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In response to numerous questions and concerns generated by U.S. Centers for Disease Control and Prevention's (CDC) **2009 Influenza: CDC Guidance on Infection Control in Healthcare Facilities** and corresponding information published by the U.S. Occupational Health and Safety Administration (OSHA) on October 14, 2009, the Ohio Department of Health (ODH) is providing the following guidance for preventing and controlling the transmission of H1N1 and seasonal influenza in healthcare and non-healthcare environments.

- Consistent with recommendations of the World Health Organization, the Association for Professionals in Infection Control and Epidemiology, the Society for Healthcare Epidemiology in America, and the Infectious Diseases Society of America, the use of gloves, surgical masks, gowns, and frequent hand washing provide adequate protection against transmission of H1N1 and seasonal influenza. (Additional information on precautions that can be taken to prevent and control the transmission of influenza is described in Section 5 of ODH's **Infectious Disease Control Manual**, located at: <http://www.odh.ohio.gov/healthResources/infectiousDiseaseManual.aspx>.)
- N95 respirator shortages are anticipated for the foreseeable future; therefore, it is imperative that agencies consider taking these actions to effectively utilize existing N95 supplies:
 - Restrict use of N95 respirators to direct airway manipulation procedures including, but not limited to, bronchoscopy, intubation, administration of nebulized medications, ventilation with Ambu bags, use of non-invasive positive pressure airway devices for respiratory support, and suctioning.
 - Implement N95 reuse policies, as suggested by the CDC's **Guidance on Infection Control in Healthcare Facilities**, rather than routinely disposing of respirators after each use.
 - Assure that respirators are not commercially available prior to requesting assets from respirator caches purchased with ASPR/Healthcare Preparedness Program grant funds or supplied by the Strategic National Stockpile.
- Any NIOSH/FDA approved respirator with a filtering efficiency of at least 95% is appropriate for use in controlling the transmission of H1N1 and seasonal influenza (e.g., N100, P95, R100, PAPRs, etc.).
 - Employees required to wear respirators must be medically cleared, fit-tested, and trained to wear the type(s) of respirators they anticipate using.

- When respiratory protection is not required by an employer, but the employee voluntarily chooses to wear a respirator, the employer must provide training as well as a copy of OSHA's Respiratory Protection Standard, Appendix D. Additionally, employees may be required to be medically cleared depending on the type of respirator. (For additional information, refer to OSHA's Small Entity Compliance Guide for the Revised Protection Standard, Section E; <http://www.osha.gov/Publications/secgrev-current.pdf>.)

This guidance was jointly developed by ODH, the Ohio Bureau of Workers' Compensation, the Ohio Department of Public Safety, the Ohio Department of Administrative Services, and the Ohio Hospital Association. This guidance is intended to enable the practical implementation of respiratory protection programs during the current H1N1 influenza pandemic, which is essential considering existing and anticipated N95 supply limitations.


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