

From the Acting Chief Medical Officer
Dr Elizabeth Mitchell



Department of
**Health, Social Services
and Public Safety**

www.dhsspsni.gov.uk

AN ROINN

**Sláinte, Seirbhísí Sóisialta
agus Sábháilteachta Poiblí**

MÄNNYSTRIE O

**Poustie, Resydènter Heisin
an Fowk Siccar**

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Your Ref:
Our Ref: HSS(MD)24/2009
Date: 12 June 2009

HSS(MD)24/2009

To:

Chief Executives, HSC Board / Public Health Agency
Chief Executives, HSC Trusts
Director of Public Health, Public Health Agency (*for onward
distribution to Consultants in Communicable Disease Control,
Regional Epidemiologists*)
Director of Nursing, Public Health Agency
Family Practitioner Service Leads, HSC Board (*for cascade to
Out of Hours centres*)
GP Medical Advisers, HSC Board
Medical Directors, HSC Trusts (*for onward distribution to, A& E
doctors, ID Physicians, Microbiologists, Virologists, Consultant
Physicians, Consultant Intensivists*).
Medical Director, NI Ambulance Service
Nursing Directors, HSC Trusts
PHA EOC

URGENT COMMUNICATION

Dear Colleague

FOR INFORMATION

INTERIM POLICY ON PATIENTS WHO SHOULD BE CONSIDERED FOR POSSIBLE TESTING FOR INFLUENZA A(H1N1)

You will be aware by now that WHO have declared Phase 6 of a global influenza pandemic. Further information on that may be viewed at www.who.int. I am writing to advise you of interim policy on testing of hospitalised patients for swine flu. The purpose of this is both to ensure appropriate identification of patients with swine flu and also to prevent nosocomial transmission of infection in hospitals here.

The number of cases of influenza A(H1N1) nationally and internationally continues to rise. Infection with influenza A(H1N1) virus in the UK is generally mild in most people, but proving more severe in a small number of cases. Occasional patients have required admission to hospital in Scotland and England, with a few patients requiring intensive or high dependency care.

