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January 17, 2018

Dear Long-Term Care Facility Administration, Director of Nursing, and Infection Preventionist:

Los Angeles County (LAC) is currently experiencing very high levels of influenza (flu) activity. LAC Department of Public Health (DPH) has received numerous reports of influenza outbreaks in health care facilities, particularly in long term care facilities (LTCFs), such as skilled nursing facilities. The California Department of Public Health issued an [All Facilities Letter](#) on January 10, 2018 to provide guidance on the prevention and control of influenza outbreaks in LTCFs. This letter is intended to summarize resources available to facilities experiencing an influenza outbreak, highlight key recommendations, and address commonly encountered questions specific to the current severe influenza season.

Influenza/influenza-like illness (ILI) outbreaks at LTCFs are reportable to LAC DPH. An ILI is defined as fever plus cough and/or sore throat in the absence of a known cause other than influenza. Influenza/ILI outbreak in a LTCF is defined as:

- A sudden increase of acute febrile respiratory illness cases over the normal background rate; OR
- At least one case of laboratory-confirmed influenza or other respiratory pathogen in the setting of a cluster (≥ 2 cases) of ILI within a 72 hours period

To report an outbreak of any disease, contact the [Communicable Disease Reporting System](#) (888) 397-3993, Fax (888) 397-3778.

Key steps LTCFs can take to prevent an influenza outbreak include:

- 1) Vaccinating all residents and staff,
- 2) Active regular monitoring of staff and residents for ILI symptoms,
- 3) Testing for influenza when residents develop ILI symptoms, and
- 4) Excluding ill staff and visitors from the facility

LTCFs are advised to consult with the LAC DPH Public Health Nurse (PHN) investigating the outbreak at your facility regarding limiting admission of new residents in the setting of an influenza/ILI outbreak. The duration of limitations on new admissions and the potential for readmission of residents returning from a hospital will be determined on a case-by-case basis in consultation with DPH. In general, residents hospitalized from a facility with an outbreak may return to the same facility after discharge. If possible, residents who were hospitalized for a reason other than influenza and returning to a LTCF should be placed in a unit without cases of influenza or ILI. Hospitalized patients with influenza can be discharged to a LTCF when clinically appropriate and should be continued on droplet precautions for 7 days after symptom onset or until 24 hours after the resolution of fever and respiratory symptoms, whichever is longer.

Facilities should be aware that in addition to providing antiviral therapy for all residents with confirmed or suspected influenza, antiviral chemoprophylaxis is indicated for all non-ill residents who may have been exposed, regardless of influenza vaccination status in the setting of an outbreak. Oseltamivir or zanamivir are the preferred antiviral agents for therapy and chemoprophylaxis; adamantanes (amantadine and rimantadine) are not recommended because the currently circulating influenza viruses are resistant to this class of medications. Antiviral chemoprophylaxis should be continued for a minimum of 2 weeks and for at least 7 days after the last known influenza case is identified. Facilities should verify that their pharmacy has access to sufficient antiviral medication doses in the event of an outbreak. At this time, one manufacturer, Genentech, is reporting the ability to supply oseltamivir to wholesalers. If the wholesaler is unable to supply the needed antiviral medication in a timely manner, the wholesaler can contact Genentech and request that the product be shipped directly to the retail pharmacies and/or hospital pharmacies. Wholesalers may reach Genentech directly at 1-800-821-8590 to place orders. Genentech has indicated that Tamiflu^R brand of oseltamivir is eligible for return if the product is 1) within two months prior and six months past the expiration date noted on product, and 2) is in its original container and bearing its original label. In addition, the [CDC antiviral drug supply web page](#) provides updated information on the antiviral supply this season and manufacturer information for inquires related to antiviral purchases/availability.

Additional resources:

- [LAC DPH “Influenza Outbreak Prevention and Control Guidelines for Skilled Nursing Facilities” \(June 2015\)](#)
- [CDPH “Recommendations for the Prevention and Control of Influenza – California Long-Term Care Facilities” \(Revised October 2016 and updated on January 4, 2018\)](#)
- [CDPH “Influenza and Other Respiratory Illness Outbreak Quicksheet” \(September 2017\)](#)
- [CDC guidelines and recommendations entitled “Interim Guidance for Influenza Outbreak Management in Long-Term Care Facilities”](#)

If you have any questions or require further information, please contact the LAC DPH ACDC at (213) 240-7941.

Thank you for your cooperation.

Sincerely,

A handwritten signature in black ink, appearing to read 'Sharon Balter', written in a cursive style.

Sharon Balter, M.D.
Director, Acute Communicable Disease Control Program

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c: Karen Young Cho, R.N., B.S.N., P.H.N.
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