



Guru Gobind Singh Indraprastha University
Sector-16 C, Dwarka, New Delhi
(General Administration Branch)

F.No. GGSIPU/GA/Health Centre/2014-2015/ 258

Dated: 23/02/2015

CIRCULAR

Sub: Regarding broad guidelines for Swine Flu issued by Ministry of Health & Family Welfare, Govt. of India.

Please find enclosed herewith a copy of broad guidelines including health alert for diagnosis and prevention of Swine Flu (Swine Influenza) issued by Ministry of Health & Family Welfare, Govt. of India.

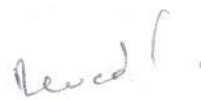
All Deans, Directors and Department / Branch Heads are requested to kindly distribute the above guidelines among the students and staff. A copy of the same may also be fixed on the notice board of concerned school / branch.

This issues with approval of the Competent Authority.


(Dr. Pankaj Agrawal)
Deputy Registrar

Copy to the following for information and necessary action please:-

1. All Deans
2. All Directors
3. All Branch / Department Heads
4. Incharge, UITS Cell – With a request to upload a copy on University website
5. AR to Hon'ble VC
6. PS to Pro VC
7. AR to the Registrar
8. Office copy


(Devendra Singh)
Section Officer

Encl : Copy of broad guidelines including health alert

Broad guidelines for schools / educational institutions

1. Schools are advised to avoid any large gathering of students during the course of the day in the school. This would reduce the possibility of the spread of the infection, if any, to a much larger number of students who would be in close contact with each other in such a gathering.
2. It should be made mandatory by the school authorities that all class teachers should begin their class with active screening of each student in the class so as to detect any student who is having symptoms of flu (mild fever with cough/ sore throat with or without body ache, headache, diarrhea and vomiting). If such student is detected, he/she should be referred immediately to the medical facility of the school. He/She should be further advised to stay at home for 7 days and observe strict discipline of home isolation. The onus of observance of discipline of isolation henceforth is shifted to the parents and school authorities should accordingly write a letter to the parent. The parents should also be advised to keep other wards at home, in case they are found to be having flu like symptoms. There should be constant self-monitoring and if symptoms deteriorates, it should be reported to health authorities immediately.
3. Students, teachers and other employees working in schools/educational institutions are advised to stay at home if they develop flu like symptoms. They should consult the medical doctor and take treatment as advised including the home isolation and drugs for treatment of the symptoms.
4. Students, teachers and other employees working in schools/educational institutions are advised to continue to stay at home for at least 7 days if they are advised by the doctor to take Oseltamivir treatment and they should observe home isolation. There should be constant self-monitoring and if symptoms deteriorates, it should be reported to health authorities, immediately.
5. School authorities should not insist on production of medical certificate from such preventive absentees.

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6. Students, teachers and other employees working in schools/educational institutions are advised to wash their hands frequently with soap and water.
7. Students, teachers and other employees working in schools/educational institutions are advised to observe strict cough / sneeze etiquette i.e. use tissue while sneezing and coughing. The tissue paper so used should be kept in a separate plastic bag, so that it can be disposed of safely.
8. If any student, teachers or other employees is at high risk (suffering from chronic diseases of lung/heart/kidney/neurological system or blood disorder) for H1N1 and he / she becomes sick with influenza like sickness, the school authorities should immediately take him/her to the medical officer of the school and carry out further treatment strictly under advice of the doctor. Mostly such patients will be kept at Oseltamivir and home isolation.
9. All the schools / educational institutions should observe regular cleaning of the area with cleaner they ordinarily use so that all the droplets and shredding from any unnoticed mildly infected students / employees are taken care of.
10. Closure of schools has not been recommended by Centre for Disease Control, Atlanta, USA. Its value for prevention of spread of disease within school is outweighed by the possibility of community spread, which is more likely because the children will play and mix with public in various places and at social gathering and there will be nobody to advise them or prevent such incidents. On the other hand, in schools there will be a teacher who will be able to detect their symptoms everyday at the earliest. However, school authorities have to use their own judgement for any type of temporary closure in the event of wide spread H1N1 influenza in school. There should be constant self-monitoring and if symptoms deteriorates, it should be reported to health authorities, immediately.
11. In case of students staying in hostels, the school authority should monitor the health status of students as well as the other ancillary staff in the hostel on regular basis.
12. In case there are suspected cases in the hostel, the authorised local medical authority should be called for examination of all students and

school authority should not close the hostel and send the students back to their home.

13. School should discourage excursion of the students to the affected countries.
14. However, if students go on tour to the affected countries, they should be thoroughly examined on return by medical doctor before permitting attendance in the class. If there is one suspect case of H1N1 then the whole group should be kept under isolation at home and their health status should be regularly watched.
15. All the schools should display "DO'S AND DON'TS" for H1N1 infection at all important places.
16. All the schools should circulate pamphlets containing "DO'S AND DONT'S" for H1N1 infection and answers to frequently asked questions (FAQ) to the students.

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HEALTH ALERT

PANDEMIC INFLUENZA A H1N1

<p>Look for these symptoms:</p> <p>FEVER AND</p> <ul style="list-style-type: none"> • Cough • Sore Throat • Runny or stuffy nose • Difficulty in breathing 	<p>Other symptoms may include :</p> <table border="0" style="width: 100%;"> <tr> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • Body Aches • Headache • Fatigue </td> <td style="vertical-align: top;"> <ul style="list-style-type: none"> • Chills • Diarrhoea • Vomiting • Blood in sputum </td> </tr> </table>	<ul style="list-style-type: none"> • Body Aches • Headache • Fatigue 	<ul style="list-style-type: none"> • Chills • Diarrhoea • Vomiting • Blood in sputum
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People with certain chronic medical conditions, adults 65 years or older, children younger than 5 years old and pregnant women may be at higher risk for severe illness.

Do's & Dont's

DO:

- Cover your mouth and nose with a handkerchief or tissue when you cough or sneeze.
- Wash your hands often with soap and water or use an alcohol based hand gel.
- Avoid touching your eyes, nose or mouth.
- Avoid crowded places
- Stay more than an arm's length from persons afflicted with flu
- Get plenty of sleep
- Drink plenty of water and eat nutritious food

DO NOT:

- Shake hands or hug in greeting
- Spit in public
- Take medicines without consulting a physician

For More Information

- Visit <http://www.mohfw-h1n1.nic.in>
- Contact National Help Line 1075 (Toll Free Number) or
- Outbreak Monitoring Cell-011-23921401 or
- Contact the help line number of your State Health Department

IF YOU THINK YOU HAVE H1N1 FLU :

- ✓ Visit the nearest H1N1 Screening Centre.
- ✓ Stay at home, if advised by the doctor. Do not travel or go to work or school.
- ✓ Avoid close contact with others for 7 days after your symptoms begin or until you have been symptom-free for 24 hours whichever is longer.
- ✓ Report to nearest identified health facility if symptoms aggravate (high fever, difficulty in breathing, blue colour of the skin or lips, blood in sputum or altered behaviour. Small children may be irritable, do not take fluids and refuse to accept feeds.

Guidelines for Providing Home Care.

The present Pandemic Influenza A H1N1 is of moderate severity. Large number of cases are mild requiring only home isolation and symptomatic treatment. Ministry of Health & Family Welfare, Government of India has already prepared guidelines for categorization of patients during screening (available on the website –mohfw.nic.in). For category A & B, home isolation and treatment is recommended. These guidelines need to be followed for such category of patients.

Guiding Principles:

- Patient should :
 - Be informed about the illness during screening.
 - Stay home for seven days, preferably isolate himself / herself in a well ventilated room.
 - Avoid common areas frequented by other members of the family.
 - If the living space is small and more than one person need to sleep in a room, ensure that the head end of patient and others sleeping in that room are in opposite direction (head to toe).
 - Wear mask all the time. Three layered surgical mask should be provided by the hospital / community health worker. If mask is not readily available, mouth and nose should be covered with a piece of cloth/handkerchief.
 - Avoid smoking.
 - Avoid close contact with others. If inevitable, they should always maintain an arm's length.
 - Avoid having visitors.
 - Avoid going into the community, school, office, markets.
 - Wash hands frequently.
 - Self monitor health and report to identified health facility in case of worsening of symptoms.

Treatment:

- Mild influenza illness does not require specific anti viral medicine.
- Medicines should be taken only on advice of the health care provider.
 - Paracetamol for fever and ibuprofen for myalgia can be taken as per the advice of health care provider.
 - Oseltamivir to be taken, if prescribed/advised by the doctor only.
 - Children need to be given paediatric preparation and dosage of the above drugs.
- Aspirin should not be given for fever or body ache. Medicines (other than paracetamol) available for fever, headache, body ache in general groceries, pan shops etc should not be taken as they may contain aspirin.
- Patients should take plenty of fluids, rest and do warm saline gargles.

Early Warning signs

Patients advised home care should look for the early warning signs mentioned below:

- Fever remains high and not responding
- There is difficulty in breathing or pain in the chest while breathing,

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- Coughing of blood tinged sputum
- Sensorium gets altered with change in behavior (confusion, incoherent speech etc), loss of consciousness
- In particular, patients with co-morbid condition (hypertension, diabetes, bronchial asthma, chronic bronchitis or Obstructive airway diseases etc) need to be observed for worsening of symptoms.
- In young children, irritability, not accepting feeds, vomiting, fast breathing rate and seizures are signs that needs immediate attention and doctor's consultation.

Chemoprophylaxis to the contacts:

- All the contacts need to self monitor their health.
- Chemoprophylaxis to house hold contacts would be as per the policy decision taken by the Government which would be based on the severity of disease and stage of the pandemic.
- If there is community spread, then chemoprophylaxis of family and social contacts is not recommended. However, house hold contacts having co morbid conditions would be put on chemoprophylaxis.

Infection Control

- The infection control practices listed in the guiding principles would be followed including frequent hand wash, cough etiquettes, maintaining arms length from others.
- The contact surfaces would be disinfected by wiping, with sodium hypochlorite solution or with house hold bleach (5%) solution.
- Masks, tissue papers should be disposed of in dustbins. Hands should be washed after handling these wastes.
- Utensils used by the case should not be used by others without washing.
- Wash hands with soap and water before and after handling linens and towels used by the patient.

In case of need:

- Contact NICD outbreak Monitoring Cell at : 011-23921401
- Look for updates at www.mohfw.nic.in.

Guidelines/ operating procedures for infection control practices

1. Infection control measures at Individual level

1.1 Hand Hygiene

Hand hygiene is the single most important measure to reduce the risk of transmitting infectious organism from one person to other.

Hands should be washed frequently with soap and water / alcohol based hand rubs/ antiseptic hand wash and thoroughly dried preferably using disposable tissue/ paper/ towel.

- After contact with respiratory secretions or such contaminated surfaces.
- Any activity that involves hand to face contact such as eating/ normal grooming / smoking etc.

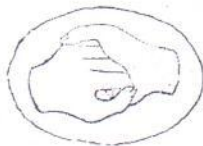
Steps of hand washing



Step 1.
Wash palms and fingers.



Step 2.
Wash back of hands.



Step 3.
Wash fingers and knuckles.



Step 4.
Wash thumbs.



Step 5.
Wash fingertips.



Step 6.
Wash wrists.

1.2 Respiratory Hygiene/Cough Etiquette

The following measures to contain respiratory secretions are recommended for all individuals with signs and symptoms influenza like illness.

- ◆ Cover the nose/mouth with a handkerchief/ tissue paper when coughing or sneezing;
- ◆ Use tissues to contain respiratory secretions and dispose of them in the nearest waste receptacle after use;
- ◆ Perform hand hygiene (e.g., hand washing with non-antimicrobial soap and water, alcohol-based hand rub, or antiseptic hand wash) after having contact with respiratory secretions and contaminated objects/materials

1.3 Staying away

- * Stay arms length away from those showing symptoms of influenza like illness.

1.4 Use of mask

Three layered surgical mask is recommended for medical personnel working in screening areas and in isolation facilities. Medical personnel working in isolation ward or critical care facility performing aerosol generating procedures such as suction, endotracheal intubation etc.

2. Infection control measures at health facility

2.1 Droplet Precautions:

Advise healthcare personnel to observe Droplet Precautions (i.e., wearing a surgical or procedure masks for close contact), in addition to Standard Precautions, when examining a patient with symptoms of a respiratory infection, particularly if fever is present. These

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precautions should be maintained until it is determined that the cause of symptoms is not an infectious agent that requires Droplet Precautions.

2.2 Visual Alerts

Post visual alerts (in appropriate languages) at the entrance to outpatient facilities (e.g., emergency departments, physician offices, outpatient, clinics) instructing patients and persons who accompany them (e.g., family, friends) to inform healthcare personnel of symptoms of a respiratory infection when they first register or care and to practice **Respiratory Hygiene/Cough Etiquette**.

2.3 Use of PPE

- The medical, nurses and paramedics attending the suspect/ probable / confirmed case should wear full complement of PPE
- Use N-95 masks during aerosol-generating procedures.
- Perform hand hygiene before and after patient contact and following contact with contaminated items, whether or not gloves are worn.
- Sample collection and packing should be done under full cover of PPE.

2.4 Decontaminating contaminated surfaces, fomites and equipments

Cleaning followed by disinfection should be done for contaminated surfaces and equipments.

- use phenolic disinfectants, quaternary ammonia compounds , alcohol or sodium hypochlorite. Patient rooms/areas should be cleaned at least daily and terminally after discharge. In addition to daily cleaning of floors and other horizontal surfaces, special attention should be given to cleaning and disinfecting frequently touched surfaces.
- To avoid possible aerosolization of AI virus, damp sweeping should be performed.
- Clean heavily soiled equipment and then apply a disinfectant effective against influenza virus before removing it from the isolation room/area.
- When transporting contaminated patient-care equipment outside the isolation room/area, use gloves followed by hand hygiene. Use standard precautions and follow current recommendations for cleaning and disinfection or sterilization of reusable patient-care equipment.

2.5 Guidelines for waste disposal

- All the waste has to be treated as infectious waste and decontaminated as per standard procedures
- Articles like swabs/gauges etc are to be discarded in the Yellow coloured autoclavable biosafety bags after use, the bags are to be autoclaved followed by incineration of the contents of the bag.

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- Waste like used gloves, face masks and disposable syringes etc are to be discarded in Blue/White autoclavable biosafety bags which should be autoclaved/microwaved before disposal
- All hospitals and laboratory personnel should follow the standard guidelines (Biomedical waste management and handling rules, 1998) for waste management.