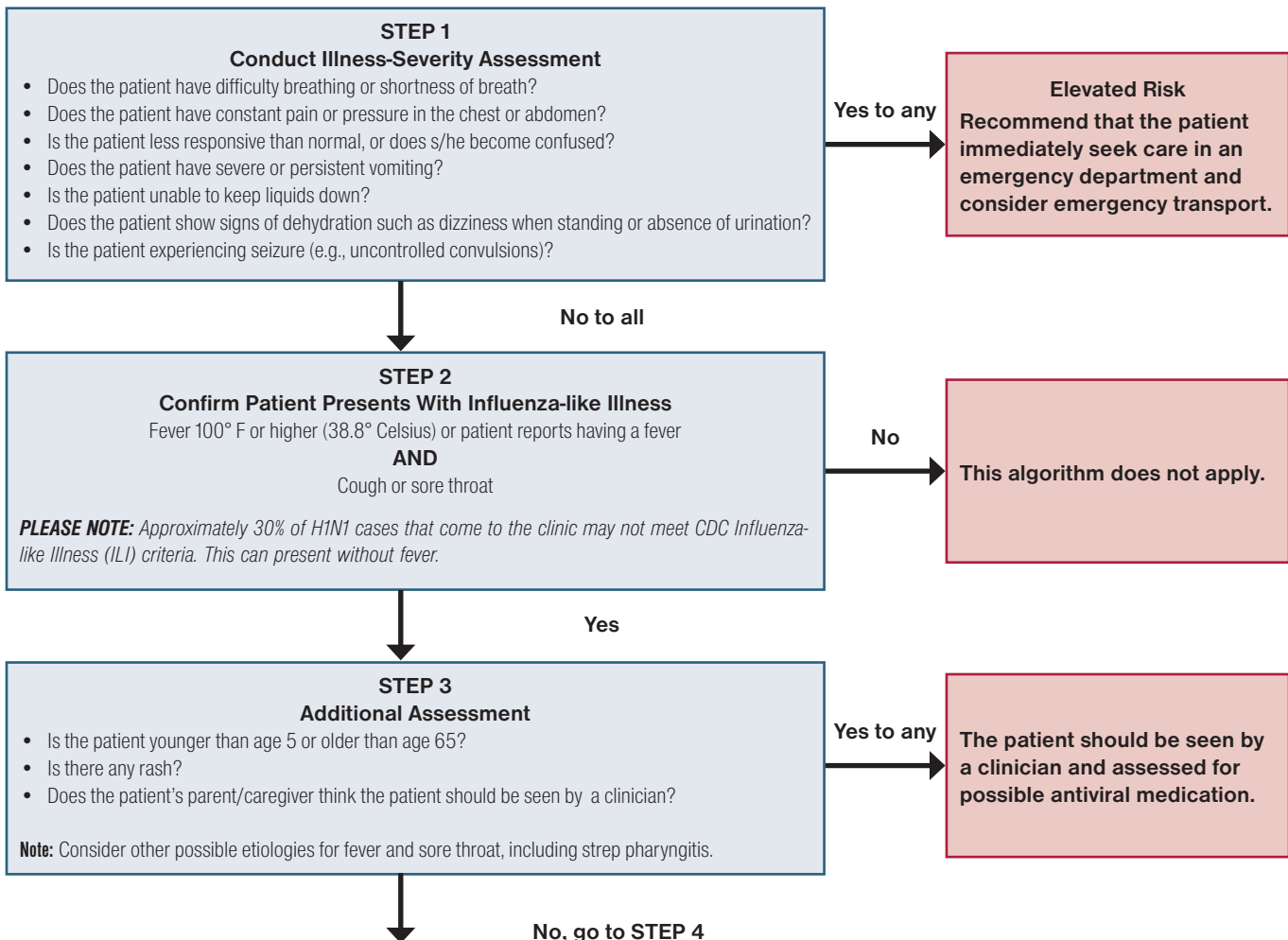
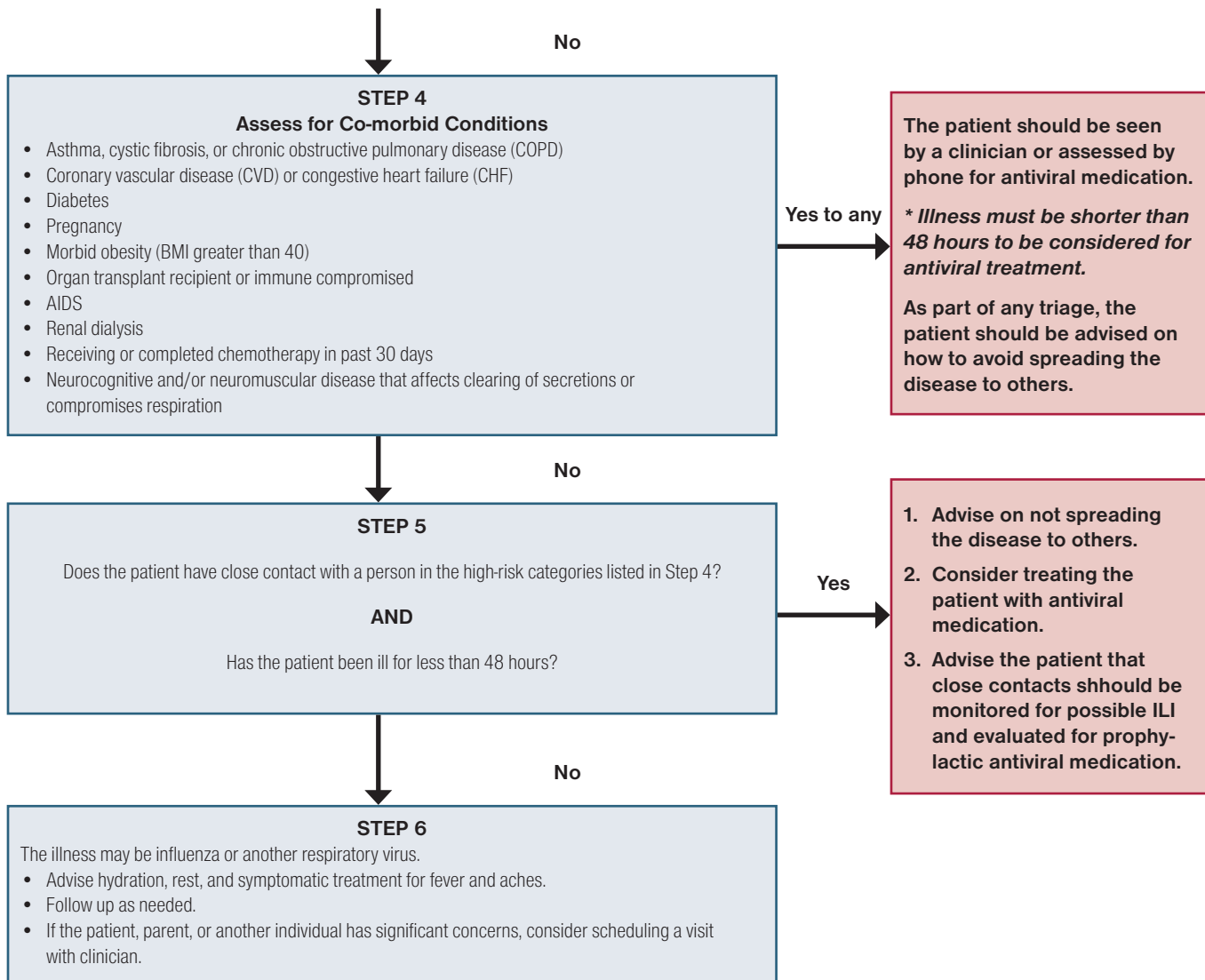


The purpose of this protocol is to assist clinicians in managing the expected surge of patients during seasonal influenza outbreaks. Clinical judgment is an important factor in the decision to initiate antiviral therapy for influenza. Patients with suspected influenza who present with an uncomplicated febrile illness typically do not require antiviral treatment unless they are have higher risk for influenza complications. Antiviral treatment is recommended by the Centers for Disease Control (CDC) for:

1. All hospitalized patients who have confirmed, probable, or suspected influenza.
2. Patients who have higher risk for seasonal influenza complications (see below).
3. Children younger than age 5. The risk of severe complications from seasonal influenza is highest among children younger than age 2.
4. Adults ages 65 years and older.
5. Pregnant women.
6. Patients younger than age 19 years who are receiving long-term aspirin therapy.
7. Patients who have the following conditions:
 - a. Chronic pulmonary (including asthma), cardiovascular (except hypertension), renal, hepatic, hematological (including sickle cell disease), neurologic, neuromuscular, or metabolic disorders (including diabetes mellitus)
 - b. Immunosuppression, including that caused by medications or by HIV infection

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. As with any printed material, it may become outdated over time. This guidance is not intended for use by the general public and is not a substitute for sound clinical judgment. If you think you or someone in your care is severely ill or may have a medical emergency, call 911 immediately. The AAFP does not warrant or assume any legal liability or responsibility for the accuracy, completeness, or usefulness of this algorithm.





ANTIVIRAL THERAPY FOR INFLUENZA

Evidence for benefits from antiviral medication is strongest when treatment is started within 48 hours of illness onset.

Medication Name	How Supplied	Usual Dosage	Schedule
Zanamivir (for ages 7+)	5 mg powder	2 puffs	B.I.D. x 5 d
Osetamivir (for ages 2 weeks +)	75 mg	75 mg	B.I.D. x 5 d
< 15 kg	60 mg/5 cc	30 mg	B.I.D. x 5 d
15 kg to 23 kg	60 mg/5 cc	45 mg	B.I.D. x 5 d
23 kg to 40 kg	60 mg/5 cc	60 mg	B.I.D. x 5 d
> 40 kg	75 mg	75 mg	B.I.D. x 5 d

RESOURCES:

1. <http://www.cdc.gov/flu/about/season/index.htm>
2. <http://www.cdc.gov/flu/professionals/antivirals/antiviral-dosage.htm#Tab1>
3. <http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm333205.htm>