality Innovation Network -
Quality Improvement Organizations
CENTERS FOR MEDICARE & MEDICAID SERVICES
QUALITY IMPROVEMENT & INNOVATION GROUP



Making Health Care Better *Together*



About Alliant Health Solutions

Swati Gaur, MD, MBA, CMD, AGSF

Medical Director of the Year 2022

ASSOCIATE CHIEF MEDICAL OFFICER, RAINMAKERS
SENIOR MEDICAL DIRECTOR, POST-ACUTE CARE,
NORTHEAST GEORGIA MEDICAL CENTER
MEDICAL DIRECTOR, ALLIANT HEALTH SOLUTIONS

- Past chair of Infection Advisory Committee during COVID-19
- Created COVID-19 task force
- National and international speaker on infection prevention and control issues in nursing homes
- Board-certified in internal medicine, geriatrics, hospice and palliative medicine.
- M.B.A. from Georgia Institute of Technology



Case

An 87-year-old woman with a history of hypertension, paroxysmal atrial fibrillation, bilateral carotid artery stenosis, and hypothyroidism requests cetirizine for allergies. The resident says she has a history of allergies and that cetirizine usually works.

You Are the Floor Nurse. What Do You Do Next?

- A. Get an order for cetirizine from the doctor
- B. Ask for other symptoms and treat the symptoms
- C. Ask for other symptoms, isolate, treat symptoms, call infection preventionist ASAP

Important Points



High degree of suspicion (Identification)



Containment (Implementation of TBP)

Surveillance and testing (Determine extent of Transmission)

Mapping (Determine extent of Transmission)

Risk assessment & audits (Coordinate Ongoing IPC Activities)

Containment



Think of the worst



Contain



Find out

You Are the IP Who Got Called on This. What Do You Do?

- A. Ensure staff is following precaution
- B. Send appropriate tests
- C. Determine the extent of transmission
- D. Coordinate ongoing prevention activities
- E. All the above

Practical Steps to Implementing IPC

High degree of suspicion (Identification)



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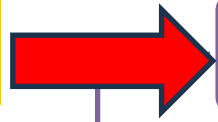
What Isolation Would You Do Initially?

- A. Surgical mask and gloves
- B. Only surgical masks
- C. Only gloves
- D. Surgical mask, glove and gown
- E. Pull curtain at all times, keep the door closed at all times, N95, Face shield, gown and gloves

What Test Would You Do?

- A. COVID antigen test
- B. Flu test
- C. COVID and flu test
- D. COVID, flu and RSV test
- E. Other

Important Points



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Mapping (Determine extent of Transmission)

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How COVID, Flu, Common Cold and RSV Symptoms Compare

COVID

Body aches, chills, cough, diarrhea, fatigue, fever, headache, loss of taste/smell, nausea/vomiting, shortness of breath, stuffy/runny nose

FLU

Body aches, chills, cough, fatigue, fever, headache, sore throat, stuffy nose

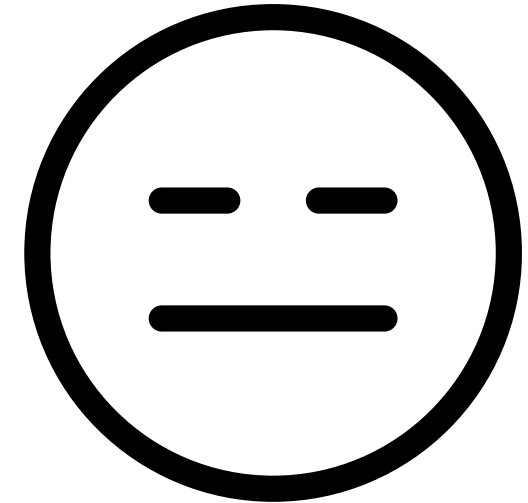
COMMON COLD

Cough, low-grade fever, sneezing, sore throat, stuffy nose

RSV

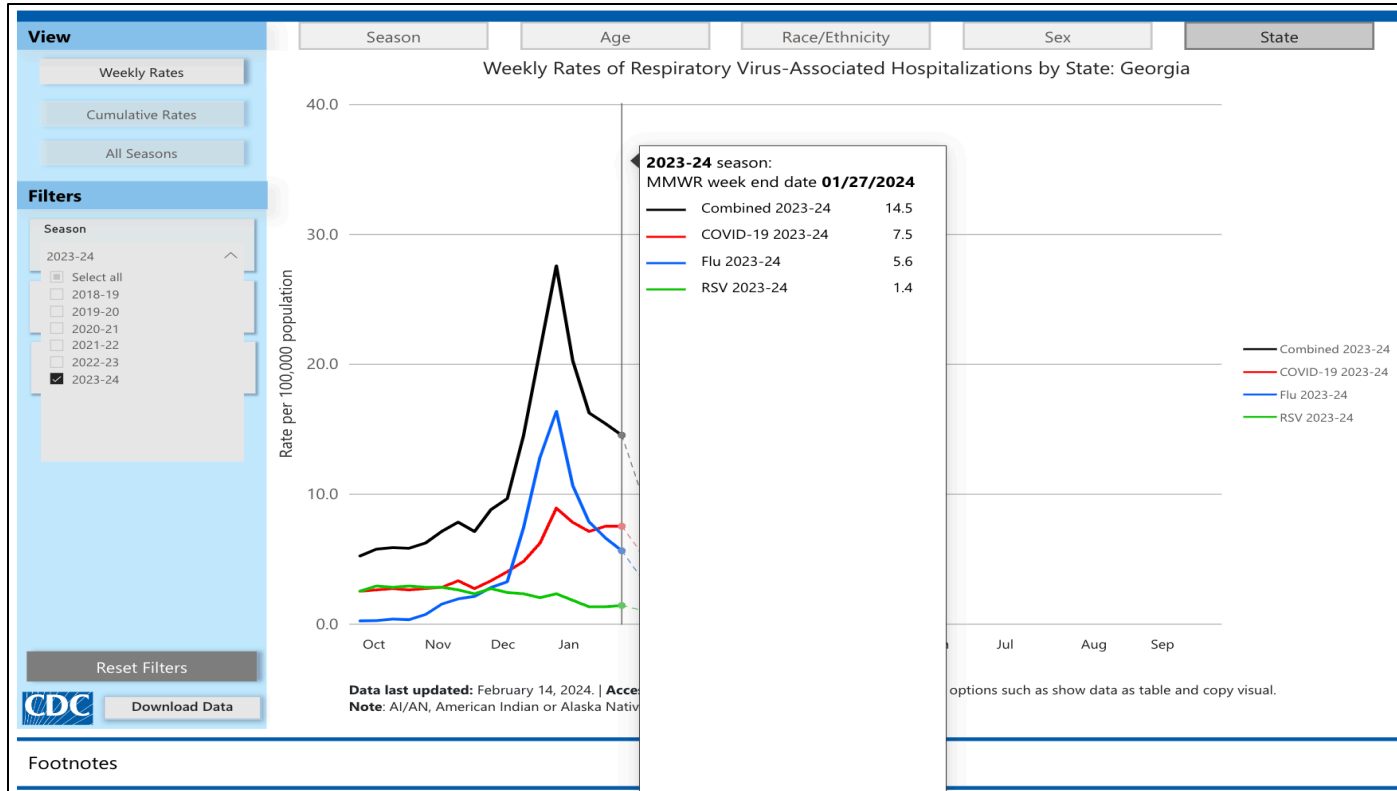
Cough, runny nose, sneezing, fever, wheezing

Source: CHLA



We can't tell!

High Degree of Suspicion (Identification)



Do COVID antigen test

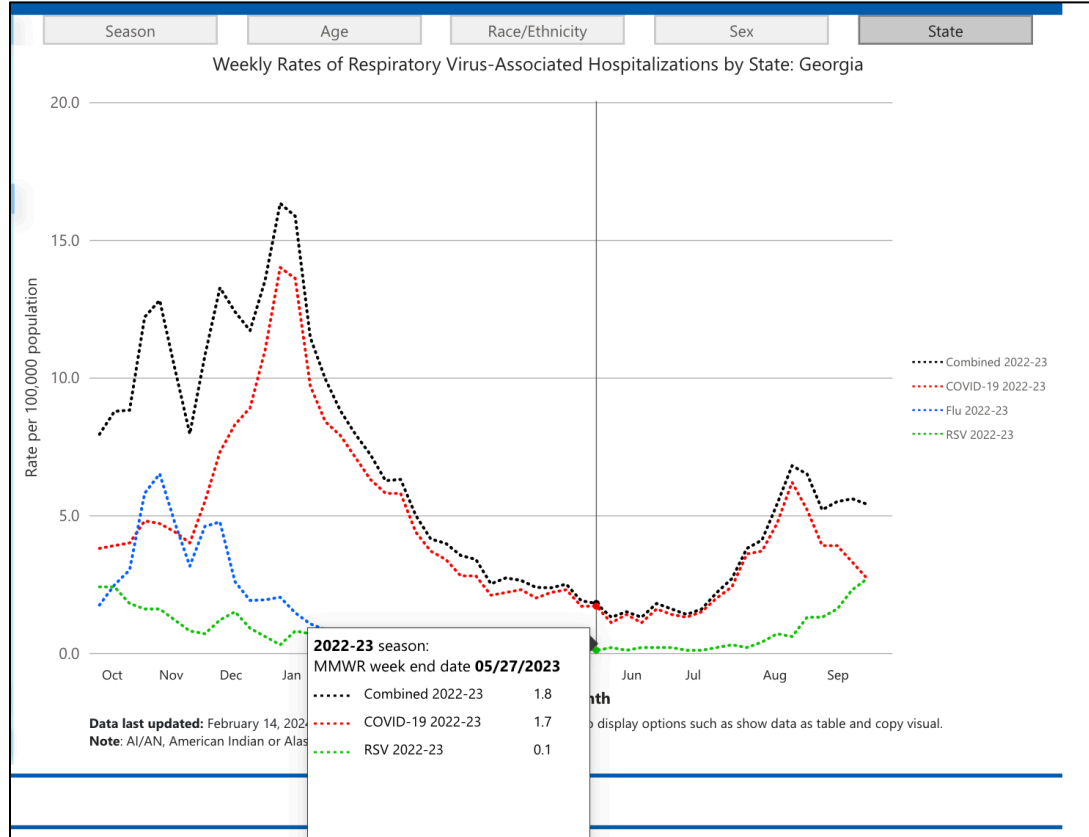
- Quick identification of infection

Do COVID, flu, RSV PCR

- If symptom+ and Ag-
- If other viruses are circulating in the community

<https://www.cdc.gov/surveillance/resp-net/dashboard.html>

High Degree of Suspicion (Identification)



Do COVID
antigen test

- Quick identification of infection

Do COVID,
PCR

- Only if symptom+ and Ag-

An 87-year-old woman with a history of hypertension, paroxysmal atrial fibrillation, bilateral carotid artery stenosis, and hypothyroidism requests cetirizine for allergies. The resident says she has a history of allergies and that cetirizine usually works. She now tests positive for the flu.

As an IP/Nurse/Clinical Leader, What Do You Do?

- A. Surveillance
- B. Communication
- C. Hand hygiene
- D. PPE
- E. All of the above

Important Points

High degree of suspicion (Identification)

Containment (Implementation of TBP)

Surveillance and testing (Determine extent of Transmission)

Mapping (Determine extent of Transmission)

Risk assessment & audits (Coordinate Ongoing IPC Activities)

Surveillance and Testing (Determine Extent of Transmission)

Start active clinical surveillance in the ward

Use symptom checklist

Test anyone with symptoms (see testing slides above)

Signs and Symptoms

Similarities:

Both COVID-19 and flu can have varying degrees of symptoms, ranging from no symptoms (asymptomatic) to severe symptoms. Common symptoms that COVID-19 and flu share include:

- Fever or feeling feverish/having chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue (tiredness)
- Sore throat
- Runny or stuffy nose
- Muscle pain or body aches
- Headache
- Vomiting
- Diarrhea (more frequent in children with flu, but can occur in any age with COVID-19)
- Change in or loss of taste or smell, although this is more frequent with COVID-19.



new or worsening malaise, headache, or new dizziness, nausea, vomiting, diarrhea

You're Told That Another Resident Developed Symptoms. What Do You Want To Know?

Chat it in.

Facility mapping is a critical part of infection control

Important Points

High degree of suspicion (Identification)

Containment (Implementation of TBP)

Surveillance and testing (Determine extent of Transmission)



Mapping (Determine extent of Transmission)

Risk assessment & audits (Coordinate Ongoing IPC Activities)

What will you do in Building A vs. Building B

- Staff cohorting
- Congregate activities
- Equipment cohorting
- Antiviral prophylaxis



Risk Assessment and Audits (Coordinate Ongoing IPC Activities)

Hand hygiene

Surveillance

Testing

Mapping

Isolation

Discontinuation

Activities

Notification

- The local public health and state health departments should be notified of:
 - Every suspected or confirmed influenza or SARS-CoV-2 outbreak in a long-term care facility.
 - Especially if a resident develops influenza while on or after receiving antiviral chemoprophylaxis.

<https://www.cdc.gov/flu/professionals/diagnosis/testing-management-considerations-nursinghomes.html>

Communication

Infection Preventionist	Med Director	DON, Administrator	Consultant pharmacist	EVS	All staff
<ul style="list-style-type: none">• PPE determination• Frequency of surveillance• Testing• Attention to IPC activities	<ul style="list-style-type: none">• Overall guidance• Determination of therapeutics• Creating safety for other residents - Vax and/or antiviral ppx• Standard process of supportive treatment	<ul style="list-style-type: none">• Vaccine boost in residents and staff• Communication to families	<ul style="list-style-type: none">• Assessment for therapeutics and ppx• D/w Med Dir• Create recommendations - communication with individual providers	<ul style="list-style-type: none">• Cleaning determination	<ul style="list-style-type: none">• Awareness of infection• Self protection• Attention to hand washing

Communicate with local and state health department

Clinical Management of Resident

Prescribe antiviral treatment as soon as possible if influenza testing is positive OR prescribe empiric antiviral treatment based upon clinical suspicion of influenza while test results are pending for symptomatic residents.

Persons receiving antiviral chemoprophylaxis who develop signs or symptoms should be tested (see above) and switched to antiviral treatment doses pending results.

Do not forget supportive treatment and monitoring.



Flu Outbreak and Prophylaxis

When at least two residents are ill within 72 hours of each other with laboratory-confirmed influenza, the facility should expand antiviral chemoprophylaxis to non-ill residents living in the same unit as the residents with influenza (outbreak-affected units), regardless of influenza vaccination status.



Finally

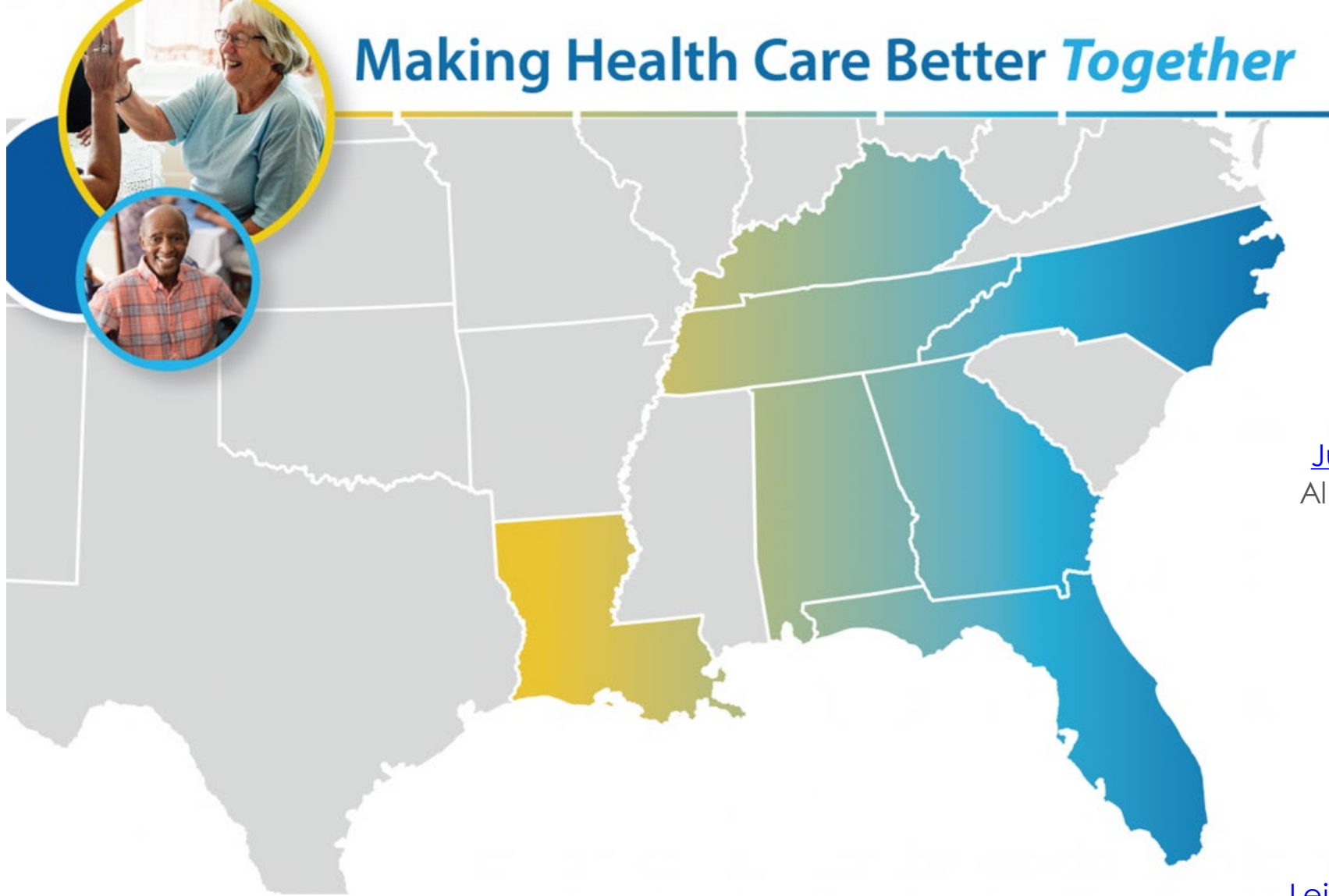
- Increase vaccination
- Coadministration is recommended
- High rates of staff and resident vaccines can
 - Keep staff healthier
 - Can positively affect census
 - Keep residents safer
 - Keep hospitalization due to HAI lower



Questions?



Making Health Care Better *Together*



Julie Kueker

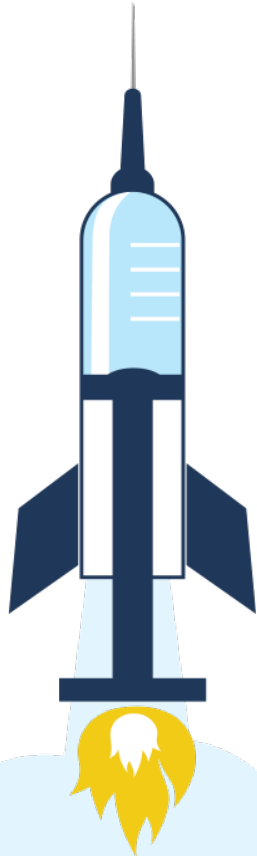
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Thank you



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