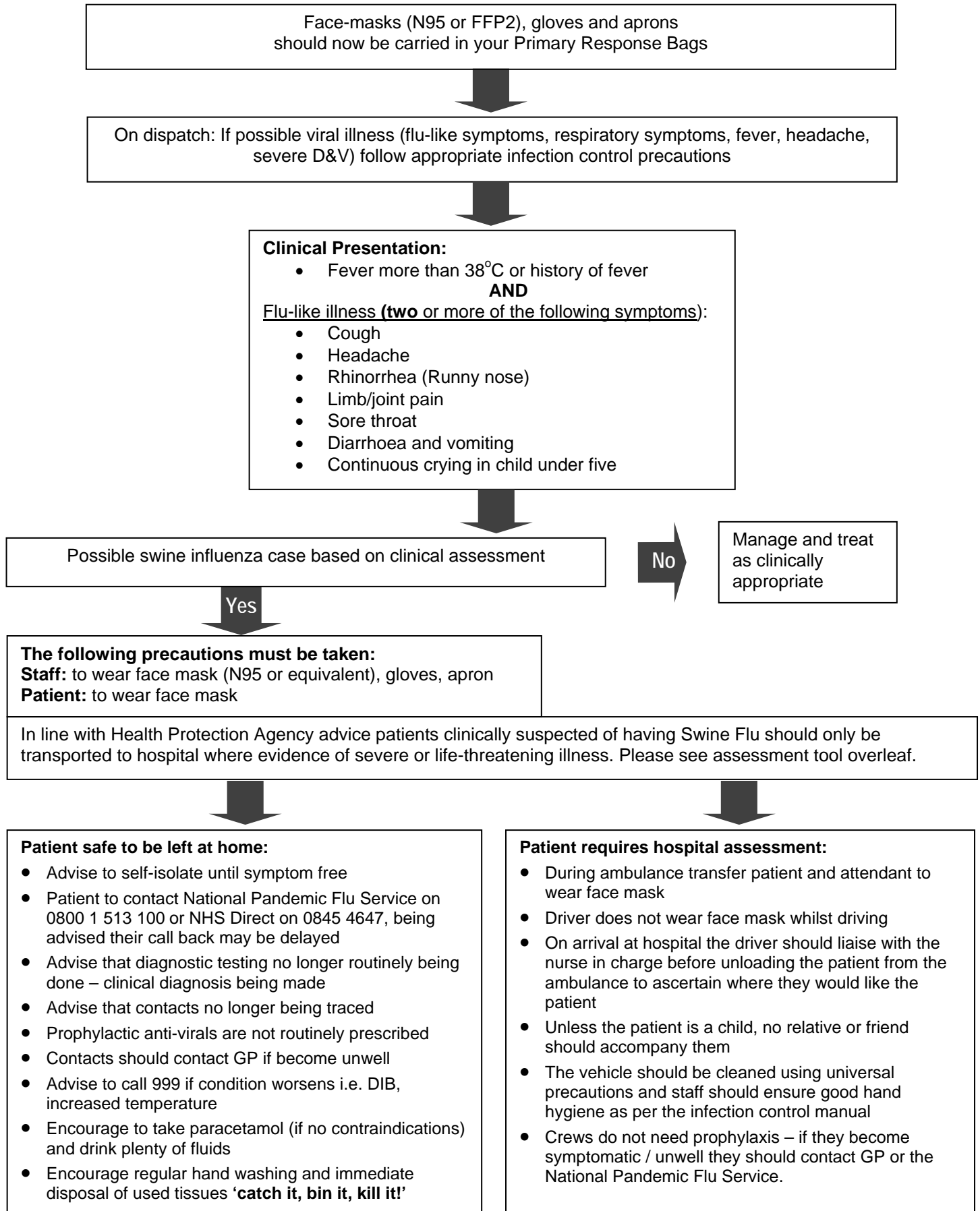




Flow chart for management of patients with flu-like illness



Swine flu adult and children community assessment tool

- This assessment tool is designed to support and empower frontline staff to advise patients with flu-like symptoms on community assessment / care, but does not supersede a decision made by an experienced clinician of whether, when, and where to refer a patient.
- The assessment applies to patients aged over 12 months. All children under one year should be transferred to the local emergency department unless a GP appointment is available within one hour as they are at high risk of suffering severe illness.
- This assessment tool applies to all patients with no prior or existing medical condition including pregnancy. All patients with underlying medical conditions or who are pregnant should be advised to contact their GP.
- If patients are safe to be managed in the community they should be advised to call the National Pandemic Flu Service on 0800 1 513 100.

Adults should be assessed and referred to the nearest A&E if they present with any of the following:

- **Severe respiratory distress**: Severe breathlessness (unable to complete sentences in one breath), use of accessory muscles, supra-clavicular recession, tracheal tug or feeling of suffocation
- **Increased respiratory rate** measured over at least 30 seconds ≥ 25 breaths per minute
- **Oxygen saturations** $\leq 94\%$ (on pulse oximetry) breathing air or $\leq 88\%$ on home oxygen therapy. Absence of cyanosis is a poor discriminator for severe illness
- **Respiratory exhaustion** – new abnormal breathing pattern e.g. alternating fast and slow rate or long pauses between breaths
- **Abnormal pulse rate** – new abnormal heart rate e.g. < 50 bpm or > 100 bpm
- **Evidence of severe clinical dehydration or clinical shock** – systolic blood pressure < 90 mmHg and / or diastolic, 60 mmHg. Sternal capillary refill time > 2 seconds, reduced skin turgor
- **New confusion** – any altered level conscious level, striking agitation or seizures
- **Other clinical concern** – photophobia, non-blanching rash, or severe underlying medical condition eg COPD, heart disease, renal disease.

Children aged 1-16 years should be assessed and referred to the nearest A&E if they present with any of the following:

- **Severe respiratory distress**: Lower chest wall indrawing, sternal recession, grunting or noisy breathing when calm, unable to complete sentence in one breath
- **Increased respiratory rate** measured over at least 30 seconds ≥ 40 breaths per minute if aged over 1 year, ≥ 30 breaths per minute if over 5 years, ≥ 25 breaths per minute if over 12 years
- **Oxygen saturations** $\leq 95\%$ (on pulse oximetry) breathing air. Absence of cyanosis is a poor discriminator for severe illness
- **Respiratory exhaustion / Apnoeic episode** – new abnormal breathing pattern e.g. alternating fast and slow rate or apnoea lasting ≥ 20 seconds
- **Evidence of severe clinical dehydration or clinical shock** – Sternal capillary refill time > 2 seconds, reduced skin turgor, mottled / cold peripheries, sunken eyes/ fontanelle. Poor urine output
- **Any altered conscious level** – strikingly agitated or irritable, inconsolable crying or seizures or floppy
- **Other clinical concern** – photophobia, non-blanching rash, or severe underlying medical condition e.g. congenital heart disease, prematurity, chronic lung disease, severe asthma