PRACTICAL PEARLS: INFLUENZA

INTRODUCTION	 Febrile, systemic respiratory viral illnesses peak in mid to late winter Promote yearly influenza vaccination for patients, families, and health care workers in your offices: https://www.cdc.gov/flu/about/season/current.htm http://pediatrics.aappublications.org/content/early/2018/08/30/peds.2018-2367
INITIAL EVALUATION AND MANAGEMENT BY PRIMARY CARE	 Diagnosis is based on clinical symptoms during the late fall-winter and can be confirmed by rapid nasal swab PCR testing Oseltamivir (Tamiflu®) is approved for treatment of influenza in children 2 weeks of age or older. Antiviral drugs work best if started within 48 hrs of onset of symptoms Consider treatment for youngest and oldest ages who are susceptible to more severe disease, hospitalizations and complications, all children <2 years, and complex medical conditions Consider treatment for any child in a home with a sibling <6 months of age, or a family member with underlying medical conditions that predispose to flu complications <p>https://www.cdc.gov/flu/professionals/antivirals/summaryclinicians.htm </p>
WHEN TO REFER	 Questions about who should receive influenza antivirals for seasonal prophylaxis, or treatment in special circumstances Concern for severe infection or bacterial superinfection, especially in immunocompromised patients
HOW TO REFER	 794-KIDS – Request Pediatric Infectious Diseases appointments For urgent access, please call the Pedi ID doctor on call
WHAT TO EXPECT FROM BAYSTATE CHILDREN'S HOSPITAL VISIT	 Current patient information and pertinent medical records should be provided Other referrals or possible inpatient admission may be recommended

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