

Patient (0-19y) with influenza-like illness (ILI)
 - fever ≥ 38 with cough, myalgias or sore throat.
Initiate droplet precautions at triage and continue during course (droplet and contact precautions for patients < 2years)

High Risk Conditions
 Patient satisfies any of the following:

- Comorbid condition: Chronic pulmonary (asthma on controller included), cardiovascular, renal, hepatic, hematologic, neuro/neurodevelopmental or metabolic disorder (including diabetes)
- Immunocompromised (chemotherapy, DMARD, HIV, or congenital immunodeficiency)
- Pregnant or post-partum
- Morbidly obese (BMI>40)
- Resident of chronic care facility
- American Indian/Alaska Natives
- Persons < 19 years receiving long-term aspirin therapy

Note: Age <2 years and < 5 years:
 The AAP recommendation (2018) is to offer treatment to otherwise healthy children < 5 years of age and especially to children < 2 years of age with suspected or confirmed influenza. Shared-decision making and other patient-specific factors may impact decision to treat.

Bacterial source or ill appearance?

Yes

Off algorithm
 Evaluate and treat accordingly.

No

Does patient meet high risk criteria or is patient being admitted?

Yes

- Initiate treatment with oseltamivir
- Treat regardless of symptom onset; early initiation (<48h) may be more effective
- **Testing**
 - Should routinely test for high risk patients
 - Send Rapid influenza A/B/RSV PCR
 - If PCR negative, therapy should be discontinued
 - Critically ill or immunocompromised? Consider full respiratory viral panel PCR

No

- Supportive care recommended
- Use of antivirals **not** recommended
 - *Can consider if*
 - symptom onset <48 hours
 - close household contacts < 6 months old or with high risk medical conditions
- If testing performed, use Rapid influenza A/B/RSV PCR*

Testing

Test	Sensitivity	Specificity
Rapid influenza A/B/RSV PCR	>95%	>95%
Respiratory Viral Panel PCR <i>(only to be use in immunocompromised or critically ill)</i>	>95%	>95%
POCT Influenza Virus <i>(not available at Benioff Children's Hospital)</i>	50-70%	90-95%

Treatment

Age	Oseltamivir Dosage
Preterm infant	Consult Pediatric Infectious Disease
Term infant 0-8 months	3mg/kg PO BID x 5 days
Infants 9-11 months	3.5mg/kg PO BID x 5 days
Children > 12 months	
<=15kg	30mg PO BID x 5 days
>15-23kg	45mg PO BID x 5 days
>23-40kg	60mg PO BID x 5 days
>40kg	75mg PO BID x 5 days

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Disclaimer: This algorithm functions as a guideline for clinical care under attending physicians and does not replace sound clinical judgment.

*Dosing ranges obtained from UCSF IDMP Guidelines. Patients with renal impairment require dose adjustment. Please refer to UCSF BCH IDMP for guidance on chemoprophylaxis dosing and duration. www.idmp.ucsf.edu