



Technical Bulletin April 27, 2009

## Swine Flu Update #1 (Corrected)

## **Current Situation**

The Centers for Disease Control and Prevention (CDC) have identified confirmed human cases of swine influenza A (H1N1) virus infection in California, Kansas, New York City, Ohio, and Texas. In addition, there have been reports of cases and deaths from the virus in Mexico, and cases from people who have recently travelled to Mexico. As of April 27, 2009, no cases have been identified in Nevada.

An investigation and response effort surrounding the outbreak of swine flu is ongoing. CDC is working with local, state, and international health officials on investigations into these cases.

Because of these cases, clinicians should consider the possibility of swine influenza virus infections in patients presenting with febrile respiratory illness who have travelled to any of the affected areas in the seven days prior to the onset of illness or who have been in contact with ill persons from the affected areas.

## **Laboratory Testing**

Laboratory testing for swine flu is a two-step process involving initial screening with a rapid influenza test and follow-up testing by PCR at the Southern Nevada Public Health Laboratory (SPNHL). Rapid testing can be performed in a clinician's office or at a commercial or hospital laboratory.

- Healthcare providers who have the ability to run their own rapid influenza tests should collect two swabs or one nasal wash from the patient. If positive for influenza A, place the second swab or nasal washing in viral transport media and contact the Office of Epidemiology at 759-1300, option 2 to make arrangements for specimen
- Healthcare providers who do collect patient specimens on site but are not conducting rapid influenza testing at their facilities should contact their reference laboratory for instructions on submission of samples for rapid influenza testing including submission of a sample to SNPHL for molecular testing if rapid influenza A is positive.
- Healthcare providers who utilize commercial labo-

ratories but do not collect specimens should order testing from the laboratory by their usual process. Commercial laboratories have been instructed to submit specimens positive for influenza A to SNPHL for PCR testing. Healthcare providers should provide a mask for the patient to wear to the collection site in order to minimize the risk of exposure for other patients.

In addition to ordering laboratory testing, if a patient with a clinically-compatible illness has travelled to Mexico or has been in contact with ill persons who have travelled to Mexico in the 7 days prior to illness onset, the case should be reported to the Office of Epidemiology at 759-1300, option #2.

CDC is not currently recommending any additional safety precautions for health care providers beyond what would normally be used with patients with an unknown respiratory infection, including providing masks to patients with symptomatic respiratory disease. CDC's guidance for infection control and the use of antivirals can be found at http://www.cdc.gov/ flu/swine/recommendations.htm.

Updates on the progress in the investigation and any additional recommendations will be posted on the CDC website at http://www.cdc.gov/flu/swine/ investigation.htm.