

**Frequently Asked Questions Regarding the H1N1 Virus and Pandemic Flu**  
**University of Louisiana at Lafayette**  
*Revised November 5, 2009*

**NOTE: The questions addressed in this document pertain to UL Lafayette specific issues. However, a more broader range of questions for Higher Education regarding H1N1 and Pandemic Flu is addressed by CDC, which can be viewed at:**

<http://www.pandemicflu.gov/plan/school/higheredfaq.html>

### **FAQ's Regarding H1N1**

**1. When I registered for the H1N1 vaccination, I was told that I should consult my personal physician to receive the vaccine. What's up with that?**

The University is taking direction from State public health officials regarding the H1N1 vaccine. The nationwide demand for the vaccine far out weighs the supply. Because of this, public health officials have to make decisions regarding prioritizing who gets the vaccine first in order to do the greatest good for the entire public. In doing that, State public health officials have identified the following priorities for the vaccine:

Healthcare workers and first responders  
Pregnant women  
Children 6 months through young adults 24 years old  
Non-elderly people with chronic medical conditions

In this regard, the vaccine is offered to our healthy students and employees under 25 years old. The University's staff physician has made a decision that pregnant women or those with chronic medical conditions would be best served by their personal physician. So, check with your doctor in this regard and let me know what you find out.

**2. I got the regular flu shot last week. Do I need another one?**

The seasonal ("regular flu" in your words) flu vaccine is different than the H1N1 vaccine. It's good that you took the seasonal flu shot. If you are 24 and under, and interested, you should register for the H1N1 vaccine. However, be advised that it is not safe for you to take the H1N1 vaccine until at a minimum 4 weeks after the date you took the seasonal flu vaccine. Fear not though, we are pre-planning to have multiple H1N1 vaccination sessions for our students. So, if the first date falls within the 4 week period, you can simply wait for another session.

One more thing - if you register for the H1N1 vaccine, pay attention to the medical questions, such as "Are you pregnant?" and "Do you have a chronic medical condition?".

**3. Can we assume everyone with a cough has the flu?**

First – make sure to get your facts straight, there is no need to spread any unnecessary panic. Public Health officials are asking doctors to treat anyone that test positive for Influenza Type A as though they have H1N1. But this requires a lab test to be performed by a doctor. Just because someone has a cough DOES NOT mean they can assume they have H1N1.

**4. What do I do if I learn that I have been exposed to someone with H1N1?**

If you develop any flu-like symptoms within 48 hours of your exposure, seek medical attention from your doctor and socially distance yourself from others until you are fever-free for at least 24 hours without the help of fever-reducing medication. Socially distancing yourself means do not go to class, lab class, work, or any social engagements. Stay home and take care of yourself.

**5. Will the University clinic offer the H1N1 vaccine?**

University Student Health Services will be offering the seasonal flu vaccine as normal. As you may have heard, final trials are taking place for the new H1N1 vaccine. Assuming things remain on schedule, we are told by Public Health officials that this new vaccine will be ready in about 6 weeks. A prioritized plan for distributing the vaccine has been identified by CDC - here is a link to that:

<http://www.pandemicflu.gov/vaccine/index.html>

**6. How long are you contagious if you contract H1N1?**

People with H1N1 can be contagious for up to one week after their flu-like symptoms first appear. However, determining this exact time can be difficult. Experts suggest a better gauge to us is to make sure you are fever free without the aid of fever-reducing medication for a minimum of 24 hours.

**7. Do I need any special cleaners or disinfectants to treat surfaces against H1N1?**

No. All household cleansers used in conjunction with the manufacturer's instructions are proven effective against H1N1.

**8. How long can the H1N1 virus remain dangerous outside of the body?**

Scientists are telling us that H1N1 is very unstable outside of the body. Most suggest that it can only survive minutes. So, while cleanliness is important for obvious reasons, the most likely method of spreading H1N1 will be from someone inhaling respiratory droplets from someone who has the virus. This is why hand washing, cover your mouth, etc. is so important.

**9. If the University is seeing cases of H1N1 now, why aren't we moving up to Phase II?**

The University has not yet declared Phase II. As you may have noticed, public health officials are taking a more conservative approach this year with respect to H1N1 and schools. Specifically, last year, CDC and the State were quick to recommend school closures for several reasons:

- a. With little history and statistical data regarding H1N1, no one knew how deadly this virus could be.
- b. Early mortality rates were observed to be higher in other parts of the world, namely underdeveloped countries. It is now thought that this was because access to health care is limited in these areas, but at the time, it was a hard call to make.
- c. Health experts were trying to stop H1N1 from becoming the next pandemic. Remember, the word "pandemic" simply implies that the virus/disease/critter is being found throughout the world. It's an issue of geography, not severity. Now, it is universally accepted that H1N1 is worldwide and will continue to be so for some time.

The University will continue to take direction from public health officials. As such, while we are seeing some isolated cases of H1N1 on campus, we do not feel it is necessary to move to Phase II at this time. Of course, this can change on a day's notice, so we are watching vigilantly.

**10. I'm a student that has flu-like symptoms, can the Student Health Services treat me?**

Yes. SHS is fully capable of diagnosing influenza, and recommending treatment. For students experiencing flu-like symptoms, SHS will perform an influenza nasal swab test. This test can confirm whether the patient has influenza Type-A (see FAQ #1 above for more information).

**11. I've heard the Tamiflu cures H1N1 – is that true?**

No, this is not true. Tamiflu can relieve flu symptoms, but DOES NOT "cure" H1N1, nor make the patient less contagious. Dr. Yongue advises that Tamiflu is only effective if the patient starts taking it within 48 hours of their initial symptoms. So, in some cases, the medication is not given.

**12. What about the cost of the flu-test and Tamiflu**

The cost of the influenza test (see FAQ #7 above) is about \$40.00. However, all graduate students and full time undergraduate students have medical insurance paid for by their student assessed fee. If the student has some other medical coverage (parent's policy, for example), SHS attempts to bill that provider first. The student insurance then becomes secondary, picking up deductibles, co-pays, etc. I'm told that for the most part, the student ends up paying nothing for the test.

Another concern is the cost of Tamiflu, the medication that can relieve flu symptoms, but DOES NOT "cure" H1N1, nor make the patient less contagious. Dr. Yongue advises that Tamiflu is only effective if the patient starts taking it within 48 hours of their initial symptoms. So, in some cases, the medication is not given. The student insurance does not pay for Tamiflu. If you have no insurance, the medication cost about \$100.00, students with other insurance are typically paying \$50.00 - \$60.00 for it, where applicable.

## FAQ's Regarding All Pandemics

### 1. Will we get paid if the University closes? Do we use sick leave, if not sick? Will we use compensatory, annual leave or leave without pay?

This is addressed in the University's Pandemic Plan, which states:

“...In the event of a school closure, Classified employees under Civil Service Rule 1.23 (d) & (g) serving with job appointment, probationary or permanent status shall be given time off without loss of pay, annual leave or sick leave. Classified employees that remain at work during this closure will receive compensation pay over and above their regular pay...”

The University is researching the appropriate response for Unclassified employees and will update this document at a later time.

### 2. If a family member is ill, should we quarantine ourselves even if the University hasn't closed yet?

- First, let's review the difference between isolation and quarantine:
  - **Isolation** is used to physically separate individuals that are confirmed sick from the general population until they are no longer contagious.
  - **Quarantine** is to separate individuals who may have been exposed but are not yet ill from the general population; the duration of quarantine would depend on the length of the incubation period and the period of contagion which usually begins prior to the onset of symptoms and extends for a period of time after the illness.
- Remember, a person is contagious for a period of time before symptoms appear (this time is different for every illness). So restricting an exposed person will prevent the unknowing spread of the illness, with seasonal influenza.
  - Adults can be infectious from one (1) day before symptoms occur through approximately five (5) days after illness onset.
  - Young children can shed virus several days before illness onset and can be infectious for 10 or more days after onset of symptoms.
  - Severely immuno-compromised persons can shed virus for weeks or months.
- This data is not yet known for the 'pandemic virus'.
- Remember that you can greatly reduce your exposure by using proper precautions when caring for a sick family member, such as keeping a distance of at least 3 feet from the sick person, washing your hands, isolating or quarantining the family member, encouraging the family member to wear a face mask when they must be in the same room as others, to cover their mouth when coughing, etc.
- If these measures are strictly enforced, then quarantining yourself should not be necessary. If not, then quarantine yourself for the declared time and if you do not develop flu symptoms, remove yourself from quarantine and continue to use the proper precautions while in your house.

### 3. Who will enforce quarantine?

There are several things worth mentioning here. The CDC is predicting that during the next pandemic, absenteeism throughout the work force could be at least 40%. Mortality rates (percentage of sick persons who die) could be as high as 25%. These statistics are not limited to any particular occupation. They will apply to law enforcement, fire protection, doctors and medical fields, electrical and utility operations, agricultural and food supply industries, oil and petroleum service industries, etc.

Even if quarantine becomes a lawful issue, it is really about self-preservation. Quarantining yourself ensures that if you have been exposed, you will not continue the spread of the illness if you are contagious. This is most beneficial to members of your family, the people who live closest to you. If pandemic flu becomes a reality in our region, everyone will be advised to take quarantine, isolation, and social distancing very seriously.

### 4. What cleaning solutions should we use?

- The easiest universal disinfectant, *if used properly*, is bleach.
  - Most people mix this too strongly, and this is a very dangerous practice.
  - Bleach gives off Chlorine gas, which is deadly if inhaled. The stronger the bleach solution, the more Chlorine gas is emitted.
  - Bleach solutions should be mixed and used only in well-ventilated areas. For disinfecting surfaces, use the following mixing table.
- Bleach can be stored in store-bought concentration for years without any ill effects.
- However, most experts agree that you should only mix enough bleach solution that can be used in one or two days. After that, discard the rest down the toilet and mix a fresh solution.
- Dilution will depend on the task at hand:
  - Disinfectant properties at 1:15 dilution:

Amount of Bleach	Dilute with water
1 cup; 8 oz	1 gallon
½ cup; 4 oz	½ gallon
¼ cup; 2 oz	1 quart
1/8 cup; 1 oz	1 pint
½ oz; 1 Tbsp	1 cup

- Food contact surfaces:
  - Prewash
  - Rinse with one (1) Tbsp of bleach / gallon of water.
- Non- food contact surfaces:
  - Prewash
  - Rinse with 1:15 solution, allow to stand 10 min., air dry.

### 5. Who will be caring for the ill students on campus?

The Student Health Services clinic is NOT a 24/7 medical facility and therefore, will close with the rest of the campus. The University has learned that the Acadiana Red Cross is formulating a community-wide pandemic response plan that will be used to

support persons who are ill, including University students. The University will support the Red Cross with volunteer assistance wherever possible.

**6. Will food service operations close?**

Beginning at Phase III of the University's Pandemic Plan, Food Services will cease operation.

**7. What are the plans to distribute medications, should they become available?**

This decision to distribute medications will be made by CDC and OPH. The distribution will be under the guidance of OPH.