Topline Points to Share

- CDC is scaling back operations in the EOC, but duties and tasks related to the novel influenza A (H1N1) outbreak are ongoing.

- The list of states with the numbers of confirmed cases of novel H1N1 infection will be available online and updated Monday – Friday at approximately 11 AM. Note: Most states do not report over the weekend.

If you are asked . . .

“What is an emergency use authorization (EUA)?”

Answer: An Emergency Use Authorization (EUA) may be issued by the Food and Drug Administration (FDA) to allow either the use of an unapproved medical product or an unapproved use of an approved medical product during certain types of emergencies with specified agents. The FDA made available to public health and medical personnel important diagnostic and therapeutic tools to identify and respond to the H1N1 flu virus under certain circumstances. In response to this event, the FDA issued EUAs for the use of certain antiviral products (Relenza, Tamiflu), N95 respirators, and for the rRT-PCR Swine Flu Panel diagnostic test. While Tamiflu and Relenza have been previously approved by the FDA, certain aspects of the distribution and use of these products are not covered by their approved applications. An EUA allows these drugs to be legally distributed for the unapproved uses for which they are being authorized.

Additional information on these EUAs can also be found on FDA 2009 H1N1 Virus site.

Fast Facts

- Novel influenza A (H1N1) activity is now being detected in two of CDC’s routine influenza surveillance systems.

- As of May 13, 2009, the World Health Organization states that 33 countries have officially reported 5728 cases of novel influenza A (H1N1) infection. WHO is not recommending travel restrictions related to the outbreak of the influenza A (H1N1) virus.
Interim Guidance for EMS and 9-1-1 Operators (Public Safety Answering Points)

Unlike patient care in the controlled environment of a fixed medical facility, pre-hospital EMS patient care is provided in an uncontrolled environment, often confined to a very small space, and frequently requires rapid medical decision-making, and interventions with limited information. EMS personnel are frequently unable to determine the patient history before having to administer emergency care. EMS providers' practice should be based on the most up-to-date swine-origin influenza clinical recommendations and information from appropriate public health authorities and EMS medical direction.

CDC has issued interim guidance for 9-1-1 Public Safety Answering Points (PSAPs), the EMS system and medical first-responders. The information contained in the interim guidelines is intended to complement existing guidance for healthcare personnel. Coordination among PSAPs, the EMS system, healthcare facilities (e.g. emergency departments), and the public health system is important for a coordinated response to novel influenza A (H1N1) virus. To access the full report go to: http://www.cdc.gov/h1n1flu/guidance_ems.htm

CDC public health workforce deployed (as of May 14, 2009)

In the CDC Emergency Operations Center (EOC): More than 1,300 are deployed.

By state/country (total 106)
States: California, 6; Delaware, 7; Illinois, 24; Massachusetts, 2; New York City, 2; Ohio, 3; Texas, 8; Washington, 4

Others: Washington, DC, 1; and U.S. quarantine stations, 24
Countries: Guatemala, 3; Mexico, 22

Get Ready

- American Indian and Alaska Native governments can access resources from the strategic national stockpile. For more information go to: Preparing Tribal Nations to Receive Strategic National Stockpile Assets

- “Cover Your Cough” posters can be downloaded (.pdf format) and are available in two sizes and nine languages (Note: All languages are not available in both sizes). To access the posters go to: http://www.cdc.gov/flu/protect/covercough.htm
Meet the responders: Jacqueline Evans, Plans and Policy Coordinator
COTPER/Division of Emergency Operations

What Are You Doing? I am developing the CDC SITREP and Incident Action Plan.

What’s Most Challenging? The challenging part is coordinating the input of all data received in a timely and accurately manner.

What’s Most Rewarding? Knowing that what I am doing provides a snapshot of what is currently happening at CDC with the H1N1 flu outbreak and what the expected outcomes are for the next operational period.

What’s Most Surprising? It’s the large number of responders, including volunteers and how well everyone has come together and is doing a great job. Some come with very little or no experience in emergency response but have become well acclimated.

CERC support during the novel influenza A (H1N1) outbreak

CDC’s crisis and emergency risk communication (CERC) framework was developed following the first outbreak among humans of the H5N1 avian influenza in 1997 and after CDC’s response to the anthrax incident in 2001. OEC is conducting training through its distance-based teaching platform during this response. In addition, OEC’s risk communication team is providing real-time consultation to public information officers and public health officials around the nation and internationally as the outbreak unfolds. For example, in CDC’s 2006 CERC Pandemic Influenza course book, a chapter was devoted to concerns about stigmatization and activities to confront it. This guidance is being used to help reduce stigmatization of population groups and animals during this outbreak. OEC, in consultation with its CERC panel which is made up of state and local PIOs, provided the tips nationwide and created a video podcast on the topic.

Click to view the CERC Stigmatization Podcast.

CDC has updated biosafety guidelines for persons working with Clinical Specimens or Isolates from Patients with Suspected Novel Influenza A (H1N1) Virus Infection. You can find the updated guidelines at: http://www.cdc.gov/h1n1flu/guidelines_labworkers.htm

CDC continues to take aggressive action to respond to the outbreak. CDC’s response goals are to reduce the spread and severity of illness, and to provide information to help health care providers, public health officials and the public address the challenges posed by this new public health threat.
CDC H1N1 Flu Update: U.S. Human Cases of H1N1 Flu Infection

As of May 14, 2009, 11:00 AM ET