

## **RESPIRATORY VIRUSES TABLE**

VIRUS	Influenza A and B	RESPIRATORY SYNCTIAL VIRUS (RSV)	HUMAN ADENOVIRUS	HUMAN CORONAVIRUS (229E, NL63, OC43)	HUMAN ENTEROVIRUS	HUMAN METAPNEUMOVIRUS	HUMAN RHINOVIRUS	HUMAN PARA- INFLUENZA VIRUSES 1,2, 3 & 4
INCUBATION PERIOD	1 to 4 days	2 to 8 days	1 to 10 days	2 to 4 days	3	3 to 5 days		2 to 6 days
SYMPTOMS	Acute onset of respiratory illness characterized by: fever and new cough AND one or more of the following symptoms: sore throat, joint aches, muscle aches, exhaustion		rsening cough	may include, but are not  Fever  Headache Runny nos		Muscle aches     Exhaustion     Sore throat		
PERIOD OF COMMUNICABILITY	Probably 1 day before to 3 to 5 days from clinical symptom onset in adults; up to 7 to 10 days in young children	Shortly before and cease or return			Until symptoms cease or return to baseline			1 to 3 weeks
TRANSMISSION	Person-to-person transmission through large respiratory droplets when infected persons cough or sneeze is believed to be the primary transmission route.  Respiratory secretions contain the infective material. Transmission may also occur through direct or indirect contact with respiratory secretions (e.g., touching surfaces contaminated with influenza virus and then touching the eyes, nose or mouth).  Individuals with asymptomatic infection can transmit virus to susceptible individuals (e.g., asymptomatic health care worker to patient).  Human respiratory viruses may persist for hours on solid surfaces, particularly in lower temperatures and lower humidity							
DURATION OF PRECAUTIONS	<b>Discontinue</b> precautions for suspected or confirmed <b>non- ventilated cases</b> based on resolution of symptoms/clinical improvement (e.g. COPD as baseline) <b>Discontinue</b> precautions for suspected or confirmed <b>ventilated cases</b> based on clinical improvement for 48 hours  Chronic respiratory symptoms or post viral cough do not require maintenance of precautions							
PEOPLE AT HIGH RISK OF RESPIRATORY VIRUS-RELATED COMPLICATIONS	<ul> <li>Adults (including pregnant women) and children with the following:         <ul> <li>Cardiac or pulmonary disorders (including bronchopulmonary dysplasia, cystic fibrosis and asthma)</li> <li>Diabetes mellitus and other metabolic diseases</li> <li>Cancer, immune compromising conditions (due to underlying disease and/or therapy)</li> <li>Renal disease</li> <li>Anemia or hemoglobinopathy</li> <li>Conditions that compromise the management of respiratory secretions and are associated with an increased risk of aspiration</li> </ul> </li> <li>Only specific to Influenza: Undergoing treatment for long periods with acetylsalicylic acid, because of potential increase of Reye Syndrome associated with Influenza</li> </ul> <li>Healthy pregnant women - *especially those in third trimester and women up to four weeks post-partum regardless of how pregnancy ended</li> <li>First Nations, Métis and Inuit peoples</li> <li>Individuals greater than 65 years of age</li> <li>All children less than 5 years of age</li> <li>Children and adolescents (age 6 months to 18 years) with the following: neurologic or neurodevelopment conditions (including seizure disorders, febrile seizures and isolated developmental delay)</li>							



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VIRUS	COVID -19						
INCUBATION PERIOD	Current estimates range from 1-14 days with median estimates of 5-6 days between infection and onset of clinical symptoms of disease						
	ONE symptom in Category A  A	ONE or MORE symptoms in Category B should be considered symptomatic  B					
SYMPTOMS	<ul> <li>Fever/chills</li> <li>Cough</li> <li>Sore throat/hoarse voice</li> <li>Shortness of breath/breathing difficulty</li> <li>Loss of taste/smell</li> <li>Vomiting or diarrhea for more than 24 hours</li> <li>Multisystem inflammatory syndrome (MIS-C) features of Kawasaki Disease</li> </ul>	or	<ul> <li>Runny nose</li> <li>Muscle aches</li> <li>Fatigue</li> <li>Skin rash of unknown cause</li> <li>nausea or loss of appetite</li> <li>poor feeding (in an infant)</li> </ul>				
PERIOD OF COMMUNICABILITY	48 hours prior to the development of overt symptoms; assumed no longer communicable 10 days after onset of illness, as long as afebrile and have improved clinically						
TRANSMISSION	Refer to above <u>Transmission</u> section for Respiratory viruses						
DURATION OF PRECAUTIONS	Refer to Testing and Clearance - Acute, Long Term and Home Care						
PEOPLE AT HIGH RISK OF RESPIRATORY VIRUS-RELATED COMPLICATIONS	<ul> <li>Cystic fibrosis</li> <li>Dementia or other neurological conditions</li> <li>Diabetes (type 1 or 2)</li> <li>Epilepsy</li> <li>Substance use disorders</li> <li>Interstitial lung disease</li> <li>Pregnancy</li> <li>Pulmonary hypertension</li> <li>Smoking, current or former</li> <li>Cancer</li> <li>Patients with certain medical and/or social vulnerabilities, including peopulations</li> <li>Substances regularly, people experience cognitive disabilities, mental heads</li> </ul>	Chronic lung disease Chronic kidney and end-stage disease Down syndrome HIV infection Immunocompromised state Motor neuron diseases *Overweight and obesity Solid organ or stem cell transplant Sickle cell disease or thalassemia Heart conditions such as heart failure, coronary disease, cardiomyopathies or hypertension  In people experiencing intellectual and developmental disabilities, persons who use the ental health conditions or experiencing homelessness or are unhoused, may make it ton symptom progression. These patients need closer attention and monitoring.					