## Influenza and Influenza-Like Illness: Assessment Guideline



**Disclaimer:** The information below should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

1. Using the description in the box below, do you think that your child has the flu?



Do not use this guideline.

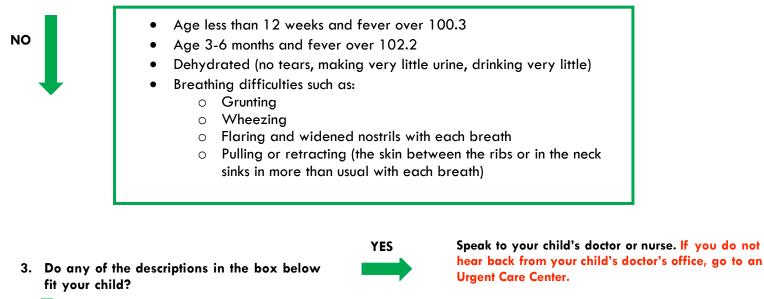
YES

The flu causes many symptoms. Most children will have fever, cough and runny nose. Other symptoms may include sore throat, diarrhea, and sore muscles. If your child has been around others who seem to have the flu, this makes it more likely that your child has the flu.

2. Do any of the descriptions in the box below fit your child?



Go to an Emergency Room now (an Urgent Care Center is OK for a 3-6 month old who is alert, not dehydrated and breathing normally)



NO
Chest pain
Stomach pain that is constant or worse with movement
Sore throat so bad that he/she cannot open mouth widely
Sore neck preventing him from moving it normally in all directions
Return of fever following 12-24 hrs when he/she seemed to be improving
Vomiting and unable to keep fluids down

4. Every 4 hours or so, will your child play, smile, concentrate on an activity? (Read the box below.)



Speak to your child's doctor in the next hour or two. If you do not hear from your doctor within 2 hours, go to an Urgent Care Center. You may want to try lowering your child's fever first using the instructions below.

## YES

This is a VERY important question. Most children with the flu will be tired or crabby much of the time; however, when the fever is brought down with medicines and the parent works to entertain the child, a child with simple flu should perk up, smile and be able to do some activity (play a game, use the computer, take a bottle, whatever is normal for your child at his age). This 'happy' period may only last a little while, but such periods are VERY reassuring that a child is not experiencing a serious complication of the flu.

5. Does your child have any problems not covered in this guideline that concern you?



Speak to your child's doctor. (Exception: If the only additional problem is mild diarrhea, then you may answer 'No' to this question.)

6. Do any of the descriptions in the box below fit your child or teenager?



Call your child's doctor's office. Your child may be at increased risk for complications from the flu or respiratory virus. While waiting to speak to your doctor treat the flu as described below under: "HOW TO TREAT THE FLU"



NO

Has an ongoing health problem such as: 0

- <24 months of age
- Immune deficiency (diagnosed by a doctor as having a problem fighting 0 infections or taking daily steroids or aspirin)
- Lung disease such as moderate or severe asthma (takes medicine for asthma one or more days each week)
- Heart disease requiring medication 0
- Any health problem requiring daily medication or regular visits to a specialist (example: Diabetes)
- Pregnant

Your answers suggest that your child can be treated at home for the flu; however, you are always the final judge regarding the best care for your child. See below for directions on how to care for your child at home. Visit <u>www.choa.org/flu</u> for more information.

## HOW TO TREAT THE FLU:

- Control the fever for your child's comfort with:
  - EITHER acetaminophen or ibuprofen as directed
  - **Never give aspirin or any produce containing aspirin** such as Pepto-Bismol to a child with flulike symptoms.
  - $\circ$   $\,$  The goal is not to bring the fever down to normal but to reduce the fever enough so that your child is comfortable.
- Offer as much **clear liquid** (juices, water, popsicles, Pedialyte) as your child will take. When there is diarrhea, Pedialyte or Gatorade G2 Low Calorie are particularly good.
- **Do not allow your child to be around others.** Keep your child at home until 24 hrs have passed without the need for a medication to control fever and your child is acting normally.
- If your child has been around someone who is at higher risk for the flu, then have that person contact their doctor in the morning, or sooner if they are showing symptoms of the flu. Persons at higher risk are:
  - o pregnant
  - $\circ$  <24 months of age
  - o very overweight
  - 65 years of age or older
  - suffers from chronic health problems as described in the box below question #6 above **Call your child's doctor promptly** if your child begins having chest or abdominal pain,
- vomiting, labored breathing, dehydration, failure to behave normally every 4 hours) or if you have any other reasons to be very concerned about your child.

## WHAT NOT TO DO

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- Do not give cough medications to your child. It is understandable that you want to comfort your child by reducing the cough; however, in this case the best medicine is no medicine. The FDA has advised that cough/cold medications are ineffective for coughs for children less than 6 years of age and they have undesirable side effects. It is most important to realize that a cough is a means by which the child 'cleans' her lungs of the virus. Suppressing the cough may predispose the child to pneumonia. A cool mist humidifier in the child's room that is thoroughly cleaned every day may help. Saltwater nose drops and bulb suctioning the nose may help a congested infant.
- Children's does not recommend the routine use of anti-viral medication (Tamiflu) except for children considered to be high risk (#6 above). Treatment with Tamiflu is most beneficial if started within 24 hours of onset of symptoms. Because flu is a virus, antibiotics do not work against the flu virus.