

RESPIRATORY SYNCYTIAL VIRUS (RSV) ONCOLOGY CONTROL PLAN

Stage 1: Effective when the first hospitalized patient from the local community with confirmed RSV infection is identified each fall.

Stage 1 Procedures	
Nasopharyngeal aspirate (NPA) Specimens for Viral Culture and Antigen Detection	The test is indicated for any adult oncology patient (pt) with bronchiolitis, pneumonia including increasing oxygen requirement, sputum production or flu-like symptoms. Flu-like symptoms include fever, runny nose, cough and body aches.
Droplet Precautions	Indicated for any adult oncology patient (pt) with bronchiolitis, pneumonia including increasing oxygen requirement, sputum production or flu-like symptoms. Flu-like symptoms include fever, runny nose, cough and body aches.
Duration of Precautions for Suspected Cases	Precautions can be discontinued after 7 days if the initial antigen was negative, the initial culture is negative & the patient is symptom free. If symptoms persist, precautions shall be continued
Duration of Precautions for Confirmed Cases	Precautions may be discontinued after obtaining 2 consecutive negative RSV antigen tests, taken one week apart.
Placement of Patients	Private room. Contact Hospital Epidemiology & Infection Control for assistance with placement issues.
Droplet Precautions include the following:	<ul style="list-style-type: none"> • Gloves & gowns are required for contact with infective material. • Mask (preferably with eye protection) is required if within 3 feet of the patient. • All protective attire must be removed before leaving the room and hands must be cleaned • Visitors must follow the precautions
Visitation	<ul style="list-style-type: none"> • Visitors with flu like symptoms may not visit. • Children under 12 are not allowed to visit. • Exceptions to the above will be granted only with permission from the attending physician and nurse manger.
Staff Guidelines	<p>Personnel responsible for the care of Weinberg patients must wear a mask and gloves for all patient contacts while they have symptoms of a cold but are afebrile. When possible, assignments of symptomatic personnel should be made so as to minimize their contact with patients who have congenital heart disease, chronic lung disease, or immune suppression.</p> <ul style="list-style-type: none"> • Oncology personnel who are febrile (> 38°C) or have flu-like symptoms must stay home or if they become sick while at work must go home. • Oncology personnel are strongly encouraged to receive the Influenza vaccine yearly.

Stage 2 will begin when 5 hospitalized patients from the local community with confirmed RSV infection have been identified.