

TO: Private Veterinary Practitioners

SUBJECT: Planning for Pandemic Influenza, Avian or Otherwise

Public health agencies and all types of medical facilities are planning for a worst-case scenario if avian influenza (e.g., H5N1 or another strain with similar pathogenicity) reaches the United States. The Centers for Disease Control and Prevention (CDC) estimate pandemic influenza, if of the right serotype, could be transmitted rapidly with worldwide outbreaks occurring in multiple waves of disease over a 2 year period. Further complicating the scenario, it is likely that cases would occur outside their usual season with high attack rates for all age groups and high mortality rates in young adults. A pandemic of avian influenza, another strain of a new influenza virus, or a severe influenza season could result in absenteeism of 40%. One aspect of the community disease control response would be aimed at reducing social contact. This could be manifested as canceling of large gatherings, suspension of mass transit and the closing of schools.

The veterinary practitioner must at least wonder what effect such a pandemic would have on their practice. Full staffing may be very difficult as well as substantial obstacles to client visits could have serious consequences. Further, supplies ranging from surgical masks to disinfectants could be in short supply. An additional issue that veterinary practices should plan for is clients who have serious concerns about the health of their animals (e.g., infection with influenza virus) and an inability to bring them to the veterinary practice because of illness or fear of being infected in public places.

Although such a dire situation may not occur, it is certainly within the realm of possibilities. The best action is to plan for the worst. Even if the threat is not avian influenza, such planning can prepare the staff of a practice for other community disasters. With this objective in mind, the CDC planning checklists for medical offices and hospitals have been modified by a team at the University of Tennessee College of Veterinary Medicine (UTCVM) to focus on the veterinary practice. The Veterinary Medical Practices Pandemic Influenza Planning Checklist is attached for your review and use.

Additional resources are available at <http://www.vet.utk.edu/influenza>
Planning is critical in order to be prepared for the worst, even if it does not happen.

Best wishes,

UTCVM Pandemic Influenza Planning Committee

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Veterinary Medical Practices Pandemic Influenza Planning

Planning for pandemic influenza is critical for ensuring a sustainable healthcare response. The Department of Health and Human Services (HHS) and the Centers for Disease Control and Prevention (CDC) have developed a checklist to help medical offices, ambulatory clinics and hospitals to assess and improve their preparedness for responding to pandemic influenza. Many of the issues included in the checklist are also relevant to **veterinary clinics and hospitals**. Consequently, a team at the University of Tennessee College of Veterinary Medicine has revised the checklist to focus on veterinary practices. Further information on pandemic influenza planning for other types of health care facilities can be found at www.pandemicflu.gov.

This checklist identifies key areas for pandemic influenza planning. Although not all elements of the checklist will apply to all practices, veterinary offices and clinics can use this tool to identify the strengths and weaknesses of current preparedness. Links to websites with information are provided throughout the document. However, actively seeking information that is available locally or at the state level will be necessary to complete the development of the plan. Also, for some elements of the plan (e.g., education and training programs), it will be necessary to monitor selected websites for new and updated information.

In the following document, the terms **clients and patients** are used to mean the owners/agents of animals (clients) and the animals (patients).

Completed	
<input type="checkbox"/>	<p>A plan is in place for surveillance, detection, and reporting of pandemic influenza in the animal population served.</p> <p><input type="checkbox"/> A system is in place to report cases of influenza-like illness and influenza patients to the TN Department of Agriculture (state veterinarian's office) and local or state health department. (For more information on influenza virus in species served by veterinary practices, see the UTCVM Influenza Site (http://www.vet.utk.edu/influenza/))</p> <p>Contact information: Dr. Ron Wilson, State Veterinarian, TN Department of Agriculture, 615-837-5120, Ron.Wilson@state.tn.us</p>
<input type="checkbox"/>	<p>A communication plan has been developed to notify relevant health agencies of influenza-like illness and influenza in patients and to proactively deal with questions from clients and the media.</p> <p><input type="checkbox"/> Key public health points of contact for pandemic influenza have been identified and arrangements have been made for telephone, facsimile, or e-mail messaging.</p> <p>Local health department contact: (Insert name, title and contact information for the appropriate person in the city, county or regional health office)</p> <hr/> <p>State health department contact:</p> <p>John R. Dunn, DVM, PhD, Medical Epidemiologist TN Department of Health, Communicable and Environmental Disease Services, 615-741-7247 (phone), 615-741-3857 (fax), John.Dunn@state.tn.us</p>

	<p><input type="checkbox"/> The office or clinic's point person for external communication has been assigned. (Insert name, title and contact information)</p> <hr/> <p>(Having one person who speaks with the health department, and if necessary, media, local politicians, etc., will help ensure consistent communication is provided by the organization)</p> <p><input type="checkbox"/> The office or clinic's point person knows how to contact local or regional pandemic influenza planning groups to obtain information on communication and coordination plans, including notification when updated plans are created. (For more information on state and local planning, see www.hhs.gov/pandemicflu/plan/part2.html#overview)</p> <p><input type="checkbox"/> A list or database has been created with contact information for clients who have regularly-scheduled visits and may need to be contacted during a pandemic for purposes of rescheduling office visits or referral to other points of care. (Insert location of list/database)</p>
Completed	
<p><input type="checkbox"/></p>	<p>A plan is in place to provide an education and training program to ensure that all personnel understand the implications of, and control measures for, pandemic influenza.</p> <p><input type="checkbox"/> A person has been designated to coordinate education and training (e.g., identify and facilitate access to education and training programs on the recognition of signs of influenza in animals and measures to prevent spread). (Insert name, title and contact information)</p> <hr/> <p><input type="checkbox"/> Current and potential opportunities for long-distance (e.g., web-based) and local (e.g., health department or hospital sponsored programs, programs offered by professional organizations or federal agencies) education of veterinary medical personnel have been identified. (http://www.cdc.gov/flu/professionals/training/ and http://www.vet.utk.edu/influenza/)</p> <p><input type="checkbox"/> Language and reading-level appropriate materials on pandemic influenza (e.g., available through state and federal public health agencies and professional organizations) appropriate for professional, allied and support personnel have been identified and a plan is in place for obtaining these materials. (See www.cdc.gov/flu/professionals/patiented.htm and http://www.vet.utk.edu/influenza/)</p> <p><input type="checkbox"/> Education and training includes information on infection control measures to prevent the spread of pandemic influenza within the veterinary clinic and client homes (www.hhs.gov/pandemicflu/plan/sup4.html and http://www.vet.utk.edu/influenza/)</p>
<p><input type="checkbox"/></p>	<p>Informational materials for clients on pandemic influenza and expected questions on influenza virus in animals that are language and reading-level appropriate for the population being served have been identified, and a plan is in place to obtain these materials. (http://www.vet.utk.edu/influenza/)</p>

	<input type="checkbox"/> The roles of veterinary medical personnel in providing personal protection health care guidance for clients and patients with pandemic influenza have been established.
Completed	
<input type="checkbox"/>	<p>A plan for triage and management of patients during a pandemic has been developed.</p> <input type="checkbox"/> A system is in place for phone (and e-mail, where appropriate) triage of clients to determine which patients require a veterinary medical evaluation, to limit office visits to those that are medically necessary. <input type="checkbox"/> Plans have been developed to manage patient care at the height of the pandemic including the following possibilities: <ul style="list-style-type: none"> • Temporarily canceling non-essential veterinary visits (e.g., annual physicals). • Designating separate blocks of time for non-influenza and influenza-related patient care. <input type="checkbox"/> Local plans and criteria for the disposition of patients following a veterinary medical evaluation (e.g., hospitalization, home care (e.g., house call practices, self- or family-based care at home) have been discussed.
<input type="checkbox"/>	<p>An infection control plan is in place and includes the following: (For information on infection control recommendations for pandemic influenza see www.hhs.gov/pandemicflu/plan/sup4.html)</p> <input type="checkbox"/> A specific waiting room location has been designated for clients and patients with symptoms of pandemic influenza that is segregated from other patients awaiting care. (This may not be feasible in very small waiting rooms, in which case the emphasis may be on use of masks or other barriers for clients as noted below or scheduling of influenza patients at times when other animals are not present.)

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- A plan for implementing Respiratory Hygiene/Cough Etiquette is in place. (For more information see www.cdc.gov/flu/professionals/infectioncontrol/resphygiene.htm)
- Signage (language appropriate) directing clients to notify reception personnel if they have symptoms of pandemic influenza has been developed or a source of signage (e.g., CDC website above) has been identified.
 - Signage (language appropriate) on Respiratory Hygiene/Cough Etiquette instructing symptomatic persons to use tissues to cover their mouths during a cough to contain respiratory secretions and perform hand hygiene has been developed or a source of signage (e.g., CDC website above) has been identified.
 - The plan includes distributing masks to symptomatic clients who are able to wear them (adult and pediatric sizes should be available), providing facial tissues, receptacles for their disposal and hand hygiene materials in waiting areas and examination rooms.
 - Office staff have been trained to question clients by phone who are symptomatic about other people (not symptomatic) who can bring in the patient for regular appointments or emergencies.
 - Implementation of Respiratory Hygiene/Cough Etiquette has been exercised during seasons when influenza and other respiratory viruses (e.g., respiratory syncytial virus, parainfluenza virus) are circulating in communities.
 - If patients with pandemic influenza will be evaluated in the same location as patients without an influenza-like illness, separate examination rooms have been designated for evaluation of patients with symptoms of pandemic influenza.
 - A policy is in place that requires veterinary personnel to use Standard Precautions (i.e., mask for close contact) (www.cdc.gov/ncidod/dhqp/gl_isolation_standard.html) and Droplet Precautions (i.e., mask for close contact) (www.cdc.gov/ncidod/dhqp/gl_isolation_droplet.html) with symptomatic patients.
 - The policy includes protection of reception and initial examination personnel at initial points of client-patient contact.
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An occupational health plan has been developed and includes the following:

- A liberal/non-punitive sick leave policy for managing personnel who have symptoms of or documented illness with pandemic influenza. The policy considers:
- The handling of staff who become ill at work.
 - When personnel may return to work after recovering from pandemic influenza.
 - When personnel who are symptomatic, but well enough to work, will be permitted to work.
 - Personnel who need to care for their ill family members.
 - Personnel who need to care for children who are home due to closing of schools.
- Mental health and faith-based resources are available to provide counseling to personnel during a pandemic.
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The management of personnel who are at increased risk for influenza complications (e.g., pregnant women, immunocompromised workers) by placing them on administrative leave or altering their work location or time of day or week.

The offer of annual influenza vaccine to veterinary medical office or clinic personnel as part of the benefits package.

Issues related to surge capacity (i.e., dealing with a potential influx of patients and staff and supply shortages) during a pandemic have been addressed. (For more information see www.hhs.gov/pandemicflu/plan/sup3.html#surge)

Plans for managing a staffing shortage within the organization due to illness in personnel or their family members have been addressed.

Staff have been encouraged to develop their own family care plans for the care of dependent minors and seniors in the event community containment measures (e.g., “snow days,” school closures) are implemented. (www.pandemicflu.gov/planguide/checklist.html; www.pandemicflu.gov/planguide/familyhealthinfo.html)

The minimum number and categories of personnel necessary to keep the veterinary office/clinic open on a given day have been determined.

Plans for either closing the veterinary office/clinic or recruiting temporary personnel during a staffing crisis have been addressed.

Anticipated consumable resource needs (e.g., masks, gloves, hand hygiene products, medical supplies) have been estimated.

A primary plan and contingency plan to address supply shortages have been developed and each details procedures for acquisition of supplies through normal channels, as well as requesting resources when normal channel resources have been exhausted. (**Note: In the event of a pandemic influenza situation in the U.S., certain supplies that are routinely used in veterinary practice (e.g., masks, hand hygiene products, selected medical supplies), may be in short supply. It is reasonable to assume that medical facilities and practices will have priority in filling orders over veterinary facilities.**)

Plans include stockpiling at least a week’s supply of consumable resources, including all necessary medical supplies and animal food, when there is evidence that pandemic influenza has reached the United States.