

	FALMOUTH VOLUNTEER FIREFIGHTER'S ASSOCIATION FIRE AND EMERGENCY MEDICAL SERVICES <i>SAFETY BULLETIN</i>	
	SUBJECT: H1N1 UPDATE (SWINE FLU)	NUMBER: SB09-004
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The H1N1 influenza is continuing to spread here in the United States and around the globe.

The key point is that this infectious disease is not going away.

In the U.S., we are still experiencing a steady *increase* in the number of reported cases.

The World Health Organization (WHO) is now reporting almost 60,000 cases of this virus in more than 100 countries. The WHO currently has this pandemic classified at the highest alert level, "Phase 6".

The alert level is determined by the spread of the disease, *not the severity*. At this point further spread of the pandemic, within affected countries and to new countries is inevitable.

In past pandemics, influenza viruses have needed more than six months to spread as widely as the H1N1 virus has spread in less than six weeks.

- Here in the U.S., 12 states are reporting widespread influenza activity, including Connecticut, Delaware, New Jersey, New York, Pennsylvania, and Virginia.
- 1037 confirmed cases and 5 deaths due to H1N1 have occurred within Virginia, Maryland, and the District of Columbia.
- The jurisdictions of Fairfax County, Arlington County, and the City of Alexandria, have confirmed 94 cases through laboratory testing.

It's unusual for this time of year to still be having so many states reporting regional and widespread activity.

Please continue to operate under the advice from the Health Department, The Office of

EMS and the CDC.

A few of the recommendations are listed below:

Exercise appropriate routine respiratory droplet precautions while assessing all patients of suspected cases of H1N1 influenza.

When treating a patient with a suspected case of H1N1 influenza the following PPE should be worn:

- Disposable N95 respirator and eye protection (e.g., goggles; eye shield), disposable non-sterile gloves, and gown when coming into close contact with the patient.
- Place a standard surgical mask on the patient if the patient is not in need of supplemental oxygen.
- Follow hand hygiene including hand washing or cleansing with alcohol based hand disinfectant after contact.

Ensure patient compartment airflow and ventilation to reduce the concentration of aerosol accumulation.