

Guidelines for Influenza Outbreaks in Schools and Healthy Populations

These guidelines are designed to assist with outbreaks in congregate settings with a generally healthy population, e.g. schools, daycares, workplaces.

Prevent an outbreak (See CDC's [Guidance for School Administrators to Help Reduce the Spread of Seasonal Influenza in K-12 Schools](#)):

- Encourage students, parents, and staff to:
 - Obtain an annual, age-appropriate vaccination per CDC recommendations.
 - Take every day preventative actions to stop the spread of germs (e.g. respiratory etiquette, hand hygiene, and routine surface cleaning).
 - Stay home when sick and avoid sick people. Implement policies that encourage individuals to stay home when sick.
- Exclude students and staff meeting the case definition for influenza-like illness (ILI) until their fever has ceased without use of antipyretics.

Define the outbreak:

Case Definition for Influenza-like Illness (ILI)

- Fever $\geq 100^{\circ}\text{F}$ (oral or equivalent) AND a cough and/or sore throat.

Outbreak Definitions:

- Small congregate settings (e.g. classrooms, daycare rooms, sports team, dormitories, workplace floor/unit/department)
 - Three or more cases of ILI identified within 72 hours.
 - Two or more cases of laboratory-confirmed influenza identified within 72 hours. Confirmation can be by any testing method, including rapid tests.
- Large congregate settings (e.g. entire schools, daycares, or workplaces)
 - Increased school absenteeism (above 10% or otherwise determined baseline) associated with reported ILI or laboratory-confirmed influenza.
 - A **community-wide outbreak** will be declared if ≥ 3 congregate settings within a jurisdiction are experiencing outbreaks simultaneously

Respond to the outbreak:

1. Establish the existence of an outbreak and confirm the diagnosis.
 - Small congregate settings: Develop and maintain a line list of ill persons. See line list template included in this toolkit.
 - Large congregate settings: Use the call down tool included in this toolkit and call a sample of 15-20 absentees to estimate the proportion of those absent with ILI. If ILI is a major cause of absenteeism, track percent absenteeism daily until it returns to baseline.
2. Report the outbreak to your local health department **immediately**. Maintain regular contact with your local health department throughout the outbreak.
3. Implement appropriate control measures (see below).
4. If possible, collect nasopharyngeal swab specimens from recently ill persons to submit to the Office of Laboratory Sciences (OLS) for confirmatory testing.
 - Refer to the CDC's [Information for Clinicians on Influenza Virus Testing](#) for guidance on when to consider testing and interpreting testing results.
 - You may be able to obtain adequate testing information from parents of cases during call down or from healthcare providers who have seen cases.
 - Your local health department or a local outpatient provider may be able to assist you in collecting and submitting specimens.
5. Follow the course of the outbreak to assure that control measures are adequate. Maintain line list or track percent absenteeism daily until outbreak is over.

Control the outbreak:

- Ill persons should be isolated until they can be sent home. Ill persons should stay home until 24 hours after fever has ceased without use of antipyretics.
- Wash hands frequently and practice respiratory etiquette.
- Maintain routine general cleaning procedures during influenza outbreaks. Be sure to clean frequently touched surfaces.
- Share additional CDC guidelines and resources specific to the situation:
 - a. Schools and daycares: <http://www.cdc.gov/flu/school>
 - b. Workplaces: <http://www.cdc.gov/flu/workplace>
 - c. General: <http://www.cdc.gov/flu>

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