



H1N1 Influenza 09 (Human Swine Influenza): Interim Recommendations for Facemask Use during the CONTAIN Phase.

23 May 2009

This document provides interim recommendations for surgical mask and P2 mask use during the current CONTAIN phase of pandemic influenza preparedness in response to the international H1N1 influenza 09 (human swine influenza) outbreak.

These recommendations provide an update on facemask recommendations within the *Interim Infection Control Guidelines for Pandemic Influenza in Health Care and Community Settings (June 2006)*, an Annex to the *Australian Health Management Plan for Pandemic Influenza (2008)*.

At this time there have been only a small number of cases of H1N1 influenza 09 infection in Australia and limited community transmission of the infection in Australia. This guidance may be updated if new scientific information about the behaviour of the H1N1 influenza 09 virus becomes available or if there is evidence of widespread community transmission of the virus in Australia.

IN THE COMMUNITY AND NON-HEALTH CARE WORKPLACES

There is currently no reason to wear a facemask for protection against H1N1 influenza 09 unless you are in close contact with persons suspected to have the infection. This will normally only apply to health care workers attending patients and to carers in the same house as people who are suspected or confirmed cases.

People who have been identified as suspected or confirmed cases of H1N1 Influenza 09 infection may be advised to stay in home isolation to prevent the further spread of infection. These people and their household contacts will need to take additional precautions, including the wearing of surgical masks in some settings, as follows:

1. Suspected and Confirmed H1N1 Influenza 09 Cases

- People who have been identified as suspected or confirmed H1N1 influenza 09 cases should wear a surgical mask when they come within one metre of others, in order to reduce the risk of spreading the infection.
- This advice applies equally to patients in health care settings during assessment and treatment, as it does to people cared for at home.

2. Household Contacts of Suspected and Confirmed H1N1 Influenza 09 Cases

- Household contacts of a suspected or confirmed H1N1 influenza 09 case – including household members and community support providers – should remain at least one metre away from the case wherever possible.
- Household contacts should wear a surgical mask if the case is unable to wear a surgical mask and they need to come into the same room as the case.

People who are unwell with cold or 'flu' symptoms are advised to stay at home (even if they are not suspected or confirmed H1N1 influenza 09 cases) and minimise contact with other household members until they are completely well. When close contact (contact within one metre) with others cannot be avoided, especially when seeking medical care, they should wear a surgical mask to reduce the risk of spreading influenza or other infections to other people.

It is important to remember that one of the most effective ways to protect you, your friends and family, and co-workers from influenza is to practise good personal hygiene. This includes washing your hands regularly, covering coughs and sneezes, not sharing personal items, and regularly cleaning surfaces around your home and work which can become contaminated by influenza viruses (See "Protecting Yourself and Others" <http://www.health.gov.au/fluandyou>).

HEALTH CARE SETTINGS

General Advice

- All patients assessed to be a suspected case of H1N1 influenza 09 should be given a surgical mask to wear as soon as possible after arrival and be isolated in a single room where available.
- The patient should be asked to wear a surgical mask when they come within one metre of others, when they leave the room, and during transport.
- All HCWs should remain at least one metre away from suspected or confirmed cases of H1N1 influenza 09 unless necessary for patient care or medical procedures.
- When it is necessary for a HCW to come within one metre of the patient, then a surgical mask together with protective eyewear, disposable gloves and a disposable gown should be worn by the staff member. If the case is not able to wear a surgical mask then the HCW should wear a P2 mask instead of a surgical mask.
- If the HCW is dealing with a patient who is not a suspected case of H1N1 influenza 09 (but may be a suspected case of seasonal influenza), a surgical mask should be worn by the HCW coming within 1 metre of the patient and when collecting the throat and nose swabs for PCR testing.
- No mask is required for HCWs remaining greater than one metre from a patient who is wearing a surgical mask.

Aerosol-Generating Procedures

- P2 masks are recommended when undertaking aerosol generating procedures on a suspected or confirmed H1N1 influenza 09 case, **including the collection of nose and throat swabs.**
- Aerosol-generating procedures should only be performed in a single room with the door closed. All HCW's in the room should wear a P2 mask together with protective eyewear, disposable gloves and a disposable gown during the procedure.

MASK INFORMATION

Surgical Masks

- The term 'surgical mask' refers to a disposable fluid-repellent, paper filter mask that complies with the Australian standard for single-use masks for use in health care (AS 4381-2002). This may include masks labelled as surgical, dental, medical procedure, isolation, or laser masks.
- Surgical masks have several designs. One type is affixed to the head with two ties, conforms to the face with the aid of a flexible adjustment for the nose bridge, and may be flat/pleated or duck-billed in shape. Another type of surgical mask is pre-moulded, adheres to the head with a single elastic band, and has a flexible adjustment for the nose bridge. A third type is flat/pleated and affixes to the head with ear loops. .

- It is important to ensure that surgical masks are worn and disposed of correctly. Make sure the mask is correctly fitted by ensuring that it covers your nose and mouth and that it is secured at the back of your head.
- Avoid touching your face while wearing the mask. Replace the mask whenever it is moist. A mask that has been removed should not be reused.
- Remove the mask by only touching the straps and put the used mask in a bin. Wash your hands well with soap and water straight away and dry with a paper towel.

P2 Masks

- P2 masks (P2 respirators) are designed to provide high-level protection to the wearer's respiratory tract from small infectious particles. They are particulate filter, personal respiratory protection devices which, when tested against the Australian standard for Respiratory Protective Devices (AS/NZS 1716:2003), filter out at least 95% of particles of 0.3 micrometres diameter.
- Testing is required so that P2 masks fit properly. Fit Checking for staff wearing a P2 mask is the appropriate minimum standard for health care workers each time they need to use a P2 mask for dealing with potentially infectious cases. Formal Fit Testing is recommended where available.
- Fit Checking should be done in accordance with the mask manufacturer's instructions to ensure there is no air leakage around the mask. This is usually done after the mask is compressed over the nose and across the cheeks and face to create a firm seal. The wearer then gently inhales - the mask should draw in slightly towards the face and collapse – and then gently exhales - the mask should fill up with air. A fit check should be done each time a P2 mask is worn.
- In some areas formal Fit Testing for health care workers is provided and required prior to wearing P2 masks in clinical settings. Health care workers should consult with their local public health officials or infection control practitioners for specific guidance.

Masks authorised by the Therapeutic Goods Administration (TGA) for use as medical devices are required to have been tested by their manufacturer in relation to any disease prevention claims.

Facemasks that are not presented or claimed to be for therapeutic use such as those designed as safety or protective apparel for use in the home or for recreational or occupational use, are excluded from the regulation by the TGA under the Therapeutic Goods Act. This includes other types of facemasks made of cloth and other materials are popular in some countries but which have often not been tested for the level of protection they provide.

Information regarding masks and other devices registered with the TGA is available at <https://www.ebs.tga.gov.au/ebs/ANZTPAR/PublicWeb.nsf/cuDevices?OpenView> (search by Product Name and term "mask").

ADDITIONAL INFORMATION ON H1N1 INFLUENZA 09

Australian Department of Health and Ageing

H1N1 influenza 09 website: <http://www.healthemergency.gov.au/>
 Pandemic Influenza website *: <http://www.flupandemic.gov.au/>

* Includes links to the *Interim Infection Control Guidelines for Pandemic Influenza in Health Care and Community Settings (June 2006)* and the *Australian Health Management Plan for Pandemic Influenza (2008)*.

State and Territory Health Departments

ACT Department of Health

<http://health.act.gov.au/c/health?a=da&did=10098808&pid=1240874209>

NSW Department of Health

http://www.health.nsw.gov.au/publichealth/swine_flu.asp

NT Government Department of Health and Families

http://www.health.nt.gov.au/Centre_for_Disease_Control/index.aspx

Queensland Government

http://access.health.qld.gov.au/hid/InfectionsandParasites/ViralInfections/swineFlu2009_fs.asp

SA Department of Health

<http://flu.sa.gov.au/Swineflu.aspx>

Tasmanian Government

<http://www.pandemic.tas.gov.au/>

Victorian Government

<http://www.health.vic.gov.au/ideas/diseases/swine-influenza>

WA HEALTH

http://www.health.wa.gov.au/swine_flu/home/