



Epidemiology Unit

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To All Directors of Sentinel Hospitals for Pandemic/Avian Influenza Preparedness

Response to a Community Pandemic Influenza A/H1N1 Outbreak in the Country

This follows the earlier letter from me on the same subject.

The first confirmed case of pandemic influenza A/H1N1 in the country was reported in June 2009 and there had been 132 confirmed cases to date. The majority of these either had contracted the disease from overseas or has had contact with confirmed cases. However a number of students from a few schools in the country had been confirmed as positive for Pandemic H1N1 Influenza within the last few days indicating wide spread community transmission among the general public. With the onset of community transmission, the strategies that had been earlier adopted to delay the disease from establishing within the community have now been changed to strategies to minimize the impact of the disease similar to those adopted in other countries affected.

Therefore the following key strategies have been adopted:

1. All patients with suspected H1N1 influenza attending to hospitals will be screened to assess their illness and **only patients with severe or progressive symptoms will be admitted to hospitals for laboratory diagnosis and treatment with anti virals.**
2. Those with mild illness would be managed as out patients with supportive medication and proper advice.
3. Medical Research Institute (MRI) will continue to process the samples for laboratory diagnosis on requests by physicians attending to hospitalized patients.

Your institution which has been prepared as a sentinel hospital to respond to a pandemic influenza outbreak would be regarded as a target referral hospital for a possible community outbreak of influenza A/H1N1. Suspected patients from schools or other institutions would be directed to your institution. Therefore your institution should be geared to respond readily to this outbreak by being prepared to receive and assess these patients for management.

Please make arrangements to update your stocks of the indicated anti viral drug 'Oseltamivir' and Personal Protective Equipment (PPE) through the Medical Supplies Division.

Therefore your institution should have the following areas covered.

1. The isolation facility with the necessary equipment and items to manage patients with respiratory symptoms
2. Adequate staff (medical officers, nursing officers, attendants, labourers and ambulance drivers) trained in infection control, to manage the isolation facility, to attend to these patients within the OPD and for transport if required. They should be well updated with the principles of case management, isolation, infection control and proper waste disposal indicated in a possible influenza pandemic situation (guidelines on these subjects are specified in the circulars No.02-164/2005 'Guidelines for the Preparedness and Response to an Avian Influenza Pandemic Threat' dated 30/11/2005 and No. 01-19/2006 'Joint Circular on Guidelines on Collection and Transport of Specimens' dated 15/03/2006. Above circulars and guidelines are available at the Epidemiology Unit website www.epid.gov.lk).
3. Adequate stocks of Personal Protective Equipment (PPE) and Oseltamivir
4. An established system in the OPD** to receive and assess the patients presenting themselves to OPD
5. Transport facilities organized to transfer these patients if required

** (A sign board directing persons who are harbouring symptoms/signs suggestive of Pandemic Influenza A/H1N1 infection to a special counter/room in the OPD should be displayed at the entrance to the OPD. A medical officer with appropriate infection control measures would assess the patients to decide on the course of management (if he/she would be admitted).

- Provide a disposable/surgical face mask to the patient
- Make arrangements to provide him/her with medical attention and to assess the patient to decide on the course of management
- If it has been decided to treat the patient as an outpatient, provide him/her with necessary supportive therapy and medication (eg antipyretics, anti histamines, rehydration etc) before sending home
- Give necessary advice to the patient to stay away from work/school/crowded places and to take bed rest, plenty of liquids, good diet and seek medical attention if symptoms worsen.
- If it had been decided to admit the patient he/she could be managed in your own isolation ward. However attending clinicians must decide on anti viral therapy/laboratory investigations for the patient based on their clinical judgment and given guidelines).

Please make arrangements to get the assistance of the relevant clinicians and your infection control team for the activity and the regional epidemiologist of your district would be available to provide you with necessary instructions and advice. Please do not hesitate to contact me if you need further clarifications regarding the issue.

Thank you,

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