# Recognising and Managing Influenza

| **Activity** | **What to do** |
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| Influenza suspected | . Fever/chills  . Muscle and joint pain  . Headache  . Cough  . Runny nose  . Sore throat  . Tiredness/exhaustion  Inform your senior nursing staff on duty |
| Implement precautions as soon as resident shows influenza-like symptoms | . Increase hygiene measures  . Contact resident’s GP  . Isolate resident if possible  . Collect swabs as directed by medical officer  . Warn visitors of risk |
| Nominate an infection control coordinator | Name: ……………………………………………..…..  Ph: ……………………... Pager: ……………………. |
| Notify | .Your State/Territory Public Health Unit  . Resident’s GP and relatives or representative, all staff, all visiting GPs, allied health workers, volunteers, or anyone in contact with your facility |
| Document | . Details of resident(s), staff with symptoms  . Onset date of influenza-like symptoms for each  . Types of symptoms  . Their contacts – to identify ‘at risk’ groups |
| Manage residents who are ill | . Isolation from residents who are well  . Dedicated staff where possible  . Dedicated equipment: hand basin, single-use towelling, en-suite bathroom, containers for safe disposal of gloves, tissues, masks, towelling  . Staff use personal protective measures  .Transfer to hospital if condition warrants |
| Restrict contact | . Infected staff off work as determined by their medical officer  . Limit staff movement into restricted area  . Warn visitors and limit visit times  . Suspend all group activities |
| Prevent spread | Increase hygiene measures  . Personal hygiene – wear gloves, mask, ensure good hand washing  . Environment – enhance cleaning measures  . Medical – anti viral medication as prescribed by GP, immunisation if not vaccinated |

**WASH AND DRY HANDS BEFORE AND AFTER CONTACT WITH AFFECTED RESIDENTS**

**Further copies of this poster are available from National Mail and Marketing at** [**NMM@nationalmailing.com.au**](mailto:NMM@nationalmailing.com.au)

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