

Acute Viral Gastroenteritis Outbreak Recommendations for Long-Term Care Facilities

COVER SHEET

This guidance was created by the Alameda County Public Health Department (ACPHD) and is intended for use by long-term care facilities (LTCF) for the management and containment of norovirus/viral gastroenteritis outbreaks. More detailed guidance is available on the [California Department of Public Health \(CDPH\) website](#). Report all suspected or confirmed norovirus/viral gastroenteritis outbreaks to Alameda County Public Health Department by calling (510) 267-3250. To report on evenings, weekends and holidays, call Alameda County Dispatch at (925) 422-7595 and ask to speak with the On Call Public Health Duty Officer. If your facility is experiencing a suspected or confirmed norovirus/viral gastroenteritis outbreak, review the following information and implement this guidance.

- [Norovirus/Viral Gastroenteritis Recommendations Checklist for Facilities](#) (ACPHD, 2025)
- [Recommendations for the Prevention and Control of Viral Gastroenteritis Outbreaks in California Long-Term Care Facilities](#) (CDPH, 2006)
- [Line List of New Cases](#), to be sent in daily (ACPHD, 2025)
- [Stool Specimen Collection Instructions](#) (ACPHD, 2025)
- [Norovirus Outbreak Specimen Submittal Form](#) (CDPH, 2011)
- [Interfacility Infection Control Transfer Form](#) (ACPHD, 2025)
- Norovirus Clean-Up and Disinfection Infographics (Somerset County Public Health Department, 2015)
 - Cleaning and disinfection after a vomiting or diarrhea incident, [English](#) and [Spanish](#)
 - General cleaning and disinfection during an outbreak, [English](#) and [Spanish](#)
- [Cleaning and Disinfection Instructions](#) (ACPHD, 2025)
- [Handwashing and Approved Disinfectants](#) (ACPHD, 2025)
- [Norovirus: What You Need to Know](#), information for staff, residents and their families (CDPH, 2025)
- Norovirus Facts for Food Workers in [English](#) and [Spanish](#), for facility food service staff (CDC, 2024)

Please return the following via fax to (510) 273-3744 or by secure encrypted email to AcuteCD@acgov.org:

- A copy of the floor plan of your facility with room numbers
- Completed [Line List](#), to be submitted daily

Note: Privacy Rule (HIPAA) permits covered entities to disclose PHI without authorization to public health authorities or other entities who are legally authorized to receive such reports for the purpose of preventing or controlling disease. This includes the reporting of disease, conducting public surveillance, investigations, or interventions.

Norovirus/Viral Gastroenteritis Recommendations Checklist for Facilities

This checklist is to be used to implement outbreak control, in supplementation to
“[Recommendations for the Prevention and Control of Viral Gastroenteritis Outbreaks](#) (CDPH, 2006)”

Recommendations
Surveillance and Reporting
Instruct residents and staff to immediately report symptoms of vomiting or diarrhea to the facility infection preventionist or a facility designee.
An outbreak of viral gastroenteritis should be suspected when two or more residents and/or staff develop new onset of acute vomiting and/or diarrhea within one to two days.
As soon as an outbreak is suspected, report the outbreak to ACPHD and your licensing office. - Report to ACPHD by phone at (510) 267-3250. If calling in the evening or on weekends or holidays, call Alameda County Dispatch at (925) 422-7595 and ask to speak with the On Call Public Health Duty Officer. - Facilities licensed by CDPH Licensing and Certification must report outbreaks to the East Bay District Office. - Facilities licensed by CDSS must report outbreaks to Community Care Licensing and Certification Regional Office: (510) 286-4201 and CCLASCPOaklandRO@dss.ca.gov
During an active outbreak, facilities must send a complete line list to ACPDH via fax to (510) 273-3744 or secure encrypted email to AcuteCD@acgov.org on a daily basis to report all newly symptomatic residents and staff. If there are no new illnesses to report, check the “No New Illnesses” box.
As soon as a viral gastroenteritis outbreak is suspected, in addition to notifying ACPHD and Licensing, notify key stakeholders including the facility infection preventionist, administrator, medical director, health services director, staff, primary care providers of residents, and the residents, family, and visitors.
Post a notification at the facility entrance notifying visitors that the facility is experiencing a gastroenteritis outbreak and instructing them not to enter if they have recently had symptoms of vomiting and/or diarrhea.
Distribute norovirus/gastroenteritis prevention information to staff, residents, their families, and visitors. Distribute norovirus/gastroenteritis fact sheet for food workers to food service staff, available in English and Spanish .
Limit transmission when initial case of viral gastroenteritis is suspected
Limit new admission while the outbreak is active. If new admissions are necessary, admit to an unaffected unit or to a unit that has had no new cases for at least 2 days.
Cancel or postpone group activities, including group dining, until at least 48 hours after the last case is identified.
Any ill residents/staff with symptoms of viral gastroenteritis (vomiting or 2 or more episodes of acute diarrhea within 24 hours) should immediately report the symptoms to their supervisor or nurse. New cases of viral gastroenteritis must be reported to the facility infection preventionist or designee, tracked on the line list , and send to ACPHD on a daily basis.
Ill residents should remain in their rooms, including eating in their rooms, for at least 48 hours after they no longer have vomiting or diarrhea .
Ill staff, visitors, and volunteers should stay home for 24 hours after they no longer have vomiting or diarrhea . Ill staff should not work at another facility.
Ill staff should be allowed to return to work after being symptom-free for at least 24 hours. Because virus may be excreted in the stool for 2 or more weeks, the need for good hand hygiene should be stressed to staff returning from illness.
Visits to symptomatic residents should be discouraged. If visitation is necessary, health care workers should instruct visitors on the appropriate procedure for putting on and removing gowns, gloves, masks/eye protection (if resident is vomiting) and should be educated on hand hygiene.
Try to establish the diagnosis through laboratory testing in at least 4 residents. Contact the Communicable Disease Unit to arrange for specimen collection kits and pick up at (510) 267-3250. Please use the attached “ Norovirus Outbreak Specimen Submittal Form ” and “ Stool Specimen Collection Instructions ”.
If a resident is sent to the hospital or transferred to another facility, notify transporters and hospital/facility that an acute gastroenteritis outbreak is underway in your facility and use the “ Interfacility Infection Control Transfer Form ”.

Begin control measures when a viral gastroenteritis outbreak is suspected without waiting for diagnostic confirmation

Wear gloves and gown when entering room and providing care to ill residents. Use face mask and eye protection if there is the possibility of sprays or splashes (i.e., active vomiting, diarrhea).

Environmental services staff must wear gloves, gown, eye protection, facemask and shoe covers when cleaning up vomit or fecal spillages.

Remove PPE before leaving the residents room and wash hands with soap and water immediately. After hand washing, ensure that hands do not touch potentially contaminated environmental surfaces/items.

Use disposable absorbent materials, soap and water, and a freshly prepared bleach solution to clean and disinfect surfaces contaminated with feces or vomit. See the attached "[Clean up and Disinfection for Norovirus](#)" and "[Cleaning and Disinfection Instructions](#)" for detailed guidance. Allow surfaces to remain wet with bleach solution for at least 5 minutes when disinfecting. A bleach solution should be used for disinfection whenever possible. If bleach cannot be used, then a product from [EPA List G](#) may be used, however these products may not be as effective as bleach, even with EPA approval.

Increase the frequency of routine cleaning and disinfection to at least twice per shift. Pay special attention to bathrooms and objects that are frequently touched like sinks, faucets, showers, bath rails, toilets, handrails, door handles, phones, chairs, tables, light switches, elevator buttons, and keyboards. See attached "[Prevent the Spread of Norovirus](#)" and "[Cleaning and Disinfection Instructions](#)".

Encourage frequent hand hygiene for residents, staff, visitors and volunteers. **Hand sanitizer is ineffective for Norovirus.** Wash hands with soap and water whenever possible. Alcohol-based hand sanitizer may be used if hands are not visibly soiled. See attached "[Handwashing and Approved Disinfectants Effective Against Norovirus](#)".

Discontinue "floating" staff between affected and unaffected units, if possible.

Minimize movement of residents. Residents should **not** be moved from an affected to an unaffected unit.

Maintain the same staff to resident assignments, if possible. Plan care from non-ill residents to ill residents.

Exclude non-essential personnel from affected units.

Dedicate the use of patient-care equipment to a single resident. If the use of shared equipment or items is unavoidable, then adequately clean and disinfect equipment between uses. See the attached "[Handwashing and Approved Disinfectants Effective Against Norovirus](#)".

Alameda County Department of Environmental Health must be notified if food handlers (e.g. kitchen workers, staff assisting with feeding meals) are ill with vomiting and/or diarrhea. Contact ACPHD at (510) 267-3250, to facilitate notification of the Department of Environmental Health.

Assessing Outbreak Control Measures

When there have been no new residents or staff with new onset of vomiting or diarrhea for at least 4 days, it is reasonable to consider the viral gastroenteritis outbreak resolved. If a pathogen other than norovirus is identified as the cause of the outbreak, resolution of the outbreak will be determined in consultation with ACPHD on a case-by-case basis and will vary depending on the pathogen identified.

A staff member from ACPHD will notify you when the outbreak investigation has concluded and you may discontinue sending the daily line list.

Norovirus and other viruses that cause gastroenteritis can survive on surfaces and be shed in the stool for several weeks after symptoms resolve, so it is important to practice good hand hygiene and environmental cleaning and disinfection even after the outbreak resolves.

Line List for Facilities

Name of Facility: _____ Today's Date: _____ ☐ No new illness to report today

Identification					Illness Description									Risk Factors		Laboratory Test			Illness Outcome		
Name	Staff or Resident (S/R)	Unit	Age	Sex	Onset date of symptoms	Date of last symptoms	Diarrhea x2 w/1 24 hr (Y/N)	Bloody diarrhea (Y/N)	Vomiting (Y/N)	Nausea (Y/N)	Abdominal cramps (Y/N)	Fever > 100.4 (Y/N)	Headache (Y/N)	Other	Pregnant (Y/N)	Immune Compromised (Y/N)	Specimen tested (Y/N)	Specimen type (stool, vomitus)	Positive Norovirus (Y/N)	Hospitalized / Death (H/D)	Comments (antiemetic, antibiotics, etc.)

**STOOL SPECIMEN
COLLECTION INSTRUCTIONS
Dry Container**

1. Remember where everything goes in the bag when you receive it. When you are done, they need to go back the same way you found them. The specimen container goes in the ziplock pocket that gets zipped closed.
2. Remove the specimen container from the plastic bag when you are ready to collect stool. **WRITE YOUR NAME, DOB, SEX AND COLLECTION DATE AND TIME ON THE CONTAINER FIRST.**
3. When you have a bowel movement, catch the stool in the disposable toilet hat provided. You can also stretch a loose piece of plastic wrap across the toilet bowl under the seat. Make sure the plastic wrap sags in the middle; don't make it tight! The sample **CANNOT** be scooped from the toilet.
4. Use the tongue depressor in the bag to collect a small amount of stool. Place the stool in the **DRY** container. **CLOSE THE CONTAINER TIGHTLY.** If there is no tongue depressor, use a disposable plastic spoon to scoop the poop.
5. Put everything back into the plastic bag in the way it was when you got it (specimen inside the sealed ziplock bag).
6. Store the specimen in a **COOL, DRY PLACE** away from sunlight (like the garage, refrigerator, or closet). **DO NOT PUT IN THE FREEZER.**
7. **Facility Staff only:** Complete the Norovirus Outbreak Lab Submittal Form (2 pages) when all specimens have been collected and call the Acute Communicable Disease Section at (510) 267-3250 by noon to arrange for pick-up and delivery to the Public Health Lab.

California Department of Public Health – Viral and Rickettsial Disease Laboratory

NOROVIRUS OUTBREAK SPECIMEN SUBMITTAL FORM

Both sides of this submittal form must be completed and sent with the samples for Norovirus testing.

Name of institution: _____

Type of institution/setting (e.g. long term care facility, school, camp, restaurant, cruise ship, catered event, etc): _____

Number of residents/students/population-at-risk (current census): _____

Number of staff at-risk (current census): _____

Date of first case: _____ / _____ / _____

Date of last case: _____ / _____ / _____

Suspected source: Food-borne Water-borne Person-to-person Imported/travel Unknown

If source identified, note any additional information available: _____

Total number of clinical cases: _____ Number of cases hospitalized: _____ Number of cases who died: _____

Total number of cases tested: _____ Total number of laboratory-confirmed cases: _____

Tested for bacteria? Yes No Results: _____

Tested for ova and parasites? Yes No Results: _____

* Outbreaks of any disease are reportable under the Title 17, California Code of Regulations. Please communicate with your local communicable disease control unit to ensure that any norovirus outbreaks are reported to the California Department of Public Health Statistics and Surveillance Section.

Instructions for Submitting Stool Samples

Note that while vomitus may contain high norovirus titers, our PCR has only been validated to test stool samples.

Timing

Ideally stool specimens should be obtained during the acute phase of illness (within 48-72 hours of diarrhea onset) while the stools are still liquid or semisolid because the level of excretion is greatest then. The increased sensitivity of molecular assays (PCR) often allows the virus to be detected in stools collected up to 7-10 days after onset. For specimens collected late in the illness, the utility of viral diagnosis and interpretation of the test results should be discussed with laboratory personnel before tests are conducted.

Number of Samples

For meaningful laboratory results (see interpretation below) specimens from a minimum of four (4) and preferably more, up to a maximum of ten (10) ill persons should be obtained during the acute phase of illness. The greater the number of stool samples submitted (up to a maximum of 10), the more meaningful the test results.

- A single stool sample will not be tested since neither a positive nor negative result will be meaningful.
- Testing of asymptomatic cases is not encouraged without prior consultation.

Storage and Transportation

Stool specimens should be kept refrigerated at 4°C until they can be sent to the laboratory. Samples stored at this temperature can be kept for 2-3 weeks without compromising diagnostic yield. Samples should be frozen if they cannot be shipped to the laboratory within 3 weeks.

Interpretation of Results

Note: norovirus PCR testing is intended for use primarily as laboratory support for epidemiological investigations. We recommend that the following interpretative guidelines be used to evaluate laboratory PCR results:

- POSITIVE - Norovirus can be considered to be the etiologic agent if norovirus nucleic acid is detected in two (2) or more stools per outbreak.
- NEGATIVE - To be considered negative for Norovirus, at least four (4) or more acute stool samples (all collected with 7-10 days of onset of diarrhea) must be submitted and all must be negative for norovirus nucleic acid.
- INCONCLUSIVE – All other outcomes.

California Department of Public Health – Viral and Rickettsial Disease Laboratory

NOROVIRUS OUTBREAK SPECIMEN SUBMITTAL FORM

(Norovirus is the new genus name for “Norwalk-like” viruses and is a member of the Caliciviridae family of viruses)

Name of Facility

USE A SEPARATE FORM FOR EACH OUTBREAK

Patient Accession # (For VRDL Use Only)	Patient Name- Last, First	Sex M F	DOB	Date of Diarrhea	Date Stool Collected

Summary of Norovirus PCR Results

Number of stools where nucleic acid was DETECTED ==>	
Number of stools where nucleic acid was not detected ==>	
Number of stools with <u>inconclusive</u> PCR results =====>	
Number of stools <u>unsatisfactory</u> for testing =====>	

Report Date

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 Viral and Rickettsial Disease Laboratory
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Clean-up and Disinfection for Norovirus ("Stomach Bug")

THESE DIRECTIONS SHOULD BE USED TO RESPOND TO ANY VOMITING OR DIARRHEA ACCIDENT

Note: Anything that has been in contact with vomit and diarrhea should be discarded or disinfected.

1 Clean up

a. Remove vomit or diarrhea right away!

- Wearing protective clothing, such as disposable gloves, apron and/or mask, wipe up vomit or diarrhea with paper towels
- Use kitty litter, baking soda or other absorbent material on carpets and upholstery to absorb liquid; do not vacuum material: pick up using paper towels
- Dispose of paper towel/waste in a plastic trash bag or biohazard bag

b. Use soapy water to wash surfaces that contacted vomit or diarrhea and all nearby high-touch surfaces, such as door knobs and toilet handles

c. Rinse thoroughly with plain water

d. Wipe dry with paper towels

DON'T STOP HERE: GERMS CAN REMAIN ON SURFACES EVEN AFTER CLEANING!

2 Disinfect surfaces by applying a chlorine bleach solution

Steam cleaning may be preferable for carpets and upholstery. Chlorine bleach could permanently stain these.

a. Prepare a chlorine bleach solution

Make bleach solutions fresh daily; keep out of reach of children; never mix bleach solution with other cleaners



IF HARD SURFACES ARE AFFECTED...

e.g., non-porous surfaces, vinyl, ceramic tile, sealed counter-tops, sinks, toilets

1/3 CUP BLEACH + 1 GALLON WATER

CONCENTRATION ~1000 ppm



IF POROUS SURFACES ARE AFFECTED...

e.g., wooden floors or unsealed concrete or natural stone surfaces

1 2/3 CUPS BLEACH + 1 GALLON WATER

CONCENTRATION ~5000 ppm



b. Air dry surfaces unlikely to have food or mouth contact

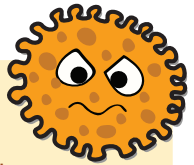
or...

c. Rinse all surfaces intended for food or mouth contact with plain water before use

3 Wash your hands thoroughly with soap and water

Hand sanitizers may not be effective against norovirus

Facts about Norovirus



Norovirus is the leading cause of outbreaks of diarrhea and vomiting in the US, and it spreads quickly.

Norovirus spreads by contact with an infected person or by touching a contaminated surface or eating contaminated food or drinking contaminated water. Norovirus particles can even float through the air and then settle on surfaces, spreading contamination

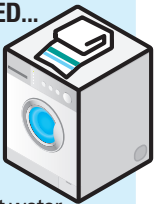
Norovirus particles are extremely small and billions of them are in the stool and vomit of infected people.

Any vomit or diarrhea may contain norovirus and should be treated as though it does.

People can transfer norovirus to others for at least three days after being sick.

IF CLOTHING OR OTHER FABRICS ARE AFFECTED...

- Remove and wash all clothing or fabric that may have touched vomit or diarrhea
- Machine wash these items with detergent, hot water and **bleach** if recommended, choosing the longest wash cycle
- Machine dry



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Scientific experts from the U.S. Centers for Disease Control and Prevention (CDC) helped to develop this poster. For more information on norovirus prevention, please see <http://www.cdc.gov/norovirus/preventing-infection.html>.



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Limpieza y desinfección para los norovirus (“gripe estomacal”)

ESTAS INDICACIONES DEBEN USARSE PARA REACCIONAR ANTE CUALQUIER ACCIDENTE DE VÓMITO O DIARREA.

Nota: Todo aquello que haya estado en contacto con el vómito o la diarrea debe descartarse o desinfectarse.

1 Limpie

a. Retire de inmediato el vómito o la diarrea.

- Use ropa protectora, como guantes desechables, delantal o máscara, limpie el vómito o la diarrea con toallas de papel.
- Use sepiolita, bicarbonato de sodio u otro material absorbente en las alfombras y los tapizados a fin de absorber el líquido; no aspire el material: recójalo con toallas de papel.
- Deseche las toallas de papel o los residuos en una bolsa de plástico para basura o en una bolsa para material biológico peligroso.

b. Use agua con jabón para lavar las superficies que estuvieron en contacto con el vómito o la diarrea y todas las superficies cercanas de contacto más frecuente, tales como las perillas de las puertas y las manijas de los sanitarios.

c. Enjuague cuidadosamente el piso solo con agua.

d. Seque frotando la superficie con toallas de papel.

NO SE DETENGA AQUÍ: los gérmenes pueden permanecer en las superficies incluso después de haberlas limpiado.

2 Desinfecte las superficies aplicando una solución de blanqueador con cloro

Para el caso de las alfombras y los tapizados, es posible que se prefiera la limpieza al vapor. El blanqueador con cloro podría dejarles manchas permanentes.

a. Prepare una solución de blanqueador con cloro.

Prepare una solución de blanqueador nueva cada día. Manténgala fuera del alcance de los niños. Nunca mezcle la solución de blanqueador con otros limpiadores.

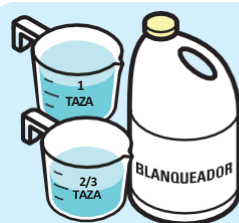


SI SE AFECTARON SUPERFICIES DURAS...

or ejemplo, superficies no porosas, vinilo, mosaicos de cerámica, encimeras selladas, lavabos e inodoros

$\frac{1}{3}$ TAZA DE BLANQUEADOR + 1 GALÓN DE AGUA

Concentración: ~1000 ppm



SI SE AFECTARON SUPERFICIES POROSAS...

Por ejemplo, pisos de madera o de cemento húmedo, o superficies de piedras naturales

$1 \frac{2}{3}$ TAZA DE BLANQUEADOR + 1 GALÓN DE AGUA

Concentración: ~5000 ppm



b. Ventile las superficies secas que probablemente no tengan contacto con la comida o la boca.

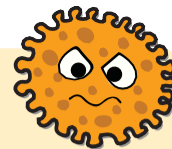
O...

c. Enjuague solo con agua todas las superficies destinadas a estar en contacto con la comida y la boca antes del uso.

3 Lávese minuciosamente las manos con agua y jabón

Es posible que los desinfectantes para las manos no sean eficaces para combatir los norovirus.

Datos sobre los norovirus



Los norovirus constituyen la causa principal de los brotes de diarrea y vómitos en Estados Unidos y se propagan con rapidez.

Los norovirus se contagian al estar en contacto con una persona infectada, al tocar una superficie contaminada, al consumir alimentos contaminados o al beber agua contaminada. Las partículas de los norovirus incluso pueden encontrarse suspendidas en el aire y luego establecerse en las superficies, expandiendo la contaminación.

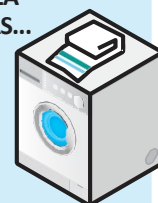
Las partículas de los norovirus son extremadamente pequeñas y miles de millones de ellas se encuentran en las heces o en el vómito de las personas infectadas.

Cualquier vómito o diarrea puede contener norovirus y debe tratarse como si así fuera.

Las personas pueden contagiar los norovirus a otras durante al menos tres días después de haber estado enfermas.

SI SE AFECTARON LA ROPA U OTRAS TELAS...

- Quite y lave toda la ropa o las telas que pueden haber estado en contacto con vómito o diarrea.



- Lave a máquina estos elementos con detergente, agua caliente y **blanqueador**, si fue recomendado, y elija siempre el ciclo de lavado más largo.

- Seque a máquina.

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Expertos científicos de los Centros para el Control y la Prevención de Enfermedades

(Centers for Disease Control and Prevention, CDC) de Estados Unidos ayudaron a crear este póster. Para obtener más información sobre la prevención de los norovirus, consulte <http://www.cdc.gov/norovirus/preventing-infection.html>.



Help Prevent the Spread of Norovirus ("Stomach Bug")

IF NOROVIRUS IS AFFECTING YOUR COMMUNITY, HERE ARE SOME ACTIONS YOU CAN TAKE TO HELP PREVENT FURTHER ILLNESS

1 Clean up surfaces

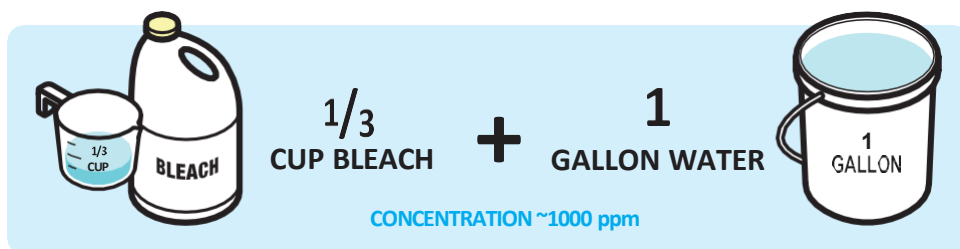
- Clean frequently touched surfaces with soapy water
- Rinse thoroughly with plain water
- Wipe dry with paper towels
- Dispose of paper towels

DON'T STOP HERE: GERMS CAN REMAIN ON SURFACES EVEN AFTER CLEANING!

2 Disinfect surfaces

- Prepare and apply a chlorine bleach solution

Make bleach solutions fresh daily; keep out of reach of children; never mix bleach solution with other cleaners



- Air dry surfaces unlikely to have food or mouth contact or...
- Rinse all surfaces intended for food or mouth contact with plain water before use

3 Wash your hands thoroughly with soap and water

Hand sanitizers may not be effective against norovirus



Facts about Norovirus

Norovirus is the leading cause of outbreaks of diarrhea and vomiting in the US, and it spreads quickly.

Norovirus spreads by contact with an infected person or by touching a contaminated surface or eating contaminated food or drinking contaminated water. Norovirus particles can even float through the air and then settle on surfaces, spreading contamination

Norovirus particles are extremely small and billions of them are in the stool and vomit of infected people.

Any vomit or diarrhea may contain norovirus and should be treated as though it does.

People can transfer norovirus to others for at least three days after being sick.

Scientific experts from the U.S. Centers for Disease Control and Prevention (CDC) helped to develop this poster. For more information on norovirus prevention, please see <http://www.cdc.gov/norovirus/preventing-infection.html>.



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Ayude a prevenir la propagación de los norovirus (“gripe estomacal”)

SI LOS NOROVIRUS ESTÁN AFECTANDO SU COMUNIDAD, AQUÍ LE PRESENTAMOS ALGUNAS MEDIDAS QUE PUEDE TOMAR PARA AYUDAR A PREVENIR ENFERMEDADES FUTURAS.

1 Limpie las superficies

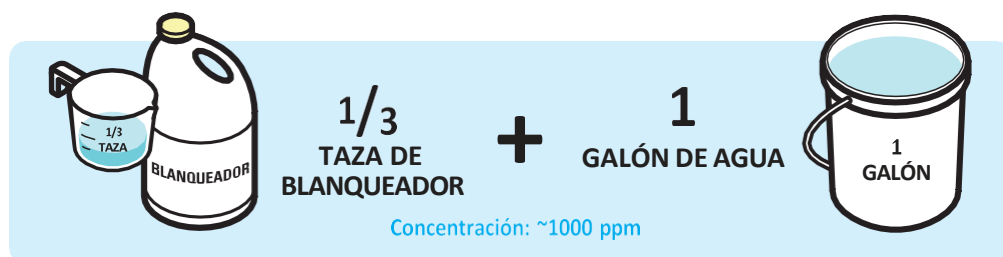
- Limpie las superficies de contacto más frecuente con agua y jabón.
- Enjuague cuidadosamente el piso solo con agua.
- Seque frotando la superficie con toallas de papel.
- Deseche las toallas de papel.

NO SE DETENGA AQUÍ: los gérmenes pueden permanecer en las superficies incluso después de haberlas limpiado.

2 Desinfecte las superficies

Prepare una solución de blanqueador nueva cada día. Manténgala fuera del alcance de los niños. Nunca mezcle la solución de blanqueador con otros limpiadores.

- Prepare y aplique una solución de blanqueador con cloro.



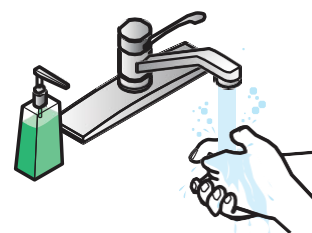
- Ventile las superficies secas que probablemente no tengan contacto con la comida o la boca.

O...

- Enjuague solo con agua todas las superficies destinadas a estar en contacto con la comida y la boca antes del uso.

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Cleaning and Disinfection Instructions

Items needed: disposable gloves, masks, gowns, eye protection, shoe covers, soap, water and regular 5.25% household bleach.

Making a bleach solution

1. Make fresh bleach solution each day in a well-ventilated area. Throw out unused solution at the end of each day.
2. Use an unopened or recently opened bottle of bleach. Bottles of bleach that have been opened more than 30 days are not as effective at killing germs.
3. For general cleaning and disinfection as well as disinfecting hard, non-porous surfaces after contamination with vomit/feces, use a 1000 ppm bleach solution (1/3 cup of 5.25% bleach mixed with 1 gallon water).
4. For disinfection of porous surfaces (wooden floors, unsealed concrete, natural stone surfaces) after contamination with vomit/feces, use a 5000 ppm bleach solution (1 and 2/3 cups of 5.25% bleach mixed with 1 gallon of water).
5. Do not mix bleach with any other chemicals.

Cleaning up stool and vomit and disinfecting the area

6. Wear gloves, gown, eye protection, shoe covers, and a mask when cleaning up vomit or stool.
7. Immediately use disposable absorbent material such as paper towels to clean up visible vomit and stool. Put soiled absorbent material into a plastic trash bag right away.
8. After cleaning up visible vomit and feces, use soap and water to wash and rinse the area, including the area within a 10-to-25-foot radius of where the vomiting or diarrhea incident occurred. Wipe dry with a paper towel and immediately dispose of all waste in a plastic trash bag or biohazard bag.
9. Spray the affected area, including the area within a 10-to-25 foot radius, with a fresh bleach solution and allow the area to remain wet for at least 5 minutes. Allow to air dry or rinse the area with clean water for food contact surfaces.
10. Use cleaning materials that can be thrown away after each use, if possible. If not, change bleach solution, mop head, or any other cleaning materials after each clean up. Do not use the same cleaning materials for different areas or floors.
11. Remove and dispose of PPE then wash hands immediately with soap and water.

General cleaning and disinfection of high-touch, non-porous (hard) surfaces

12. Clean the area with soap and water.
13. Spray the area with a fresh bleach solution and allow surface to remain wet for at least 5 minutes.
14. Allow to air dry or rinse the area with clean water for food contact surfaces.

Cleaning and disinfecting soft furnishings that can't be bleached

15. Carefully remove vomit or feces using absorbent materials and dispose of all waste in a plastic trash bag or biohazard bag.
16. Steam clean the area at a temperature of 158°F for five minutes or 212°F for one minute. **To minimize the aerosolization of viral particles, do not vacuum.**

Cleaning linens, clothing, and other machine-washable items

17. Wear gloves, gown, eye protection, shoe covers, and a mask when cleaning up linens contaminated with vomit or feces.
18. Linens dirty with vomit or feces should be double bagged and washed with detergent and hot water separate from other linens; use bleach if possible. Dry separately at a temperature of greater than 170°F. If item can't be cleaned, throw it away.
19. Remove and dispose of PPE then wash hands immediately with soap and water.

Frequency of cleaning and disinfection

20. During an outbreak, clean and disinfect the affected unit at least 2 times per 8-hour shift. Pay special attention to bathrooms, sinks, faucets, showers, bath rails, toilets, handrails, door handles, phones, chairs, tables, light switches, elevator buttons, keyboards, and other surfaces that are frequently touched.

Note: For staff who work at other facilities, remember to change your uniform and, if possible, shoes before working at a different location.

Handwashing and Approved Disinfectants Effective Against Norovirus

Handwashing Instructions

Hand sanitizers are not effective against Norovirus.

Handwashing is the best way to prevent spread. The proper way to wash your hands is as follows:

- Wet your hands with clean running water and apply soap. Use warm water if it is available.
- Rub hands together to make a lather and scrub all surfaces, making sure to clean between fingers and under fingernails.
- Continue rubbing hands for 20 seconds, or about the time it takes to sing the "ABC's"
- Rinse hands well under running water.
- Dry your hands using a paper towel or air dryer. If possible, use your paper towel to turn off the faucet.

If soap and water are not available, alcohol-based hand sanitizer may be used if hands are not visibly soiled.

See [CDC's handwashing website](#) for additional information.

Environmental Disinfection

All areas must be cleaned/removed of visible soil and debris prior to disinfection to ensure maximum effectiveness.

When cleaning up body fluids, wear a gown, disposable gloves, eye protection, shoe covers, and a mask that covers the mouth and nose. For other general cleaning wear disposable gloves.

Always discard used PPE in a plastic trash bag after removal. Immediately after removing gloves, thoroughly wash hands with soap and water. If soap and water are not available, alcohol-based hand sanitizer may be used if hands are not visibly soiled.

- 1) A fresh chlorine bleach solution is the disinfectant of choice. See the [Cleaning and Disinfection Instructions](#) for guidance on preparing a bleach solution. Allow surfaces to remain wet for at least 5 minutes then allow to air dry or rinse the area with clean water for food contact surfaces. If bleach cannot be used, then a product from [EPA List G](#) may be used, however these products may not be as effective as bleach, even with EPA approval.
- 2) Steam cleaning with a temperature of 158°F for five minutes or 212°F for one minute can be used on items that cannot be subjected to chemical disinfectants.

* If unable to use bleach, contact the Alameda County Department of Public Health's Communicable Disease Control Section at (510) 267-3250.