



## Infection Control Guidelines for Management of Patients from Hurricane-Affected Areas

### Patients Transferred from Healthcare Facilities in Affected Areas

- Immediately place in Contact Isolation
- Obtain surveillance cultures
  - Respiratory/ Nasal specimens (choose one of the following)
    - Endotracheal aspirate (if intubated)
    - Sputum (if not intubated but with productive cough)
    - Nasal swab (if not intubated and not having productive cough)
  - Drainage from any wounds
  - Stool for VRE
  - Urine (from catheterized patients only)
  - Label specimens as “surveillance culture” in comments section in Meditech and on the specimen itself
  - Notify Infection Control that surveillance cultures are being collected. Include patient name, room # and MR #.
- Contact Isolation may be discontinued only when all applicable cultures have been performed and have come back with final negative results for drug-resistant organisms

### New Admissions from Affected Areas and Patients Transferred from Healthcare Facilities in Affected Areas

Patients may present with a variety of infections associated with exposure to contaminated floodwaters:

- Pneumonia or Influenza
  - Patients with fever and respiratory symptoms must be placed in Droplet Isolation.
  - Consult Infection Control before discontinuing Droplet Isolation.
- Gastrointestinal Illnesses
  - Patients with any diarrheal illness should be placed in Contact Isolation.
  - Anorexia, nausea, fever, malaise, and abdominal pain accompanied by jaundice could be indicative of acute Hepatitis A. Report any patients with these symptoms to Infection Control immediately.
  - Norovirus infections have the potential to rapidly spread through hospitals. Immediately report to Infection Control any patients with Norovirus symptoms, which include nausea, vomiting, diarrhea, abdominal pain, myalgia, headache, malaise, and low-grade fever.
  - Cholera and dysentery are possibilities. Immediately report to Infection Control any cases of bloody or extremely watery diarrhea.
  - Typhoid fever is also a possibility. Immediately report to Infection Control patients presenting with symptoms of Typhoid fever, which include fever, severe headache, malaise, anorexia, bradycardia, splenomegaly, and possibly rash or cough.
- Meningitis
  - Viral meningitis requires standard precautions and no other isolation measures.
  - Patients with suspected bacterial meningitis must be placed in Droplet Isolation for 24 hours after the onset of effective therapy. Immediately notify Infection Control.

Infection Control: **MCMC 7-5621 or 7-5620**  
**MDMC 7-2353**

Or ask PBX (7-8900) to page the Infection Control Practitioner on-call