

# OREGON STATE HOSPITAL

## POLICIES AND PROCEDURES

### Executive Summary of Policy Changes

*Contact the person noted below with questions about the policy or related procedures.*

|          |                             |                 |                    |
|----------|-----------------------------|-----------------|--------------------|
| POLICY:  | 2.017, INFLUENZA PREVENTION |                 |                    |
| CONTACT: | CHIEF OF MEDICINE           | EFFECTIVE DATE: | SEPTEMBER 30, 2026 |

#### PURPOSE OF THIS POLICY:

This policy establishes requirements and procedures for influenza prevention at Oregon State Hospital (OSH).

#### SUMMARY OF CONTENT CHANGE(S):

- Update policy to new policy template
- Update definitions and references

#### REASON FOR CHANGE(S):

- Scheduled policy update
- Reflect current OSH practices

#### REQUIRED ACTION/SPECIFIED STAFF:

Tier 0 – all staff read the updated policy. No follow-up action is required. This is already part of the yearly OSH training.

#### WORKGROUP PARTICIPANTS AND VALIDATORS:

|                   |                       |
|-------------------|-----------------------|
| Dept              | Individual Rep's Name |
| Chief of Medicine | Dr. Kristi Hennen     |

*NOTE: OSH personnel are responsible to know and abide by all applicable policies as indicated in [OSH Policy and Procedure 1.001, "Policy System at OSH"](#).*

*Current documents may be found in [I:\OSH Policies & Procedures](#) and on the [OSH Policies and Procedures intranet](#) page.*

*Email questions to "[OSH Policies and Procedures](#)".*