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**DEPARTMENT OF  
HEALTH AND HUMAN SERVICES**  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH  
*Helping people. It's who we are and what we do.*



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## Technical Bulletin

**Date:** December 29, 2021  
**Topic:** Updated COVID-19, Influenza and RSV  
**Contact:** Melissa Peek-Bullock, State Epidemiologist, Office of Public Health Investigations and Epidemiology  
**To:** Public Health Authorities, Health Care Providers and Long-Term Care Facilities

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### **Background:**

The season of respiratory viral infections typically begins in the fall and continues through the spring, with peak periods usually between December and February, but can vary each year. According to the Centers for Disease Control and Prevention (CDC) along with laboratory data received by the Nevada Department of Health and Human Services (DHHS) Division of Public and Behavioral Health (DPBH), it is likely that COVID-19, influenza and the respiratory syncytial virus (RSV) will be spreading at the same time and potentially at high rates and severity during the 2021-2022 respiratory virus season. Last influenza season was historically low nationwide and in Nevada due to precautions taken to prevent COVID-19. However, entering this season of influenza and other respiratory viral infections, many COVID-19 mitigation measures have been relaxed which is expected to result in increased respiratory illnesses, including COVID-19, influenza, and RSV. <sup>1</sup>

### **Symptoms and Transmission:**

Many symptoms of COVID-19, influenza and RSV are similar and may include:

- Fever or feeling feverish/having chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Sore throat
- Runny or stuffy nose
- Muscle pain or body aches
- Headache
- Vomiting and diarrhea
- Change in or loss of taste or smell, although this is more frequent with COVID-19.

All three respiratory viruses are spread from person-to-person among people who are in close contact with someone who is ill. Respiratory viruses are spread mainly by large and small particles that are expelled when people with the illness cough, sneeze or talk. These particles land in the mouths and noses of people who are in close proximity and may be inhaled into their lungs. Although most respiratory viruses are spread by inhalation, it may

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<sup>1</sup> <https://www.cdc.gov/flu/season/faq-flu-season-2021-2022.htm>

also be possible for people to become infected by touching a contaminated surface and then touching their own mouth, nose or eyes.<sup>23</sup>

Although these respiratory viruses are spread in similar ways, COVID-19 is thought to be more transmissible than influenza and RSV. While people of all ages are susceptible to RSV, infections in adults are typically less severe. Those at increased risk of severe disease include:

- Premature infants
- Infants 6 months of age and younger
- Young children with underlying medical conditions or compromised immune systems
- Older adults, especially those 65 years and older
- Adults with chronic heart or lung disease
- Adults with weakened immune systems

### **Testing:**

The only way to determine if a person is infected with COVID-19, influenza and/or RSV is to perform testing. There are many testing options for these respiratory viruses which include laboratory based molecular tests and rapid point-of-care tests. There is also a combination molecular test available to test for COVID-19 and influenza simultaneously.<sup>4</sup> It is possible for individuals to be infected with more than one respiratory virus at the same time. Testing options for these respiratory viruses include the following:

COVID-19:

- Molecular: <https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/in-vitro-diagnostics-euas-molecular-diagnostic-tests-sars-cov-2>
- Antigen: <https://www.fda.gov/medical-devices/coronavirus-disease-2019-covid-19-emergency-use-authorizations-medical-devices/in-vitro-diagnostics-euas-antigen-diagnostic-tests-sars-cov-2>

Influenza:

- <https://www.cdc.gov/flu/professionals/diagnosis/table-testing-methods.htm>

RSV:

- <https://www.cdc.gov/rsv/clinical/index.html>

### **Isolation/Exclusion Timelines:**

Every infectious disease has its own unique infectious period, transmissibility, and isolation period. Once laboratory identification has occurred to diagnose either COVID-19, influenza and/or RSV it is important for the infected person to remain isolated appropriately to protect others from being exposed to and contracting the respiratory viral infection.

- **COVID-19:**
  - General Public
    - Any individual who tests positive for COVID-19, regardless of whether they are symptomatic and regardless of vaccination status, must isolate at home for 5 days.
      - Day “0” for those with symptoms is the day that symptoms began. For those with asymptomatic infections, day “0” is the date of specimen collection for the positive test result.

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<sup>2</sup> <https://www.cdc.gov/flu/symptoms/flu-vs-covid19.htm>

<sup>3</sup> <https://www.cdc.gov/rsv/about/transmission.html>

<sup>4</sup> <https://www.cdc.gov/flu/symptoms/flu-vs-covid19.htm>

- Persons may leave their house after 5 days if they have no symptoms or if their symptoms are resolving\*.
- Persons should continue to wear a mask around others for 5 additional days.
- Some people with severe illness (e.g., requiring hospitalization, intensive care, or ventilation support) may produce replication-competent virus that may warrant extending the duration of isolation and precautions for up to 20 days after symptom onset.
- Health Care Personnel
  - CDC recommends three different strategies for addressing health care personnel who test positive for COVID-19, regardless of whether they are symptomatic and regardless of their vaccination status:
    - Conventional Strategy
      - Isolate for 10 days OR 7 days with a negative test, if asymptomatic or symptoms are resolving\*
    - Contingency Strategy
      - Isolate for 5 days with/without a negative test, if asymptomatic or symptoms are resolving\*
    - Crisis Strategy
      - No work restriction, with prioritization considerations (e.g., asymptomatic or symptoms are resolving\*)

\* Symptoms resolving is defined as at least 24 hours fever free without the use of fever-reducing medication and other symptoms are improving (loss of taste and smell might last for weeks or months after recovery but should not delay ending isolation)

- **Influenza:** Any individual who tests positive for influenza must isolate at home until fever are gone for at least 24 hours without the use of fever-reducing medications AND they are well enough to participate in routine activities.
- **RSV:** Any individual who tests positive for RSV must isolate at home until their fever is gone for at least 24 hours without the use of fever-reducing medications AND they are well enough to participate in routine activities.

### **Vaccination:**

Currently there is no vaccine to protect against RSV. However, both COVID-19 and influenza vaccination are readily available and are providing the best protection against these respiratory viruses and their potentially serious complications. Getting vaccinated combined with other mitigation measures not only protects those vaccinated and their close contacts, but also preserves our health care capacity by reducing the number of people that need medical attention related to complications.

- COVID-19 vaccines are available for those 5 years of age and older. Promotion of COVID-19 vaccine is crucial to controlling and eventually ending the current pandemic. It is also important to establish trust and confidence in the vaccine. More information regarding COVID-19 vaccine can be found here: [https://www.cdc.gov/coronavirus/2019-ncov/vaccines/keythingstoknow.html?s\\_cid=11626:cdc%20vaccine:sem.ga:p:RG:GM:gen:PTN.Grants:FY22](https://www.cdc.gov/coronavirus/2019-ncov/vaccines/keythingstoknow.html?s_cid=11626:cdc%20vaccine:sem.ga:p:RG:GM:gen:PTN.Grants:FY22)
- Influenza vaccination is available for those aged 6 months and older and is recommended to support personal health and protect the overall health of the public. CDC's seasonal influenza vaccination resources for health professionals can be found here: <https://www.cdc.gov/flu/professionals/vaccination/index.htm>

**Questions:**

For updated guidance, please review the DPBH Technical Bulletin [website](#) and Nevada's COVID-19 response [website](#) regularly. Email [dpbhepi@health.nv.gov](mailto:dpbhepi@health.nv.gov) with questions.



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