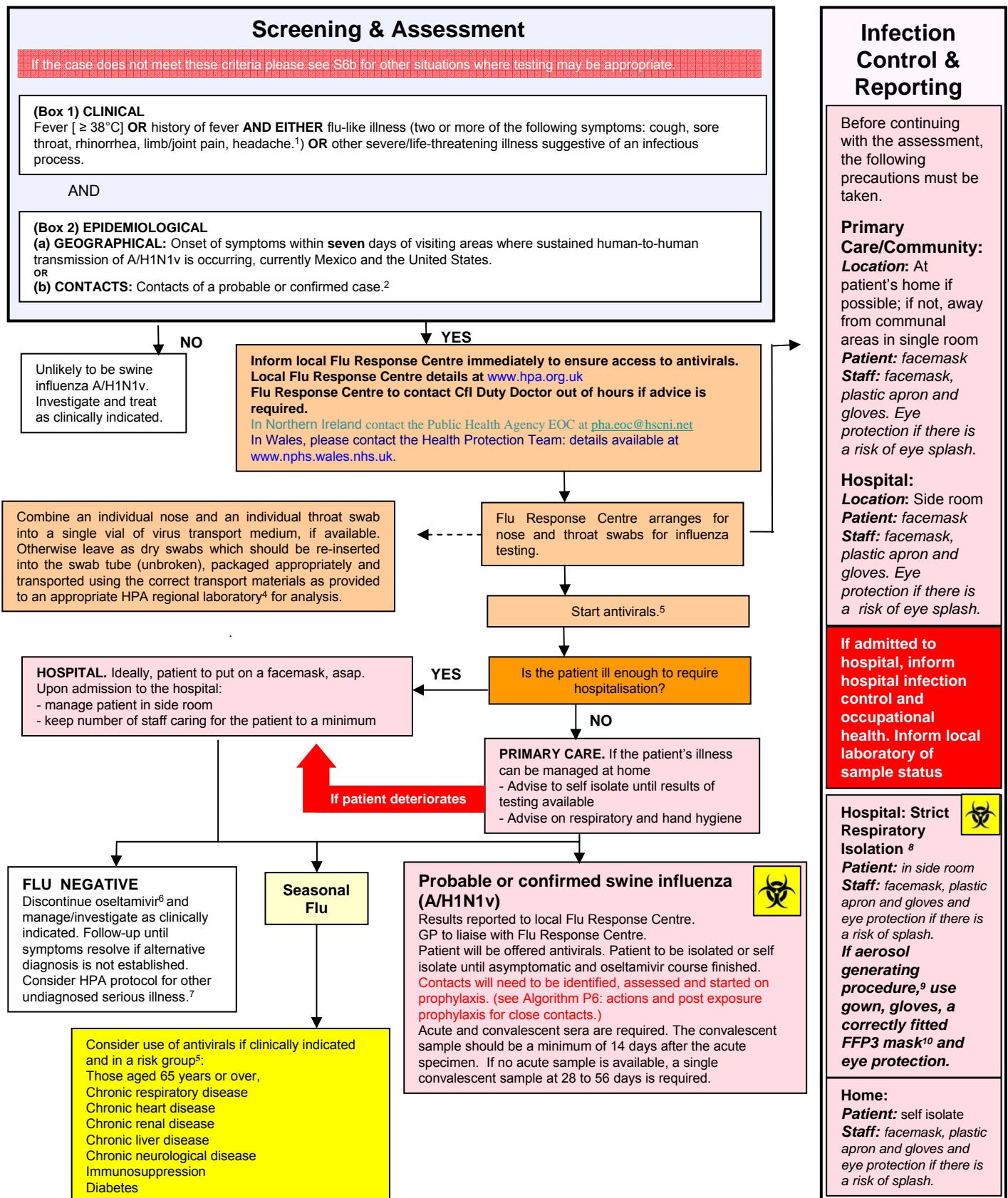


WHO PANDEMIC ALERT PHASE 6: Algorithm for the management of suspected cases of swine influenza (A/H1N1v)

(including returning travellers and visitors from countries affected by A/H1N1v and contacts of known cases)



FLU NEGATIVE

Discontinue oseltamivir⁶ and manage/investigate as clinically indicated. Follow-up until symptoms resolve if alternative diagnosis is not established. Consider HPA protocol for other undiagnosed serious illness.⁷

Seasonal Flu

Probable or confirmed swine influenza (A/H1N1v)

Results reported to local Flu Response Centre. GP to liaise with Flu Response Centre. Patient will be offered antivirals. Patient to be isolated or self isolate until asymptomatic and oseltamivir course finished. **Contacts will need to be identified, assessed and started on prophylaxis. (see Algorithm P6: actions and post exposure prophylaxis for close contacts.)** Acute and convalescent sera are required. The convalescent sample should be a minimum of 14 days after the acute specimen. If no acute sample is available, a single convalescent sample at 28 to 56 days is required.

Hospital: Strict Respiratory Isolation

Patient: in side room
Staff: facemask, plastic apron and gloves and eye protection if there is a risk of splash.
If aerosol generating procedure,⁹ use gown, gloves, a correctly fitted FFP3 mask¹⁰ and eye protection.

Home:
Patient: self isolate
Staff: facemask, plastic apron and gloves and eye protection if there is a risk of splash.

Infection Control & Reporting

Before continuing with the assessment, the following precautions must be taken.

Primary Care/Community:
Location: At patient's home if possible; if not, away from communal areas in single room
Patient: facemask
Staff: facemask, plastic apron and gloves. Eye protection if there is a risk of eye splash.

Hospital:
Location: Side room
Patient: facemask
Staff: facemask, plastic apron and gloves. Eye protection if there is a risk of eye splash.

Consider use of antivirals if clinically indicated and in a risk group⁸:
Those aged 65 years or over,
Chronic respiratory disease
Chronic heart disease
Chronic renal disease
Chronic liver disease
Chronic neurological disease
Immunosuppression
Diabetes

Footnotes:

- 1 Vomiting and diarrhoea have been a feature of some of the reported cases.
- 2 Refer to swine flu case definitions at <http://www.hpa.org.uk/web/HPAweb&Page&HPAwebAutolListName/Page/1240812234677>.
- 3 CMO swine flu alert 1 May 2009 <https://www.cas.dh.gov.uk/ViewandAcknowledgment/ViewAlert.aspx?AlertID=101203>.
- 4 HPA regional laboratories can be found at <http://www.hpa.org.uk/web/HPAweb&Page&HPAwebAutolListName/Page/1153846674206?p=11538466742065>.
- 5 Standard treatment dose of oseltamivir in adults (age >13 years old) is 75mg bd for 5 days. Standard treatment dose of zanamivir is 10mg bd for 5 days. (<http://www.medicines.org.uk>) Treatment for seasonal flu should only be given within 48 hours of onset of symptoms however for swine influenza it can be given at any point that the patient is symptomatic and continue until the patient has recovered. Follow guidelines unless expert advice is to the contrary.
- 6 If swab taken prior to starting oseltamivir, treatment can stop. Otherwise, complete treatment course.
- 7 Refer to HPA protocol http://www.hpa.org.uk/web/HPAweb&Page&HPAwebStandard/HPAweb_C/1202115613395?p=1160495617061.
- 8 Infection control guidance is available at: http://www.hpa.org.uk/web/HPAwebFile/HPAweb_C/1238055328357.
- 9 Includes patients requiring Level 3 intensive care. See guidance for infection control in critical care at <http://www.hpa.org.uk/web/HPAweb&Page&HPAwebAutolListName/Page/1191942171190?p=1191942171190>.
- 10 FFP3 standard masks, see HSE guidelines: <http://www.hse.gov.uk/biosafety/diseases/pandemic.htm>.