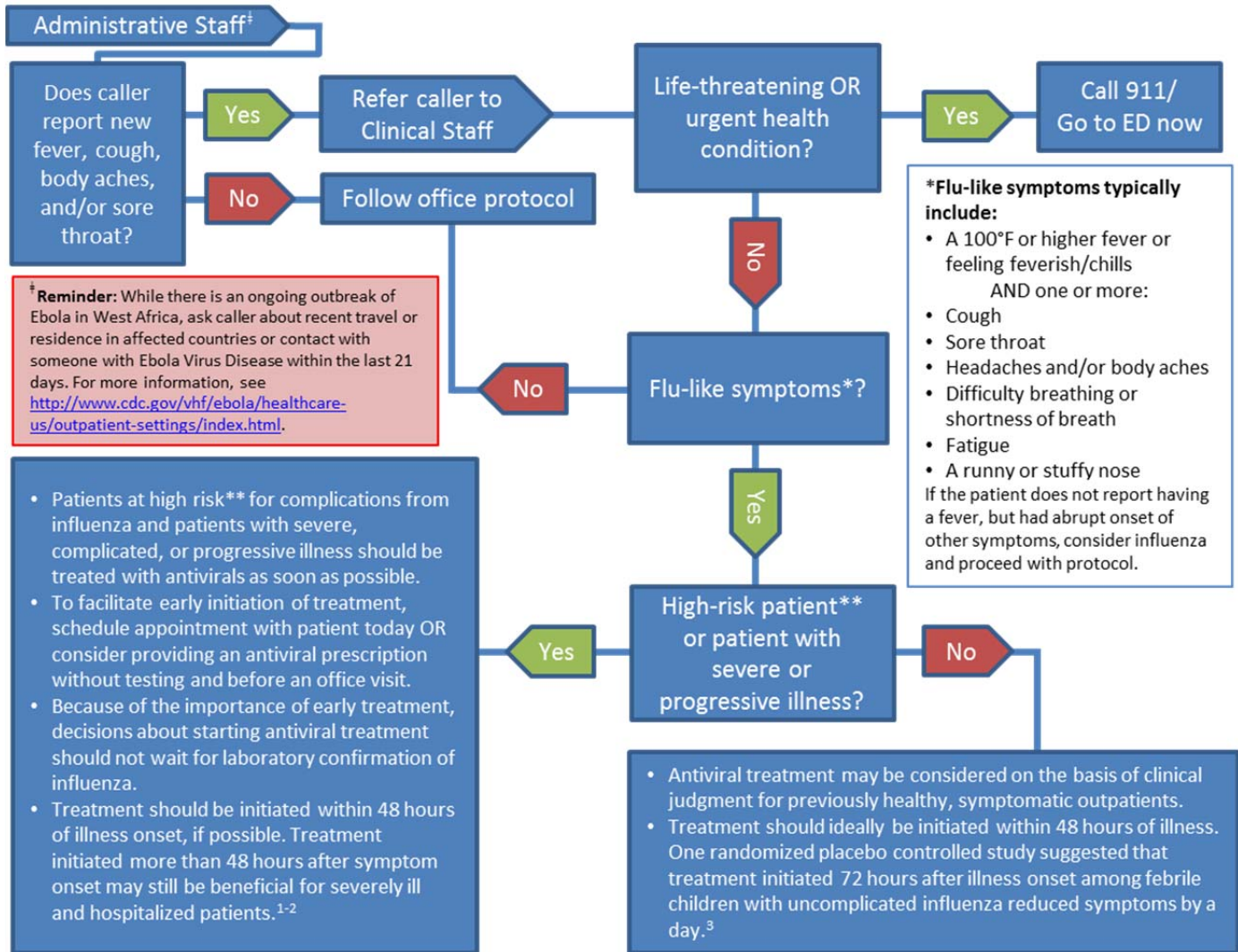


Medical Office Telephone Evaluation of Patients with Possible Influenza

The flowchart below is designed to be used when influenza is circulating in the community. This tool may help medical office staff triage calls from patients with flu-like symptoms and identify when it might be appropriate to initiate antiviral treatment before an office visit. Patient triage or prescribing of prescription medicines should be done under the direction of a licensed physician or other licensed health care provider.



**High-risk patients include:

- Children younger than 2 years (although all children younger than 5 years are considered at higher risk for complications from influenza, the highest risk is for those younger than 2 years);
- Adults aged 65 years and older;
- Persons with chronic pulmonary (including asthma), cardiovascular (except hypertension alone), renal, hepatic, hematological (including sickle cell disease), and metabolic disorders (including diabetes mellitus), or neurologic and neurodevelopment conditions (including disorders of the brain, spinal cord, peripheral nerve, and muscle such as cerebral palsy, epilepsy [seizure disorders], stroke, intellectual disability [mental retardation], moderate to severe developmental delay, muscular dystrophy, or spinal cord injury);
- Persons with immunosuppression, including that caused by medications or by HIV infection;
- Women who are pregnant or postpartum (within 2 weeks after delivery);
- Persons aged younger than 19 years who are receiving long-term aspirin therapy;
- American Indians/Alaska Natives;
- Persons who are morbidly obese (i.e., body-mass index is equal to or greater than 40); and
- Residents of nursing homes and other chronic-care facilities.

References:

1. Louie JK, Yang S, Acosta M, et al. Treatment with neuraminidase inhibitors for critically ill patients with influenza A (H1N1)pdm09. *Clin Infect Dis.* 2012; 55(9): 1198-204.
2. Yu H, Feng Z, Uyeki TM, et al. Risk factors for severe illness with 2009 pandemic influenza A (H1N1) virus infection in China. *Clin Infect Dis.* 2011; 52(4): 457-65.
3. Fry AM, Goswami D, Nahar K, et al. Efficacy of oseltamivir treatment started within 5 days of symptom onset to reduce influenza illness duration and virus shedding in an urban setting in Bangladesh: a randomised placebo-controlled trial. *Lancet Infect Dis.* 2014; 14(2): 109-18.

For more information, see <http://www.cdc.gov/flu/professionals/antivirals/index.htm>.

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Influenza Division

