



# CARING FOR SICK PEOPLE AT HOME

## What is pandemic flu?

Pandemic flu means that a new strain of influenza has spread all over the world and is affecting a large number of people. During a pandemic, healthcare facilities will be very busy. In many cases, people sick with pandemic influenza can be cared for at home. The information provided here will help you protect yourself when caring for someone who is sick, and give you the information you need to help the sick person recover.

## The following guidelines will help you care for someone who is sick:

- **Rest in bed.** Rest helps restore energy and strengthens the immune system, helping fight illness and speed recover.
- **Drink plenty of fluids.** Preventing dehydration is one of the most important things you can do to treat influenza. To prevent dehydration you can buy electrolyte drinks (sports drinks) at the pharmacy or grocery store or make your own. If the person can eat, plain water is good for hydration.
- **Controlling fever can reduce fluid loss.** Keeping a fever low (acetaminophen or ibuprofen) can help a loved one feel better and reduce the risk of dehydration. Do not give aspirin to anyone younger than 20. But other than increasing the risk of dehydration, even a very high fever of 104 or 105 will do no harm. The body is too smart to hurt itself,
- **Keep a record of vital signs.** A record of temperature, blood pressure and pulse, along with general observations regarding breathing difficulties, bathroom trips and fluid intake, can be helpful as you care for a loved one.

## ► Caregivers should wash hands thoroughly after providing care!

Refer to the following pages for more detailed information regarding:

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# KEEPING YOURSELF AND OTHER FAMILY MEMBERS FROM GETTING SICK

Although caring for a person with influenza may increase your risk of getting sick, there are things you and your family can do to reduce that risk.

- **Avoid direct contact.** Avoid being near the sick person's face as much as you can.
- **Wear a mask.** If you are within three feet of the person, and N95 mask is recommended. If this type of mask is not available, a surgical mask or even a homemade mask is recommended. Instructions for creation of a homemade mask from heavy duty T-shirt material can be found on the following webpage: <http://www.cdc.gov/ncidod/EID/vol12no06/05-1468-G.htm> . Any sort of cloth over the face may provide some protection.
- **Keep others away from the sick person.** Minimize the number of people who have contact with the sick person. Only those providing care should be in close contact.
- **Wash hands thoroughly and often!** Wash your hand thoroughly after providing care. If available, wear protective gloves when providing care. Even if you use gloves, wash your hands after providing care.
- **Avoid touching your eyes and mouth.** Don't touch your eyes or mouth without washing your hands first.
- **Wear protective clothing.** Wear a dressing gown (robe) or other removable clothing when caring to the sick person. Remove the outer clothing before leaving the room.
- **Keep sick family members separated.** If more than one person in the household is sick with pandemic influenza, it will be easiest to provide care for them in the same room.



# KEEPING A SICK PERSON CLEAN AND PREVENTING BED SORES

**If a person becomes wet or soiled because they cannot make it to the bathroom, their sheets and blankets will need to be changed and their skin cleaned and dried. For a sick adult, this is easier for two caregivers, but one person can do it.**

1. Put on rubber, vinyl or latex gloves.
2. Roll the patient on their side and clean the patient's skin.
3. Loosen the sheets on the side of the bed, at the patient's back, and at the foot and head of the bed and roll the sheets towards them as close to them as possible.
4. Roll the patient to the other side and remove the sheets and blankets.
5. Use the same process to put new sheets under the patients.
6. Avoid trying to pull the sheet under a person because this could damage skin.

**Patients who are very sick and weak are often not able to turn over in bed or re-position themselves. Patients need to be carefully turned every two hours to prevent bed sores caused from the pressure of lying in the same position for too long. Patients should be turned from side to back to side.**

1. Reach across the person grasping the blankets or sheets that are under the person and pull them toward you, rolling the person on his or her side.
2. Use pillows or folded blankets to help "prop" the patient into the desired position.
3. Position the arms and legs in a way that looks comfortable to you, making sure they are not pinned under or causing bony areas to rest against other bony areas.



# PREVENTING DEHYDRATION

**Dehydration occurs when people lose more water than they take in. Dehydration can be a serious condition. It's very important to make sure a person sick with influenza is drinking enough liquids.**

## What should they drink?

Fluid loss includes both water and salts, so if a person is not eating, giving solutions with salts and sugars is best. Juice is a good example. Pedialyte or other commercial hydration solutions can be used. If these are not available, solutions can be made with ingredients in the home.

- 1 quart of water
- 1 teaspoon of salt
- 8 teaspoons of sugar
- 1/3 teaspoon of baking soda

## *How much should they drink?*

Adults – Minimum of 1½ to 2 quarts per day

Kids:

- 10 lb. child – Minimum 1 pint per day
- 20 lb. child – Minimum 1 quart per day
- 30 lb. child – Minimum 1¼ quarts per day
- 40 lb. child – Minimum 1½ quarts per day

If the person has a fever, he or she will need more (up to 50% more.)

**Don't be afraid to give more!**

If water is all that is available, or all that the person will accept, give them water.

## What if they need help to drink?

1. Raise the head of the bed or assist the person to sit up in bed.
2. Assist the person to sip small amounts of liquid. Offer something to drink often.
3. Monitor how much they are drinking. If a child is drinking less than the amount recommended in the gray box above or an adult is drinking less than 1½ quarts per day (more if they have a fever), you'll need to watch closely for dehydration.

→ If the patient is unconscious and cannot swallow, do NOT try giving them fluids! Call a health-care professional for help.

## How do I know if they are dehydrated?

To test for dehydration, consider the following:

- Is the person drinking the recommended minimum amount of fluids?
- Look inside the person's mouth and see if it is dry.
- Look at the eyes and inside the lower lids and see if they are moist or dry.
- Feel in the armpit or in the groin area for sweat moisture.
- Gently pinch and pull up an area of loose skin (e.g., back of the hand.) When released, the skin should return to position quickly, not slowly. You can compare to your own skin.
- Is the person going to the bathroom (making urine) several times per day?

If the person seems very dry, contact their doctor or health-care professional for advice and help.



# MANAGING FEVER

**Fever is an expected symptom of influenza. In fact, fever is part of the body's defense mechanism against the infection and helps to kill the virus. Fever associated with influenza will not reach high enough to be an emergency (106° or higher). But fever will increase the loss of liquids and if the person is not taking in enough fluids, he or she can become dehydrated faster. Lowering a fever also will make a person more comfortable. The fever should always be reduced in a pregnant woman.**

## Reducing Fever

- Give plenty of fluids
- Give acetaminophen (for example: Tylenol®) or ibuprofen (for example: Advil®). Do not give aspirin to anyone younger than 20. Pregnant women should take acetaminophen rather than ibuprofen or aspirin.
- A sponge bath with lukewarm water can provide comfort. Do not use cold water, which can cause shivering and make the fever worse.

Continue to monitor. Keeping a record of the person's temperature can be helpful.



# PROVIDING ESSENTIAL MEDICATIONS

**People who are sick with influenza should continue to take medications that have been prescribed to them as long as they are alert. Follow these guidelines:**

- If the person has a hard time swallowing pills, most pills can be crushed or capsules opened and put in a small amount of food. Check the information on the bottle. If the bottle says not to crush it, don't crush it.
- Know which medications are essential and which aren't. If a patient is alert, they can tell you. Otherwise, general knowledge of the person's medical history is helpful.

## **Special information for those with diabetes:**

Insulin and diabetes pills can pose a special problem if the person is not eating or not eating normally. Giving the usual dose of medicine to lower blood sugar may be too much if the person isn't eating much. However, not giving any diabetes medicine may result in very high blood sugar which impairs the body's ability to fight the infection and causes the body to lose more fluids. In addition, some people with diabetes cannot make any insulin and will die if they don't receive some insulin by injection.

Home glucose monitoring (testing the blood sugar) will be very helpful. Blood sugars should optimally be kept around 150 to 200 and should be checked three or four times a day if possible. Attempting tighter control (that is, lower blood sugars) may be a problem if the person is not very alert. They won't be able to let you know if they have a reaction and they may have difficulty eating food to get their blood sugar back up. Even in the hospital, blood sugar levels can be difficult to manage, so professional help may be needed if the blood sugar level is staying too low (e.g., less than 60) or way too high (more than 300). Blood sugars less than 40 are dangerous and must be raised immediately.

If you cannot do home glucose monitoring at home and no professional help is available, it may be possible to monitor urine for sugar with strips from the pharmacy for those people with diabetes who are not on insulin. By letting the person get rid of some sugar in their urine, but not a large amount, the person may be able to stay out of trouble until they resume a diet which allows them to take their full medication dose. Using this method requires being able to catch some urine to test it, and offers little useful information for people on insulin whose blood sugar level rises or falls rapidly. Be aware that the more sugar there is in the urine, the faster the person will dehydrate.



# WHEN TO ASK FOR HELP

**Because health-care resources will be limited during a pandemic, those people who can be cared for at home will need to stay at home. However, some people will simply be too sick to be cared for at home. While it is not possible to describe every circumstance, the following are some guidelines for when you might want to seek health care.**

- Has not been able to drink any or very little fluids for two days.
- Seems very dehydrated. (see page 4 for more information)
- Does not respond when spoken to or touched and cannot be woken up.
- Has other serious health conditions (heart disease, transplant patients, severe high blood pressure, severe asthma) and cannot take their medication.
- Has diabetes and is not eating much, is on insulin and blood sugar cannot be monitored at home.
- Person is turning blue or having difficulties breathing.
- Very high blood pressure or very low blood pressure (if checked at home.) For example, an adult with a top number of more than 180 or a bottom number more than 110. Similarly, a top number less than 80 would be too low for almost all people.
- Flu symptoms that seem to get better for a day or longer, then the person worsens with fever and cough.
- Pain or pressure in the chest or belly.
- A child who is so irritable they do not want to be held.
- Sudden dizziness.
- Severe or persistent vomiting.

During a pandemic, some people with influenza will develop life threatening problems completely unrelated to influenza such as heart attacks or asthma attacks. Even though health care will be limited, those people should still be evaluated immediately in an emergency room.

**If you are concerned that the event is life threatening, call 9-1-1!**

You will be instructed on whether to take the patient to the hospital yourself or whether an ambulance is available to assist.



## ***Your loved one is being admitted into a*** **Minimum Care Facility – What do you need to know?**

This facility is called a minimum care facility. Your loved one is being admitted because he or she cannot be cared for at home right now and hospitals statewide are full.

For most patients, the treatment of influenza is supportive. That simply means the person needs a basic level of care to give them time to fight off the infection on their own. Fluids, turning, cleaning and other personal care provided by the caregivers in this facility will increase chances of survival. Although a licensed health-care provider is in charge of supervising all patient care in this facility, caregivers who provide most of the care are non-medical volunteers from your community.

The level of care in this facility is not the same as in a hospital. If space becomes available in the hospital, we will send your loved one there to be admitted. However, until there is room for all patients in the hospital, we will send those to the hospital first who are most likely to benefit from hospital care. If your loved one improves enough to be cared for at home, we will ask you to take him or her home to make room for other patients.

The vast majority of patients are expected to survive, but unfortunately this illness can be severe, and some patients may not be able to fight off the infection. If staff members know in advance that your loved one is not likely to live, you will be contacted and given the option of taking him or her home so that you can be together. Those who are dying and remain in the facility will be given such comfort care as is available. If your loved one dies in the facility, you will be notified before he or she is moved to the community morgue.

Patients who are alert may request that they be discharged home; however, our ability to comply will depend on the availability of a family or friend to come and get them. If your loved one is not alert and you are the guardian or next of kin, you have the right to request that your loved one be discharged to your care at any time.

### **Help Your Community – Volunteer!**

This facility needs volunteers in order to function and provide valuable care. If you are able to help, please let us know by calling [REDACTED]. This facility needs people to do many types of jobs, but it especially needs people willing to care of the sick. If you volunteer, you will be trained how to keep yourself well, and you will be provided with a respirator that can be worn in the facility to protect you from breathing in the virus. However, even with the training and protective equipment, you may be at increased risk of becoming sick. If you volunteer and have a loved one in the facility, you will be expected to care for other patients in addition to your family member without preferential treatment to any.

### **Visitation**

Influenza is a contagious disease, meaning it can be easily passed from person to person. Because of the risk of spreading the disease, this facility is closed to visitors. Only staff and volunteers are allowed inside the facility. This applies to parents of sick children as well. If you would like to help provide care for your child, you will need to volunteer and help care for others as well.

**IMPORTANT** – It is possible that when you leave your loved one at this facility, that you will not see him or her alive again. Family members need to be prepared for the possibility that their loved one may die while in the minimum care facility. Family members will not be allowed in the facility even under these tragic circumstances. We realize that this will be very difficult for family members, but we cannot risk more illness and death by allowing anyone but patients and volunteers into the facility.

### **Checking on a Patient**

At the time you bring your loved one to the facility, you will be provided with a patient number representing your family member. Information about your loved one will be made available on this website:





[www.abcdefghijklmnopqrstuvwxy](http://www.abcdefghijklmnopqrstuvwxy). By finding the patient number for your loved one on the website, you will be able to learn about their condition. This information will be updated about every 12 hours. The facility will not have sufficient staff to provide telephone reports, so this will be your primary source of information.

The information provided will include the patient's status. They are explained below.

- Undetermined: Patient is waiting physician and/or assessment.
- Good: Vital signs are stable and within normal limits. Patient is conscious and comfortable. Indicators are excellent.
- Fair: Vital signs are stable and within normal limits. Patient is conscious but may be uncomfortable. Indicators are favorable.
- Serious: Vital signs may be unstable and not within normal limits. Patient is acutely ill. Indicators are questionable.
- Critical: Vital signs are unstable and not within normal limits. Patient may be unconscious. Indicators are unfavorable.

The status of a patient also may be listed as "palliative." This means that the person is not expected to survive, but is receiving comfort care. If at all possible, you will receive notice that your loved one is not expected to survive before you see this condition posted on the website.

Please do not ask volunteers about your loved one. Those providing care will be extremely tired during their hours off duty and must be allowed to rest. In addition, they are bound by the confidentiality laws of the state of North Dakota and have been instructed not to provide any information about patients in the facility. This is to protect them and protect the confidentiality of the patients.

## Patient Care

It is important to remember that this facility is NOT a hospital or normal clinic. The facility is under the direction of a medical director, but most of the staff will be volunteers.

Patients will be given a lot of "mom" care, meaning:

- Hydration – This may include an IV or a tube in the stomach if the patient cannot swallow.
- Hygiene – This includes keeping the patient clean and changing bed linens.
- Medication – This will be limited to medication critical to life. (This facility does not have a pharmacy. Families should bring prescriptions to the facility when patient is admitted.)
- Nutrition – Patients who cannot swallow will not be provided nutrition other than a solution containing sugar. Once the person is alert enough to keep food from going into their lungs during swallowing, he or she will be fed or discharged to be cared for at home.

## Personal Belongings

Families should bring the following when a patient is admitted:

- Medications and medical supplies patient will need (except controlled substances such as prescription pain killers)
- Mobility aids (wheelchairs, canes, etc.)
- Family contact information

Families should NOT bring:

- Personal items (Religious items such as a bible will be allowed, but we cannot guarantee their return.)
- Cell phones

Please Note: Insurance information is not needed. All services provided by this facility are FREE.

## We Need Your Help!



We need your help to stop the spread of pandemic influenza. Follow these simple steps to keep from spreading germs:

**NORTH DAKOTA**  
DEPARTMENT of HEALTH

- Cover your coughs and sneezes and wash your hands frequently.
- Stay away from sick people as much as possible.
- If you are sick, stay away from others as much as possible.

