



Epidemiology Unit

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To Directors of All Base/General/Teaching Hospitals for Pandemic/Avian Influenza Preparedness

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

The first confirmed case of pandemic influenza A/H1N1 in the country was reported in June 2009 and there had been 110 confirmed cases by 15th October. 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.

The anti viral agent oseltamivir has been available only in sentinel hospitals up to now but a stock of this anti viral agent will be distributed among all above hospitals anticipating a wide spread community outbreak. Suspected H1N1 patients from schools or other institutions will be attending to your institution and your institution should be geared to respond readily by being prepared to receive and assess these patients for management.

Please make arrangements to get down your stock of the indicated anti viral drug 'Oseltamivir' through the Medical Supplies Division and arrange to keep a stock of relevant Personal Protective Equipment (PPE) i.e disposable face masks, N95 masks and disposable gloves as well.

Therefore your institution should have the following areas covered.

1. **A separate ward/area to manage patients or at least to keep them till they are transferred to a sentinel hospital**

2. **Adequate staff** (medical officers, nursing officers, attendants, labourers and ambulance drivers) trained in basic infection control to attend to these patients within the OPD/ward and during transport if required. (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 basic 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 institution in the designated 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.

Draft guidelines on case management is attached to this letter and all the communiques on H1N1 are available on our website www.epid.gov.lk

Thank you,

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