

10/27/2009

2009-2010 Influenza Season Triage Algorithm for Adults (older than 18 years of age) With Influenza-Like Illness

Disclaimer

This algorithm is designed only to assist physicians and those under their supervision in identifying indicators of and responses to symptoms of flu-like illness (i.e., fever with cough or sore throat). It does not provide guidance for other medical conditions nor is it intended to substitute for professional medical advice. Like any printed material it may become out-of-date over time. This guidance is not intended for use by the general public and is not a substitute for sound clinical judgment. Individuals should always seek the advice of their healthcare professional with any questions they have regarding a medical condition. If you are concerned about your health or the health of someone in your care, call your doctor or the doctor of the person you are caring for. If you think you or someone in your care is severely ill or may have a medical emergency, call 911 immediately. The U.S. Government does not warrant or assume any legal liability or responsibility for the accuracy, completeness, or usefulness of this algorithm.

This algorithm was developed in collaboration with Emory University School of Medicine

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This algorithm is meant for use by physicians and those under their supervision, not by the general public. This algorithm applies regardless of whether or not the patient has been vaccinated for influenza including 2009 H1N1. This algorithm is not for use for patients without fever or feverishness plus cough or sore. Patients without these symptoms should seek care or talk to a healthcare provider about their illness.

Are **all** of the following present:

1. Age greater than 18 years
2. Fever or feverishness*
3. Cough or sore throat

* If antipyretics are taken this may inhibit a patient's ability to mount a fever

No

Although influenza cannot be ruled out in this patient, this algorithm should not be used to guide clinical decision making in this case. Advise them to contact their healthcare provider for advice about their current illness if they are concerned about their health or to call for emergency care if they have any warning signs of severe illness. Many people with influenza—including 2009 H1N1--will not have a fever. Other symptoms of influenza can include chills, body aches/muscle pain, headache, fatigue, runny nose, and occasionally diarrhea and vomiting

Yes

Are **any** of the following signs or symptoms present†:

- Difficulty breathing or shortness of breath
- Pain or pressure in the chest
- Dizziness
- Confusion
- Severe or persistent vomiting
- Flu-like symptoms improved but then return or worsen within a few days

† These symptoms are purposely broad to minimize the possibility of misclassifying people who truly have severe disease. The person attempting to triage the patient should take into account the severity and duration of the symptoms and the patient's ability to care for themselves or access a reliable caregiver when deciding whether or not patients should be advised to seek care immediately

Yes

This patient should be advised to seek emergency medical care immediately

No

Is the patient:

- Age 65 years or older
OR
- Pregnant or up to 2 weeks postpartum (including following pregnancy loss)

OR are **any** of the following comorbid conditions present:

- Chronic pulmonary (including asthma), cardiovascular (except isolated hypertension), renal, hepatic, hematological (including sickle cell disease), or metabolic disorders (including diabetes mellitus)
- Disorders that can compromise respiratory function or the handling of respiratory secretions or that can increase the risk for aspiration (e.g., cognitive dysfunction, spinal cord injuries, seizure disorders, or other neuromuscular disorders)
- Immunosuppression, including that caused by medications or by HIV

Note: obese patients and morbidly obese patients should be carefully evaluated for the presence of underlying medical conditions that are known to increase the risk for influenza complications, and should receive empiric treatment when these conditions are present, or if signs of lower respiratory tract infection are present

Yes

This patient is at higher risk for influenza complications. The patient should be advised to contact their healthcare provider to discuss antiviral treatment that day. Providers may advise such patients to take antiviral medications for treatment and/or other therapy. Early use of influenza antiviral medications can reduce the risk of influenza-related complications

No

Based on the information above, this patient is at low risk for influenza complications and may not require testing or treatment for influenza if their symptoms are mild. Should their symptoms worsen or if they are concerned about their health they should be advised to seek medical care.

In order to help prevent spread of influenza to others, these patients should be advised:

- To keep away from others to the extent possible, particularly those at higher risk for complications from influenza (see box next page). This may include staying in a separate room with the door closed.
- To cover their coughs and sneezes
- Wash their hands frequently with soap and water or use an alcohol-based hand rub if soap and water are not available
- Stay home until 24 hours after their fever is gone

More information available at: http://www.cdc.gov/h1n1flu/guidance_homecare.htm

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For all adult (older than 18 years of age) patients triaged using this algorithm the following should also be assessed:

