

# IUPUI Frequently Asked Questions About H1N1

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## **FAQs: IUPUI Specific Information**

IUPUI students, faculty and staff may have questions about the University's response to the global spread of H1N1 influenza. Here are some questions and answers:

### **Will Health Services be Offering a Vaccine for H1N1 flu?**

Health Services has requested 18,500 doses of H1N1 flu vaccine from the local health department and has received approximately 750 doses. Health Services is giving out the vaccine as it arrives. Health Services will continue to offer the H1N1 flu vaccine to those individuals in the CDC priority groups, as supply allows. For individuals older than 10 years of age, only one dose of H1N1 vaccine is needed. Information about the 2009 H1N1 flu vaccine and priority groups can be found at:

<http://www.cdc.gov/h1n1flu/vaccination/>.

### **What is the correct name of this influenza virus?**

The influenza virus that is currently responsible for the worldwide pandemic is known by the following names:

- Novel H1N1
- Swine Flu
- A/California/07/2009 (H1N1)
- Influenza A (H1N1)
- 2009 H1N1

Note: For simplicity we will refer to this virus as H1N1 Flu throughout this FAQ.

### **Have there been any cases of the H1N1 flu at IUPUI?**

Yes, this is to be expected due to widespread activity throughout Indiana and the rest of the United States.

### **Will the University close due to H1N1 flu?**

At this time county and state health officials do not recommend closing any schools due to H1N1 flu. IUPUI will make decisions about closing based on consultation with county and state health officials after a thorough assessment of the health threat to the campus community. . The severity of H1N1 flu illness is similar to that of seasonal flu. If H1N1 flu becomes more severe, the University will be following the recommendations of local, state, and federal health officials concerning social distancing measures.

### **What are the signs and symptoms of H1N1 flu in people?**

The symptoms in people are similar to the symptoms of seasonal flu and include:

- Fever (greater than 100 degrees), chills
- Sore throat, headache, cough
- Body aches, fatigue
- Possible diarrhea and vomiting

### **What should I do if I become ill with flu symptoms?**

If you have a fever greater than 100 degrees Fahrenheit and a cough, take the following actions:

- Isolate yourself to keep from potentially exposing other people to your illness.
- Contact your health care provider or Health Services (274-8214, Coleman Hall 100) if you are concerned about your symptoms or you need medical care due to the following conditions: shortness of breath, pain or pressure in the chest or abdomen, confusion, sudden dizziness, and/or severe or persistent vomiting.
- **It is recommended that you stay home (except to get medical care or for other necessities) and do not return to school or work until your fever has been gone for 24 hours (without the use of fever-reducing medicine such as Tylenol or Advil).**
- Check the policy in your school's student handbook in regard to any missed classes, work or tests.

### **Will the seasonal flu vaccine boost my immunity to the H1N1 flu?**

No, the seasonal flu vaccine will not protect you against the H1N1 flu virus. The seasonal flu will protect you against three different flu strains, but not H1N1. It is expected that multiple strains of seasonal flu will be circulating along with the H1N1 flu strain.

### **If I get the H1N1 flu vaccine, will I still need a seasonal flu shot?**

Yes, it is recommended.

### **What should I do if I am staff member working at IUPUI and I have questions?**

Please visit the IUPUI Human Resources website at <http://hra.iupui.edu> for more information specific to faculty and staff concerns and expectations.

### **How do I keep up-to-date with what IUPUI is doing in response to the H1N1 flu?**

The IUPUI university website is the best place to start. You may also find information at the following websites:

- Indiana University: <http://www.indianauniversity.info>
- IUPUI Emergency Preparedness: <http://www.iupui.edu/prepared>

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## **General FAQ about the flu**

### **What is H1N1 flu?**

H1N1 (referred to as “swine flu” early on) is a new influenza virus causing illness in people. This new virus was first detected in people in April 2009. This virus was originally referred to as “swine flu” due to

some similarities in initial laboratory testing. Further study has shown that this virus is very different from what circulated in North American pigs. This virus is spreading from person-to-person, probably in much the same way that regular seasonal influenza viruses spread. At this time it appears to be no more serious than seasonal influenza.

### **Is this H1N1 flu virus contagious?**

The CDC has determined that H1N1 flu is contagious and spreading from human to human.

### **How does H1N1 flu spread?**

Spread of the H1N1 flu virus is thought to occur in the same way that seasonal flu spreads. Flu viruses are spread mainly from person to person through coughing or sneezing of people with influenza. Sometimes people may become infected by touching something – such as a surface or object – with flu viruses on it and then touching their mouth or nose.

### **How severe is illness associated with the H1N1 flu virus?**

Illness with the new H1N1 flu virus has ranged from mild to severe. While most people who have been sick have recovered without needing medical treatment, hospitalizations and deaths from infection with this virus have occurred.

In seasonal flu, certain people are at “high risk” of serious complications. This includes people 65 years and older, children younger than five years old, pregnant women, and people of any age with certain chronic medical conditions. About 70 percent of people who have been hospitalized with this H1N1 flu virus have had one or more medical conditions previously recognized as placing people at “high risk” of serious seasonal flu-related complications. This includes pregnancy, diabetes, heart disease, asthma and kidney disease.

One thing that appears to be different from seasonal influenza is that adults older than 64 years do not yet appear to be at increased risk of H1N1-related complications thus far. CDC laboratory studies have shown that no children and very few adults younger than 60 years old have existing antibody to H1N1 flu virus; however, about one-third of adults older than 60 may have antibodies against this virus.

### **How long can an infected person spread the H1N1 flu to others?**

People infected with seasonal and the H1N1 flu virus may be able to infect others from 1 day before getting sick and should be considered potentially contagious as long as they are symptomatic and possibly for up to 5 – 7 days after the onset. This can be longer in some people, especially children and people with weakened immune systems and in people infected with the new H1N1 flu virus.

### **What can I do to protect myself from getting sick?**

The flu vaccine is the single most important way to prevent the flu. This year there will be two different vaccines; one for seasonal flu and another one for the 2009 H1N1 flu. It is advisable to get the seasonal flu vaccine as soon as it is available. CDC recommends the H1N1 vaccine for certain priority groups.

Information about the 2009 H1N1 flu vaccine can be found at: <http://www.cdc.gov/h1n1flu/vaccination/>

Take these everyday actions to protect your health and help prevent the spread of germs that cause respiratory illnesses like influenza:

- Cover your nose and mouth with a tissue when you cough or sneeze. Throw the tissue in the trash after you use it.
- Wash your hands often with soap and water, especially after you cough or sneeze. Alcohol-based hand cleaners are also effective.
- Avoid touching your eyes, nose or mouth. Germs spread this way.
- Try to avoid close contact with sick people.
- If you get sick with influenza, CDC recommends that you stay home from work or school and limit contact with others to keep from infecting them.

### **What should I do if I become ill with flu symptoms?**

**If you are sick with flu-like symptoms, the CDC recommends that you stay home for at least 24 hours after your fever is gone (without the use of fever-reducing medicine) except to get medical care or for other necessities.** Avoiding contact with other people as much as possible will help to keep from spreading your illness to others.

In children, warning signs that need immediate medical attention include:

- Fast breathing or trouble breathing
- Bluish skin color
- Not drinking enough fluids

- Not waking up or not interacting
- Being so irritable that the child does not want to be held
- Flu-like symptoms improve but then return with fever and worse cough
- Fever with a rash

In adults, symptoms that need emergency medical attention include:

- Difficulty breathing or shortness of breath
- Pain or pressure in the chest or abdomen
- Sudden dizziness
- Confusion
- Severe or persistent vomiting

### **Can H1N1 flu be treated?**

Yes. The H1N1 flu virus (H1N1) is susceptible to certain antiviral drugs used to treat flu infections (oseltamivir, or Tamiflu, and zanamivir, or Relenza). For treatment, antiviral drugs work best if started soon after getting sick (within 2 days of symptoms). If you become ill and are diagnosed with influenza, your doctor can determine if you should take antiviral drugs.

### **Should I ask my doctor for a prescription anti-flu drug?**

No. Antiviral drugs are usually used to treat people who are at risk for developing life-threatening complications from the flu. There is no reason to routinely ask for one of these drugs to keep at home, or to take them just as a precaution. Over-use could result in limited supplies for those who need it most. In addition, over-use of antiviral drugs has been known to lead to flu viruses becoming resistant to the drugs. All drugs, including antivirals, can cause side effects and should only be used when necessary under the direction of a health care provider.

### **What surfaces are most likely to be sources of contamination?**

Germs can be spread when a person touches something that is contaminated with germs and then touches his or her eyes, nose, or mouth. Droplets from a cough or sneeze of an infected person move through the air. Germs can be spread when a person touches respiratory droplets from another person on a surface like a desk and then touches their own eyes, mouth or nose before washing their hands.

### **How long can influenza virus remain viable on objects (such as books and doorknobs)?**

The CDC reports that studies have shown the influenza virus can survive on environmental surfaces and can infect a person for up to 2-8 hours after being deposited on the surface.

### **What kills influenza virus?**

Most disinfectants when used as directed will kill the human influenza virus.

### **What is the best technique for washing my hands to avoid getting the flu?**

Washing your hands often will help protect you from germs. Wash with soap and water or clean with alcohol-based hand cleaner. The CDC recommends that, when you wash your hands with soap and warm water, you wash for 15 to 20 seconds. When soap and water are not available, alcohol-based disposable hand wipes or gel sanitizers may be used. You can find them in most supermarkets and drugstores. If using gel, rub your hands until the gel is dry. The gel doesn't need water to work; the alcohol in it kills the germs on your hands.

### **Can I get H1N1 flu from eating or preparing pork?**

No. H1N1 flu viruses are not spread by food. You cannot get infected with H1N1 flu from eating pork or pork products. Eating properly handled and cooked pork products is safe.

### **Where can I find additional information?**

- Indiana University: <http://www.indianauniversity.info>
- IUPUI Emergency Preparedness: <http://www.iupui.edu/prepared>
- CDC: H1N1: [Center for Disease Control](#)
- [H1N1 Flu Audio and Video Resources at the Center for Disease Control](#)
- World Health Organization: [who.int](http://who.int)
- State: [Indiana Department of Health](#)
- Federal: [pandemicflu.gov](http://pandemicflu.gov)

Note: Much of the information in this section is based on information from the Center for Disease Control.

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## **Responding to Patient and Family Questions Regarding the Temporary Change in Clarian's Visitor Policy**

Beginning Oct. 13, Clarian Health will restrict visitors to its downtown hospitals – Methodist Hospital, Indiana University Hospital (including IU Simon Cancer Center) and Riley Hospital for Children. This means that only essential adult visitors – parents, spouses/domestic partners and spiritual counselors – will be allowed to visit patients. This temporary restriction is in response to increasing cases of 2009 H1N1 and is taken under the advice of the Marion County Health Department (MCHD). Clarian is taking this step alongside other Indianapolis-area hospitals.

As the situation surrounding the 2009 H1N1 virus continues to evolve, this temporary policy remains in effect.

Several questions have arisen regarding this temporary policy and its enforcement. They are addressed below.

### **How do I explain this policy to patients and families who come to the unit to see a loved one?**

Please tell them that this measure is being taken to help protect patients – including their loved one.

Visitors who believe they are healthy could be incubating the virus after being unknowingly exposed to it themselves, and then inadvertently expose and infect their hospitalized loved one.

This is a temporary measure taken in response to a rapidly evolving situation and on the advice of the county health department. The decision was made with the best interests of our patients in mind. Here are some specific talking points:

- Only essential adult visitors – parents, spouses/domestic partners and spiritual counselors – will be allowed to visit patients.
- This measure is being taken in the interest of patient safety and on the advice of the Marion County Health Department.
- Clarian wants to protect patients and staff from any unnecessary exposures to the virus.
- This is a temporary restriction taken in response to a rapidly evolving situation.

### **Who are “non-essential” visitors?**

Non-essential visitors are anyone other than parents, spouses/domestic partners and spiritual counselors.

### **Are all Clarian hospitals following the same visitor policies at this time?**

This temporary visitor restriction, taken on the advice of the MCHD, pertains to Clarian’s downtown hospitals – Methodist, IU (including IU Simon Cancer Center) and Riley. In addition to only allowing essential visitors to visit patients, Riley is staffing a visitor screening station inside the Emergency Department entrance where patients will be screened and directed to the appropriate waiting area upon arrival. The screening station will be operational during hours designated by Riley administration.

### **When can we make an exception to the visitor restriction policy?**

Certain circumstances, such as a patient’s expected death, suggest an exception to this temporary policy. Seek your supervisor’s input when facing such situations. We anticipate that staff will exercise compassionate, splendid and experienced judgment in such circumstances.

### **Why can’t family members or close friends who are healthy visit a patient?**

Someone who appears to be healthy may be infected but not yet showing symptoms of the flu. Because so many children, cancer patients, transplant patients and other patients with weak or compromised immune systems are treated at our hospitals, we have chosen to follow the MCHD’s guidance and take this measure in the interests of protecting our staff and patients.

### **Since non-essential visitors can’t come back to the patient’s room, can the patient come out and visit in the lobby or another common area?**

No. This defeats the purpose of the temporary restriction, the intent of which is to protect patients and staff from unnecessary exposure to the virus. A visitor who appears to be healthy may be incubating the virus and expose patients and staff to 2009 H1N1 in such a situation.

### **Can ambulatory patients see their visitors outdoors?**

Again, this defeats the purpose of the temporary policy. A patient could be exposed to the virus if a visitor who appears to be healthy is infected and is still in the incubation stage.

### **How are we notifying patients and visitors about this temporary policy change?**

Signs are posted at hospital entrances, at information and unit desks and other prominent locations. We anticipate that staff will exercise thoughtful and experienced judgment to manage requests and questions related to the temporary change in visitor policy.

**What if a visitor refuses to leave?**

Ensure that administrative staff – unit secretaries, administrative assistants, etc. – are fully informed about the policy and are able to explain it to visitors.

Suggest that visitors call their loved ones and visit by phone, leave notes, cards, gifts, etc., so their hospitalized loved one knows they were there and that they are thinking about them.

If a visitor becomes violent or creates a disturbance that cannot be contained, call Safety & Security. This should be a last resort.

- Methodist: 962.8000
- IU/Riley: 274.7270

**How long will this policy remain in effect?**

We will lift the temporary measure at the earliest appropriate time.