

Influenza Checklist Outpatient Physician Practices

The following checklist has been developed to help physician practices prepare for H1N1 and seasonal flu this fall. We recognize that not all points are applicable to all practices, but much of the information here will help you think about how to prepare.

Universal Early Preparation

- Vaccinate all staff and their families against the current influenza strains including the H1N1 (swine flu) vaccine when available.
- Review patients' records to assess their need for pneumococcal vaccination.
(NOTE: Many deaths in past epidemics were caused by post influenza bacterial pneumonia.)
- Educate staff and patients on:
 - Changes they can expect to be implemented in the office during a pandemic
 - Ways to prepare themselves and their families for a pandemic.
 - The CDC's Web site for the "Pandemic Flu Planning Checklist for Individuals and Families" at <http://pandemicflu.gov/plan/individual/checklist.html>.)

Influenza Education:

- Educate staff about Novant's H1N1 swine influenza evaluation and treatment plans, as well as the location on the Novant intranet or www.noflu.org for key documents for staff and patients.
- Educate staff about alternative office management plans,
- Alert staff to any potential Novant plans for alternative office management.
- Educate patients about developing family management plans.

Office Preparedness Training

- Design an office management plan for pandemic influenza that includes medical flow, triage, treatment and design.
- Prepare for office staff illness, absences and/or quarantine. NMG practices will use Novant Health and NMG guidelines. National estimates state you should plan for a 40 percent absenteeism rate at the peak of a pandemic.
- Cross-train staff for all essential office and medical functions.
- Review proper office and medical cleaning routines.
- Plan for cross-covering with other healthcare providers in your community.

Next



When Flu Season Is Active

- ___ Post signage, in appropriate languages, from your tool kit at entrances and inside the office:
 - Asking all patients with flu-like symptoms to notify staff immediately of that fact.
 - Reminding all patients about correct respiratory hygiene and cough etiquette
- ___ Reorganize waiting areas to keep patients with respiratory symptoms a minimum of three feet from others and/or have a separate waiting area for these patients.
- ___ Consider arranging a separate entrance for symptomatic patients if possible.
- ___ Schedule patients with acute respiratory illness (ARI) at the end of a day or at another distinct time if possible.
- ___ Place a surgical mask (as tolerated) on all patients who present with symptoms highly suggestive of influenza.
- ___ Evaluate patients with ARI promptly.
- ___ Provide in all reception, waiting, patient care and restroom areas the following items:
 - Alcohol based hand rub or sanitizer
 - Disposable tissues for symptomatic patients to use in trapping respiratory secretions
 - No-touch waste containers with disposable liners
- ___ Discontinue the use of toys, magazines and other shared items in waiting areas, as well as shared items between patients, such as pens, clipboards, phones, etc.
- ___ Dedicate equipment, such as stethoscopes and thermometers, to be used in ARI areas. This equipment will need to be cleaned with appropriate cleaning solutions between each patient. Consider the use of disposable equipment, such as blood pressure cuffs, when possible.

Triage Systems

- ___ Consider batch scheduling of flu patients to a specific area or time to keep separate from non-flu patients.
- ___ Recommend that patients phone the office before arrival to ensure that appropriate infection prevention recommendations can be given.
- ___ Telephone triage system: Identify a staff person or persons dedicated to triaging phone patients using the following questions:
 1. "Do you have a fever greater than 100.4°F (38°C) and cough or sore throat?" If no, go to question two (2). If yes, go to question three (3).
 2. "Have you had contact with other sick people?"
 3. "Are you having shortness of breath or other signs of respiratory distress?" If yes, advise patient to proceed to emergency room. If no, schedule patient for outpatient evaluation using appropriate on-site precautions.
- ___ Office triage system: Isolate or separate all "walk-in" patients by at least a three-foot margin until evaluated/triaged by designated office or nursing personnel. If patient exhibits shortness of breath or other signs of respiratory distress, the triage specialist should call the physician immediately. If not, proceed with triage using the following questions:
 1. "Do you have a fever greater than 100.4°F (38°C) and cough or sore throat?" If yes, go to question two (2). If no, pursue other symptoms.
 2. "Have you had contact with other sick people?" If no, pursue other symptoms.

- ___ Distribute respiratory prevention packets consisting of a disposable surgical mask, facial tissues and cleansing wipes to all symptomatic patients.
- ___ Isolate all symptomatic patients or separate them from others by a minimum of three feet.
- ___ Place symptomatic patients in an exam room as soon as practical.
- ___ Examine symptomatic patients wearing an appropriate surgical mask as consistent with droplet precautions.
- ___ After delivering care, have patient exit office as quickly and directly as possible (consider completing all exit paperwork in exam room).
- ___ Clean room and all medical equipment completely with appropriate cleaning solutions.

Referral or Transfer

- ___ While waiting for diagnostic test results, if available, home isolation may be required. Utilize the patient education materials located in your provider tool kit to inform such patients of the reason for home isolation and the process to be followed.
- ___ Transportation to a referral/transfer site should be done by a previously exposed family member in a personal vehicle or by a health facility vehicle such as an ambulance — not via public transportation.
- ___ Notify the recipient of a referred/transferred patient that a suspected influenza case is being referred/ transferred.

Checklist of Required Equipment/Supplies

- ___ Signage, in appropriate languages, instructing patients to alert staff about respiratory symptoms. Signs are located in the provider tool kit.
- ___ Signage, in appropriate languages, about correct respiratory hygiene and cough etiquette are located in the provider tool kit.
- ___ Boxes of tissues for patient distribution
- ___ Single-use towels and tissues for use throughout the office
- ___ No-touch wastebaskets and disposable liners
- ___ Alcohol-based hand rub for reception, waiting, patient care and restroom areas
- ___ Single-use gloves
- ___ Surgical masks for staff and patient distribution
- ___ Appropriate disinfectant for environmental cleaning
- ___ Buckets and single-use mops
- ___ Have adequate medicinal supplies: IV solutions, antivirals and antibiotics appropriate for your practice on site
- ___ Patient education handouts, located in the provider tool kit



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For more information on H1N1, visit:

www.NoFlu.org

www.cdc.gov/h1n1flu

Novant Health intranet

To access the provider tool kit mentioned in this checklist, click on the physician section of the Novant Web site:

www.NoFlu.org