

# EPIDEMIOLOGIC INVESTIGATION SUMMARY

## INFLUENZA OUTBREAK AMONG PATIENTS OF A HOSPITAL IN WASHOE COUNTY, NEVADA, 2018

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*Department of Health and Human Services  
Division of Public and Behavioral Health  
Office of Public Health Informatics and Epidemiology*

January 2018  
Edition 1.0  
2018 volume, issue 5

### PURPOSE

The purpose of this newsletter is to provide the scientific community, decision makers, healthcare providers, and the public a summary of the outbreak investigations conducted by the Division of Public and Behavioral Health.

### BACKGROUND

On January 12, 2018, the Division of Public and Behavioral Health (DPBH), Office of Public Health Informatics and Epidemiology (OPHIE) was informed by the Washoe County Health District (WCHD) of an outbreak of influenza among residents of Facility "A." WCHD was notified by the facility of the increase in illness by the facility on January 9, 2018. The increase in illness was first identified by staff of the facility on January 9, 2018. Initial symptomology of the ill residents included fever, cough, and a runny/stuffy nose. The outbreak investigation began on January 12, 2018.

### CASE DEFINITIONS

**Clinical criteria** An influenza-like illness, which is defined as fever (temperature of 100°F [37.8°C] or greater) and a cough and/or a sore throat without a known cause other than influenza between January 6, 2018 to January 9, 2018.

**Epidemiological criteria** Any residents or staff members associated with Facility "A" and their ill contacts identified through investigations.

**Laboratory criteria** Any laboratory confirmation by PCR or other method from a human specimen for influenza.

#### Case classification

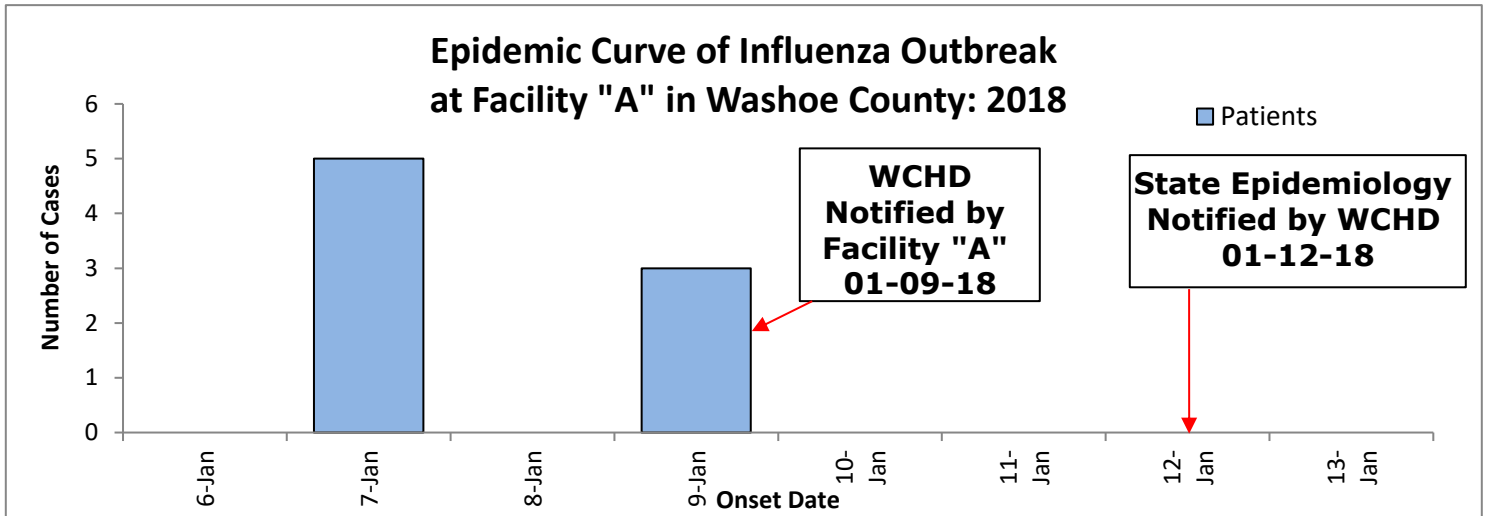
**Confirmed case** A case meeting clinical, epidemiological, and laboratory criteria.

**Probable case** A case meeting clinical and epidemiological criteria without laboratory confirmation.

### Epidemiology

#### Onset Date

The peak illness onset date was January 7, 2018.



## Epidemiology

A total of 8 cases met the confirmed case definition. None (0) of the patients were hospitalized due to their illness; they were already hospitalized due to other conditions. There were zero (0) deaths associated with this outbreak. The resident attack rate was 38.1% (n=21).

**Age-** The median age was 81 (range: 67 – 96 years).

Age	n	Total N	%
10-19 years	0	8	0%
20-49 years	0	8	0%
50-74 years	3	8	37.5%
> = 75	5	8	62.5%

**Sex-** Male 1 (12.5%), Female 7 (87.5%)

**Incubation period-** The incubation period for influenza is 1-4 days.

**Duration of illness-** The average duration of illness was approximately five days (range four – five days).

**Clinical symptoms-**

Symptoms	n	Total N	%
Congestion	0	8	0%
Cough	4	8	50%
Fever	8	8	100%
Headache	3	8	38%
Malaise/Body Aches	0	8	0%

## Laboratory

A total of 8 specimens were tested, and all were positive for influenza A.

## Data Sources

Health Clinic Visit Data. (electronic)

Residents who had complaints consistent with respiratory illness. (line listing form)

Staff who call in with complaints consistent with respiratory illness. (line listing form)

## CONCLUSIONS

The last onset date occurred on January 9, 2018. The outbreak was declared over on January 22, 2018 because the facility went two full incubation periods without a new case.

## Mitigation

After lab results confirmed that the cause of the outbreak was influenza which has an incubation period of one to four days, DPBH reiterated the importance of continued outbreak control measures in order to interrupt further transmission. The facility continued their own mitigation efforts as well.

## RECOMMENDATIONS

To prevent influenza outbreaks in healthcare settings, the following public health measures are recommended:

- Remind residents, staff, and visitors of proper hand hygiene and cough etiquette in compliance with CDC/WHO guidelines.
- Clean and disinfect equipment and environment with an agent approved to kill the influenza virus.

- Educate healthcare workers, housekeepers, administration staff, residents, and families on influenza.
- Isolate residents and exclude from work any staff members who have symptoms consistent with influenza<sup>1</sup>.
- Immediately notify infection control about positive laboratory results.

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## REFERENCES

1. Centers for Disease Control and Prevention. Prevention Strategies for Seasonal Influenza in Healthcare Settings: Infection Control Practices Advisory Committee. January 9, 2013. Retrieved February 2, 2015, from: <https://www.cdc.gov/flu/professionals/infectioncontrol/healthcaresettings.htm>

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## RECOMMENDED CITATION

Division of Public and Behavioral Health. Office of Public Health Informatics and Epidemiology. Epidemiologic Investigation Summary, *Influenza Outbreak Among Patients of a Hospital in Washoe County, Nevada, 2018*. v 2018. i 5. e 1.0. January 2018.

## ACKNOWLEDGEMENTS

Thank you to all persons who contributed to this publication:

Jessica Conner, MPH; Brian Parrish, MPH; Kimisha Causey, MPH; Adrian Forero, BS; Chidinma Njoku, BS; Sandi Larson, MPH; Melissa Peek-Bullock; Ihsan Azzam, PhD, MD, MPH.

This report was produced by the Office of Public Health Informatics and Epidemiology of the Division of Public and Behavioral Health with funding from budget account 3219.