

1. Stay home when sick

Students or staff with ILI should stay home for at least 24 hours after they are free of fever (100° F [37.8° C]), or signs of a fever without the use of fever-reducing medicines (e.g., ibuprofen, acetaminophen, etc.). They should stay home even if they are using antiviral drugs. Note: this is a change in the exclusion guidance from May 12, 2009, which recommended that people with ILI stay home until at least 7 days after the onset of symptoms and fever-free for the past 24 hours. **Ill students should not attend alternative childcare or congregate in settings outside of school such as extracurricular sports or clubs, libraries, or shopping malls.**

Decisions about lengthening the exclusion period should be made at the community level, in conjunction and consultation with local and state health officials. More stringent guidelines and longer periods of exclusion may be considered for individuals returning to a setting where high numbers of people at high risk may be exposed.

2. Separate ill students and staff

Sick students and staff should be excluded from school and all school-related activities. Students and staff who appear to have ILI or become ill during the school day should be isolated promptly in a room separate from others. If a separate room is not available, maintain at least a 6-foot distance between ill persons. Immediately report any illness to the school nurse or other designated school official. Dismiss ill individuals in accordance with district procedures.

If a student or staff person reports to the school nurse with ILI and cannot be isolated from others, it is recommended that a simple facemask (i.e. surgical mask) be provided to her/him to prevent possible transmission of the virus to others while waiting for transportation home. It is recommended that school nurses and staff who come into close contact with persons with ILI in isolation use appropriate personal protective equipment (e.g. surgical mask).

3. Hand hygiene and respiratory etiquette

Schools can help promote ways to reduce the spread of flu, including hand hygiene and respiratory etiquette.

Hand Hygiene:

Students and staff should practice good hand hygiene to help reduce the spread of flu. Hand hygiene includes traditional hand washing (with soap and warm water, lathering for a minimum of 20 seconds) or the use of alcohol-based hand sanitizers (60% alcohol or greater) when soap and water are not available and hands are not visibly dirty. If alcohol-based hand sanitizers are not allowed in the school, hand sanitizers that do not contain alcohol may also be useful for killing flu germs on hands.

Schools should provide adequate facilities for hand washing and promote proper hand washing before meals, after recess or physical education, and other times, as appropriate. NYS Education Department (NYSED) information on hand soaps, hand cleaners and hand sanitizers is available at http://www.emsc.nysed.gov/facplan/GreenCleaning/Green_Cleaning_update_050207.html

Respiratory hygiene/cough etiquette:

The flu virus spreads from person to person in droplets produced by coughs and sneezes. Therefore, it is important that students and staff cover their mouths or noses with a tissue when coughing or sneezing and dispose of the tissue appropriately. If no tissue is available, using the inside of the elbow (or shirtsleeve) to cover the mouth or nose is preferable to using the hands. Always perform hand hygiene after handling dirty tissues or other soiled material.

4. Routine cleaning

The flu spreads easily. When people cough or sneeze, they spray droplets of flu virus through the air. These germs can be inhaled by someone else, or they can settle on surfaces where they get on people's hands. Special attention should be paid to cleaning spaces where many people have close contact. The spread of the virus can be reduced by ensuring that school facilities are cleaned regularly and effectively.

Environmental infection control should focus on regular cleaning for most surfaces. Target the use of disinfectants for surfaces that are touched frequently by hands. The routine application of disinfectants to housekeeping surfaces (e.g., floors, bookcases, tops of filing cabinets) is unnecessary. Use sanitizer wipes or cloths moistened with disinfectant to wipe electronic items (e.g., phones, computers, remote controls) that are touched often. Avoid the excessive use of disinfectant or sanitizer on electronic equipment.

Clean bathroom surfaces on a regular basis. Air sanitizer products have not been shown to disinfect airborne influenza virus or reduce disease transmission and are not recommended.

Good cleaning with soap or detergent in water will remove most microorganisms, as well as soil and organic matter that would otherwise reduce the effectiveness of subsequent disinfection. Where disinfectants are used, products should be registered with the U.S. Environmental Protection Agency (US EPA) and the New York State Department of Environmental Conservation (NYS DEC) and labeled as effective against influenza virus on clean, hard non-porous surfaces. Follow label instructions carefully when using disinfectants and cleaners.

- [US EPA and NYS DEC Products Registered for Influenza - Sorted Alphabetically by Product Name \(PDF, 187KB, 38pg.\)](#)
- [US EPA and NYS DEC Products Registered for Influenza - Sorted by EPA Registration Number \(PDF, 178KB, 38pg.\)](#)

If registered disinfectants are not available, a chlorine bleach solution may be used - add

about one tablespoon of bleach to a quart (4 cups) of water (smaller batches can be made from one teaspoon of bleach in a pint (2 cups) of water). Dispose of the used bleach solution when it becomes dirty or at least daily. Mix a fresh solution when repeating the cleaning process. Only mix bleach solutions in small batches.

Many surface disinfectants require the treated surface to remain wet for several minutes to be effective. Take note of any hazard advisories and indications for using personal protective items (such as household gloves). **Do not mix disinfectants and cleaners unless the labels indicate it is safe to do so. Combining certain products (such as chlorine bleach and ammonia cleaners) can result in serious injury or death.**

5. Early treatment for persons at high risk

It is important to continue to educate staff, parents and students on factors that may put students and staff at higher risk for complications of the novel H1N1 flu infection. People at high risk for complications from the flu who become sick with ILI should talk with their health care provider as soon as possible. Schools should encourage ill staff and parents of ill students at high risk of complications from the flu to seek early treatment. Consideration of early treatment with prescription antiviral medications, by a health care provider, is essential for people at high risk because such treatment may prevent hospitalization or death. Persons at high risk who have had close contact with people with ILI should contact their health care provider to discuss whether they may need to take prescription influenza antiviral medications.

The same age and risk groups who are at higher risk for seasonal flu complications should also be considered at higher risk for novel H1N1 flu infection complications. High-risk populations include:

- Children younger than 5 years old. (The risk for severe complications from seasonal flu is highest among children younger than 2 years old.)
- Adults 65 years of age and older.
- Persons with the following conditions:
 - Chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, hematological (including sickle cell disease), neurologic, neuromuscular, or metabolic disorders (including diabetes mellitus);
 - Immunosuppression, including that caused by medications or by HIV;
 - Pregnant women;
 - Persons younger than 19 years of age who are receiving long-term aspirin therapy;
 - Residents of nursing homes and other chronic-care facilities.

For more information on antiviral medications, see http://www.health.state.ny.us/diseases/communicable/influenza/h1n1/questions_and_answers.htm