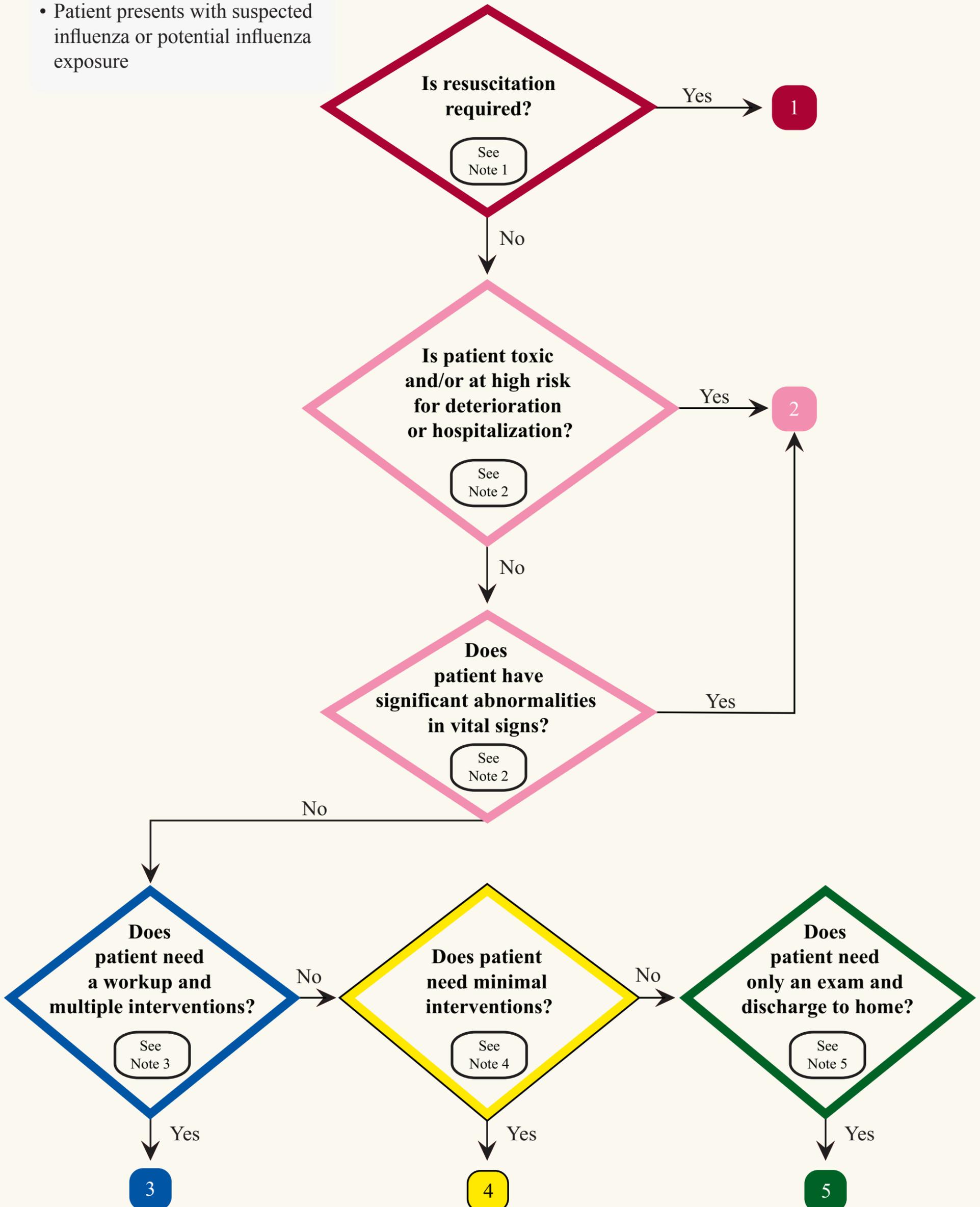


PITA: Pandemic Influenza Triage Algorithm

When to use the PITA

- Pandemic declared
- Patient presents with suspected influenza or potential influenza exposure



Note 1. Is resuscitation required?

Airway

Inability to protect/maintain airway (respiratory failure/exhaustion)
Needing interventions like BVM ventilation, intubation, or BiPAP/CPAP

Breathing

Oxygen saturation <90%
Severe respiratory distress
Breathlessness
– inability to speak complete sentences
Apnea
Excessive work of breathing (e.g., exaggerated retractions/nasal flaring and/or tripod position)
Extremely labored breathing/grunting
Cyanosis

Circulation

Cardiopulmonary arrest
Weak, thready, or absent pulse
Cool, clammy
Marked pallor, delayed capillary refill, mottling
Needing interventions like ACLS or PALS resuscitation, large volumes of fluid, or vasopressors

Mental status

Unresponsive – a patient that is either nonverbal and not following commands acutely or requires noxious stimuli (P or U on AVPU scale)
Strikingly agitated or irritable
Active seizures
Infants – decreased responsiveness and poor muscle tone

Note 3. Does patient need a workup and multiple interventions?

Interventions may include:

- Chest radiograph
- Laboratory studies (complete blood count, electrolytes, and cultures)
- Intravenous (IV) fluids and medications
- Nebulized medications
- Oxygen

Consider Level 3 for patients with:

- Significant past medical history
- Worsening or relapse of influenza-like illness symptoms
- Severe or persistent vomiting requiring IV volume replacement

Note 2. Is patient toxic and/or at high risk for deterioration or hospitalization?

Toxic Appearance

Respiratory
Oxygen saturation 90 or 91%
Moderate respiratory distress
Shortness of breath
Breathing fast or slow
Increased work of breathing (e.g., some nasal flaring, mild retractions, or grunting)
Infants – inability to feed

Neurological
Acute mental status changes (change from baseline):
• Unable to follow simple commands
• Confused/lethargic/disoriented
Infants – extremely irritable, inconsolable

High Risk for Deterioration/Hospitalization*

High Risk
Assign Level 2 if patient has influenza-like illness (ILI) symptoms and is in high-risk group (consult CDC website for current list of high-risk groups for influenza), including but not limited to:

Immunocompromised patients (including immunosuppression caused by HIV or by medication, such as chemotherapy or chronic steroids)

Comorbidities/Considerations

Consider assigning Level 2 for patients with these considerations or comorbid conditions who present with ILI (especially with abnormalities in airway, breathing, circulation, and mental status):

Asthma – moderate to severe	Chronic neurologic or neuromuscular conditions (e.g., muscular dystrophy, spinal cord injury, cerebral palsy, stroke, or multiple sclerosis)
COPD, cystic fibrosis or other chronic lung disease	Chronic metabolic, hepatic, or hematologic disorders
Serious congenital heart disease	Elderly
Congestive heart failure	Residents of chronic care facilities
Renal disease – on dialysis	
Sickle cell disease or other serious anemias	

Does patient have significant abnormalities in vital signs?

If one or more vital signs exceed parameters listed, consider assigning Level 2

Age	RR	HR	Temperature Celsius (Fahrenheit)	Systolic BP	SaO2
< 3 mo	<40 >60	<100 >205	>38* (100.4)	+	<92
3mo - < 1y	<25 >40	<100 >190	>38 (100.4)	+	<92
1y - <3y	<22 >34	<80 >160	>39 (102.2)	+	<92
3y - <5y	<20 >26	<75 >140	≥40 (104)	+	<92
5y - <10y	<18 >24	<60 >120	≥40 (104)	+	<92
≥ 10y	<16 >20	<50 >100	≥40 (104)	<90	<92

***Recommendation:** When fever exceeds 38°C (100.4°F), rate patients aged 1-28 days as Level 2, and consider rating patients aged 1-3 months as Level 2.

+Assess perfusion in children using capillary refill and skin color.

*This algorithm is designed to assist healthcare professionals and those under their supervision in triaging patients with ILI. It is not meant as a substitute for sound clinical judgment.

Note 4. Does patient need minimal interventions?

Minimal interventions (e.g., no more than one) may include those in Note 3 or:

- Medication by metered dose inhaler (MDI)
- Oral medications

Consider Level 4 for patients who may have influenza, but are stable and:

- Hospitalization is unlikely
- May have psychosocial risk factors that limit their ability to do self-care, such as elderly living alone or homeless

Note 5. Does patient need only an exam and discharge to home?

No defined interventions needed (such as those listed in Notes 3 and 4)

Patient will receive exam and discharge education, and may receive prescriptions