

**Novel Influenza H1N1
Revised Recommendations for Testing and Treatment**

To: Vermont Healthcare Providers, Hospital Emergency Departments, and Clinical Laboratories
From: Wendy Davis, MD, Commissioner of Health

– Please Distribute Widely –

THIS INFORMATION IS SUBJECT TO CHANGE. IT WILL BE UPDATED PERIODICALLY.

Situation Update

- To date, the Vermont Department of Health (VDH) Laboratory has analyzed approximately 571 clinical samples for novel influenza H1N1.
- As of June 23, 2009, 46 Vermont residents have tested positive for novel influenza H1N1 virus.

Illness Severity and Treatment

- Most illnesses caused by novel influenza H1N1 have been mild to moderate in severity.
- Influenza can cause severe illness, even among previously healthy individuals.
- Even mild pandemics can result in large numbers of severely ill patients.
- Antiviral treatment is recommended for:
 1. Hospitalized patients with confirmed or suspected novel influenza H1N1.
 2. Patients at higher risk for seasonal influenza complications.
 3. Patients who may not need hospitalization, but are moderately ill from influenza with shortness of breath or dehydration. Healthcare providers should use clinical judgment to guide treatment decisions.
- When indicated, treatment should be initiated as soon as possible after the onset of symptoms – *even in the absence of laboratory confirmation of influenza.*

Surveillance

- Vermont medical providers participating in the U.S. Outpatient Influenza-like Illness Surveillance Network (ILINet) report weekly to the CDC the number of patients with influenza-like illness. The VT ILINet participants also collect specimens for influenza testing by PCR at the VDH Laboratory.
- VDH will make information obtained through ILINet on influenza subtypes circulating in Vermont available to medical providers.

Diagnostic Testing

- As novel influenza H1N1 becomes increasingly widespread, laboratory confirmation is becoming less critical for surveillance reasons and for patients not meeting treatment criteria above.
- Testing is indicated for patients admitted to the hospital with influenza-like illness and for whom antiviral treatment is being considered.
- Testing non-hospitalized patients should only be considered when diagnostic confirmation will significantly impact clinical management.
- Weekend testing will be considered on a case-by-case basis. Please contact the VDH Epidemiology Section 24/7 (802-863-7240, or toll-free at 800-640-4373) to request weekend testing.

Report Illness in Congregate Settings

- Please notify the VDH Epidemiology Section of influenza-like illness in institutional settings (e.g., long-term care facilities, camps, dormitories, childcare centers). An epidemiologist is available 24/7.
- Epidemiology will make recommendations for immediate control measures and can discuss testing.