



Texas OPTI

October 2009
Volume 5 :: Number 4



Our Mission

Texas OPTI is an educational consortium committed to assuring the advancement of osteopathic postdoctoral training.

In fulfillment of that commitment we enhance osteopathic graduate medical education through quality program development and advocacy on behalf of our interns, residents, fellows and member institutions.

3500 Camp Bowie Boulevard • EAD-426 • Fort Worth, Texas 76107

Phone: 817.735.2149 • Fax: 817.735.2330 • Online: <http://texasopti.hsc.unt.edu> • Editor: Eryn Loney, M.L.A.

H1N1 on the horizon:

Here's how to prepare your practice—and staff

By Victoria Stagg Elliott, AMA News Staff :: originally posted on 9.7.09

The exact number of people who will contract H1N1-related illnesses is unpredictable. The disruption around the office when H1N1 hits is certain. This fall and winter promise lots of patients sick with some kind of flu—or fearful that they are—as well as depleted staff levels when employees get sick or have to stay home with someone who is.

That's why experts are advising physicians to plan now for what is expected to be a very unusual, active flu season. Those who don't prepare will quickly be overwhelmed, said John Fontanesi, Ph.D., professor of medicine at the University of California, San Diego. He is working with the American Medical Association to create tools for physicians to make planning easier.

Beyond managing vaccine schedules, physician practices are advised to consider cross-training employees, having staff work from home, keeping those with H1N1 symptoms away from other patients, and even directing patients elsewhere to minimize disruption and illness spread.

The H1N1 virus is not more virulent than others, but because most people lack immunity to it, it has the potential to sicken large numbers. Most of these patients are likely to seek care at outpatient venues and not be so ill as to need hospitalization.

We may see more of a surge in the numbers of visits to doctors' offices than hospitals, said Patrick O'Neal, M.D., director of the division of emergency preparedness and response for the Georgia Dept. of Community Health.

Experts say practices should use their usual plans for flu season as merely a baseline for handling the H1N1 season. Public health agencies and medical societies, including the AMA, have numerous resources on this subject. Plans should include strategies for informing patients—and everyone working in the practice—that they may need H1N1 immunization in addition to the usual vaccine for the seasonal flu. Because H1N1 began attracting so much media attention with the first wave of illnesses in the spring, some physicians say encouraging vaccination is likely to be the easy part.

"People are running very scared," said Ryan Kaufman, M.D., a family physician and partner in the Oakhill Medical Associates in West Liberty, Ohio.

Plans need to include strategies for separating symptomatic patients in the office or even stopping them from coming in at all. A patient with respiratory symptoms needs to be at least three feet away from anyone else to reduce the risk of spread.

Dr. Kaufman, who has cared for a couple of patients infected with H1N1, used this approach: Patients were triaged by phone. When the nurse realized the patients possibly had the virus, they were given appointments and told to enter the practice through the back door.

When there are more cases than Dr. Kaufman's practice can handle in this manner, patients suspected of having H1N1 will be directed to the local hospital. "The goal is to keep them out of the office where we have many other patients," he said.

Experts also recommend posting signs educating patients about respiratory hygiene and cough etiquette. Alcohol-based hand rub should be widely available to staff and patients. During a pandemic, any items that patients may share but are unnecessary to medical care, such as toys or magazines in the waiting room, should be removed.

Any flu-season plans should address the possibility that a practice will have multiple employees—including physicians—out sick at the same time. **Staff who have a suspected or diagnosed case of H1N1 should be encouraged to stay home for at least seven days or until they are well, whichever is longer, government guidelines suggest.** The time is needed to prevent spread to patients and other staff, which would worsen absenteeism.

To stay operational, experts are advocating cross-training employees so staff can cover for each other as much as possible. Some employees also could be set up to work from their homes, allowing productivity from those who are well enough to work but for various reasons can't come in.

Some practices are taking additional steps to reduce the chance that staff will have to take sick time this winter. Jason Terk, M.D., senior consultant pediatrician at the Cook Children's Physicians Network in Keller, Texas, is giving seasonal flu shots to his staff as well as their spouses and children. "This will reduce absenteeism during that time, and it's the right thing to do for our staff," said Dr. Terk, who is also a member of the Texas Medical Association's Council on Public Health.

Medical practices also need to prepare for possible disruptions in the supply chains for various infection-control items, such as alcohol-based hand rubs and surgical masks. Distributors may have problems meeting the demand for these items. "It might be better to have a little extra on hand," said Bruce Cadwallender, director of safety and emergency management at the University of Michigan Health System. Physicians who are preparing say they have ordered 10-50% more of these items than usual.

Save the Date

*ACOI Annual Convention
and Scientific Sessions*
Tucson, Arizona
October 14th—18th

*Back to Basics:
Essential Medical Imaging*
Las Vegas, Nevada
October 26th—30th

*2009 Annual Clinical Assembly
of Osteopathic Surgeons*
Chicago, Illinois
October 31st—November 3rd

*AOA/ACOF 114th Annual
Convention & Scientific Seminar*
New Orleans, Louisiana
November 1st—5th

Stay Healthy this Fall *from ecomii.com*

- Cover your mouth and nose with a tissue when you sneeze.
- Wash your hands regularly with hot, soapy water.
- Keep your hands away from your eyes, nose, and mouth.
- Try to stick to a regular sleep schedule.
- Be wary of surfaces and clean them regularly.
- Exercise and eat well; load up on fruits and vegetables.

**We know you're busy taking care of your patients but please,
make sure you're taking care of yourself and your families as well!**

Visit the Texas OPTI website...

...for a variety of helpful resources: <http://texasopti.hsc.unt.edu>.

Texas OPTI Members

Bay Area Medical Center * Driscoll Children's Hospital * JPS Health Network
Methodist Charlton Medical Center * Plaza Medical Center of Fort Worth
San Jacinto Methodist Hospital * Texas A&M HSC College of Medicine
Texas Osteopathic Medical Association * Texas Tech University Health Sciences Center
University of North Texas Health Science Center * University of Texas Medical Branch-Galveston