Management of Residents with Enteric Symptoms

STEP 1: Assessment

Has the resident had **2 or more episodes of new and unexplained vomiting and/or diarrhea in a 24-hour period** (not related to an underlying condition, medication or diet change etc.) ***OR*** is there concern of a viral/bacterial enteric illness?

Yes → STEP 2

No → STEP 2

Uncertain
Or only 1 episode of vomiting or diarrhea → STEP 3

STEP 2: Reporting to SWPH

Is there more than one resident with similar symptoms within a 48-hour period?

Yes → Call SWPH at **1-800-922-0096**

No → SWPH does not need to be notified. Follow the instructions in ***steps 3, 4 & 5*** below.

- No further action required.
- If the resident develops new or worsening symptoms, go back to ***step 1***.

STEP 3: Isolation & Additional Precautions

ISOLATION & ADDITIONAL PRECAUTIONS

- **Case Isolation:** Isolate the ill resident in a private room. If a private room is not available, draw the curtain and dedicate equipment and toileting.
- **Roommate Isolation:** Isolation not required.
- **Duration of isolation:** Go to **step 5 test results.**
- **PPE:** Use contact precautions while providing direct care or interacting with the ill residents.
- **Cleaning & Disinfection:** Increase frequency of cleaning & disinfection of high-touch items and surfaces. Switch to an intermediate or high-level disinfectant.
- **Hand Hygiene:** Is the number one way to prevent the spread of infection. Ensure staff, residents and visitors perform frequent hand hygiene.

ISOLATION & ADDITIONAL PRECAUTIONS

- **Isolate** resident for 24 hours & **monitor for new or worsening** symptoms.
- **Consult** with the resident's physician for an assessment.
- **PPE:** Use contact precautions when providing direct care or interacting with the resident.
- **Cleaning & Disinfection:** Increase frequency of cleaning & disinfection of high-touch items and surfaces. Switch to an intermediate or high-level disinfectant.
- **Hand Hygiene:** Is the number one way to prevent the spread of infection. Ensure staff, residents and visitors perform frequent hand hygiene.
- **If new or worsening symptoms develop**, go back to **step 1**.
- **If NO new or worsening symptoms develop and/or if there is an alternate, non-infectious diagnosis,** isolation and additional precautions may be discontinued, and testing is not required.

STEP 4: Testing

SPECIMEN COLLECTION & TRANSPORT

- **Collect stool samples** per medical director or resident's physician recommendations for sporadic cases (i.e., one symptomatic resident).
- **Complete a** General Test Requisition **for stool samples**.
  - Use the medical director or resident's physician as the ordering provider for non-outbreak samples.
  - Ensure "Enteric outbreak testing - virus isolation and bacterial culture" is written in the Test(s) Requested section.
  - Ensure the resident demographics on the requisition match the demographics on the specimen container(s).
- **Submit** non-outbreak samples (i.e., a sample from one sporadic ill resident) to the lab using your facility courier.
- **Contact** SWPH to discuss specimen collection and transport during a suspect or confirmed outbreak.

STEP 5: Test Results

Norovirus

- **Case Isolation:** Isolate for 3 days from the last episode of vomiting or diarrhea.
- **Roommate Isolation**: n/a
- **PPE**: Gown and gloves. Medical mask and eye protection may be needed based on point of care risk assessment.
- **SWPH Notification Required**: Not unless there is more than one ill resident.

Unknown (No Pathogen Detected)

- **Case Isolation**: Isolate for 2 days from the last episode of vomiting or diarrhea.
- **Roommate Isolation**: n/a
- **PPE:** Gown and gloves. Medical mask and eye protection may be needed based on point of care risk assessment.
- **SWPH Notification Required:** Not unless there is more than one ill resident.