**Telephone Assessment/Triage of influenza like Illnesses (ILI) For Practice Nurses**

**IMPORTANT: Check that the patient is not experiencing any of the following, if so use your clinical judgement and act accordingly, by either ringing 111 for an ambulance or arrange appointment as appropriate with your practice:**

* **Chest pain**
* **Shortness of breath**
* **Confusion or disorientation**
* **“floppiness” in children**
* **Coughing up bloody sputum**
* **Has been vomiting for some time**
* **Unable to drink fluids, symptoms of dehydration**
* **Symptoms appear to have improved then suddenly become worse**
* **Are there other factors (medical, social or other) which put this person at risk?**
* **If you have any other concerns**

**Value of telephone assessment**

* Reduces risk of spreading infection in waiting rooms by seeing appropriate flu patients at appropriate times
* Helps to ensure that the sickest people are seen promptly
* Helps to manage the workload for the practice

**ABOUT INFLUENZA**

**Symptoms**

* Influenza-like illness is defined as history of fever, chills and sweating (or clinically documented fever =38°C), plus cough or sore throat
* Many people also have headache, muscle aches, and tiredness.
* Some people also have nausea, vomiting or diarrhoea.
* The illness lasts about a week in most people, although tiredness and cough can persist longer

**Incubation period**

* Influenza symptoms usually develop 1-4 days after contact with an infected person.

**Infectious period**

* People can be infectious to other people for a day before they develop symptoms
* Adults are considered to be infectious for 7 days after symptoms develop or until asymptomatic, whichever is longer
* Children are considered to be infectious for 7-10 days after symptoms develop or until asymptomatic, whichever is longer.
* Tamiflu reduces infectivity to about 72 hours (or until asymptomatic, whichever is longer or shorter) for both adults and children.

**Management**

* Symptomatic treatment (see “managing at home” appendix)
* Consider antiviral medication, especially for high risk patients. Limited usefulness unless started within 48 hrs of symptom onset.
* A small number of people will be very unwell and need hospital level care
* Reassessment for secondary infection may be required if illness improves then worsens

**PRIORITISING APPOINTMENTS FOR PATIENTS WITH ILI**

**High Priority - consider offering an appointment the same day**

1. **High risk patients**

* People who are immuno compromised or suppressed (transplantation, haematological and solid organ malignancy on chemotherapy/radiotherapy, HIV, autoimmune disorders, etc)
* Pregnant women and women who have given birth in the past 10 days
* People with chronic medical conditions, such as:
  + 1. Severe or poorly controlled congestive heart failure
    2. Severe chronic respiratory disease
    3. Asthma (especially people on oral steroids, high dose steroid inhalers, or steroids and long-acting beta-agonists, hospital admission in past year)
    4. Renal replacement therapy.
    5. Diabetes
* Obese patients
* Children under 5yrs

**2. People with febrile illness or respiratory illness that may not be influenza but require medical assessment:**

* Be wary of meningitis, cardiac pain, pulmonary embolus, pyelonephritis, CHF.

**Medium priority**

* People who live or work in high risk institutions eg (e.g. health care institutions, prisons, early child care centres).
* People with influenza symptoms of any severity who have been unwell for less than 48 hours and may consider treatment with Tamiflu

**Other considerations that will require clinical assessment:**

* People who have become more unwell during the course of their influenza
* People who had an obvious flu-like illness 2-3 weeks ago, and who now have a probable secondary infection e.g. earache without fever, cough, sore throat, increased cough and sputum, severe sinus pain.
* If the illness is clearly not influenza, , e.g. fever without respiratory symptoms, especially if there are other symptoms e.g. urinary tract symptoms

**Terminating the call:**

* Ensure that the patient is happy to manage at home before ending the call if an appointment is not required.
* Check “Managing in the home” advice as outlined below
* Advise every patient at the end of the call that if their symptoms worsen or they are concerned AT ALL to phone back
* Advise to phone for further advice if other family members become unwell

**If a patient does not require an appointment and is happy to manage their “flu” at home ensure the following advice – also refer to “Managing in the Home” Brochure**

## Hand Hygiene

Wash and dry your hands carefully to stop germs from spreading, particularly after going to the toilet, before eating and after being with a sick person.

* + - You can use plain soap and water to wash your hands. Wash them for at least 20 seconds and then dry thoroughly with a paper towel and throw it away.
    - You can also use an alcohol-based hand rub. Apply enough to keep your hands moist for a minimum of 20 seconds (about ½ teaspoon). Do not dry with a towel.
    - Keep germs out of any cuts, grazes, or areas of broken skin by covering them with a waterproof dressing.

1. **Cough Etiquette**

Cover your coughs & sneezes

* People who are coughing or sneezing need to avoid close contact with others.
  + - Cover your mouth and nose with a tissue when you cough or sneeze and put your used tissue into a rubbish bin.
    - If you don’t have a tissue, cough or sneeze into your upper sleeve, not your hands.
    - Don’t spit. Also cover your mouth and nose when clearing your throat or nose.
    - Always wash your hands after coughing or sneezing.

## Don’t get close to others

* Anyone with influenza must stay home from work and/or school until they are no longer sick. This could take up to two weeks.
* They may need someone to care for them but other people should be discouraged from visiting.
* If you have the flu and need supplies, ask a well relative or friend to collect them and deliver them to your door.
* To avoid getting sick during the influenza season stand at least one metre away from people in public, stand away from people who are coughing or sneezing and avoid physical contact e.g. handshaking, kissing, hugging.

## Keep rooms well aired

* Influenza can spread where there is not enough ventilation. Open your windows if the air is warm enough, or if you have an air conditioning system, make sure it is properly maintained.

## Care for those who are sick

* If someone in your family becomes sick phone your General Practice.
* Your doctor or practice nurse will advise you about what to do.
* People who are very overweight, pregnant or have other health problems such as asthma, heart disease and diabetes should contact their General Practice EARLY if they become sick, as they may benefit from antiviral medication.

### **Check for fever**

* A normal temperature is 37 degrees Celsius
* Having a fever is uncomfortable and may prevent the sick person from eating, drinking, or sleeping.
* The best medicine to treat fever, aches, and pains is paracetamol (or Panadol).
  + - * Adults should take one to two 500mg tablets every 4 - 6 hours. The maximum adult dose is eight tablets in any 24 hour period.
      * Children 6-12 years should take one tablet every 4 - 6 hours.
      * For children under six discuss the correct dose of liquid paracetamol with your General Practice or pharmacy.
* Do not wrap up or warm someone who has a fever, is shaking or has the ‘chills’.
* . A cool (not cold) wet facecloth to the forehead will help lower their temperature.

### **Sick people need to keep drinking:**

* They need up to two litres (eight cups) of fluid a day, even if they don’t feel thirsty.
* Water is fine but the best drinks are cold drinks that contain a little sugar and electrolytes
  + - Dilute soft drinks and fruit juice – but add plenty of cold water – a cup of juice to six cups of water. Stay away from fruit juice with too much pulp in it and milk drinks.
    - Breast milk for babies
    - Avoid drinks that contain alcohol and caffeine and let the sick person choose a non-alcoholic drink that they can manage. Vomiting and/or diarrhoea make dehydration worse, so ensure they keep taking fluids, even it is only small sips often.
    - Signs they aren’t getting enough to drink include weakness and lethargy, dizziness, headache, a dry mouth and dark-coloured urine.
    - If you are cannot assess the hydration state of your family member, or have concerns, please phone your General Practice.

### **Feeding those who are sick:**

* + - People with flu may not feel like eating. Do not try to get them to eat; it is more important to ensure they are having enough fluids.
    - When they begin to feel better, offer different fluids, eg diluted fruit juice, clear or strained soups, sweetened tea, or jelly.
    - Slowly introduce solids eg dry white toast, water crackers or pasta. Avoid anything that contains fats or oils.
    - Add canned fruit and thicker soups (chicken soup) to the range of foods, and lastly introduce milk and other milk products, together with fruit, vegetables, breads and cereals.

### **Prevent the spread of influenza:**

* + - Clean surfaces and objects that have been touched by the sick person daily. Influenza viruses can live up to 48 hours on hard surfaces. This means wiping telephones, door handles and toilet and bathroom areas, etc with a disinfectant or diluted bleach solution.
    - One of the most effective and cheapest disinfecting solutions to clean these surfaces is a solution of one teaspoon (5 ml) of bleach (such as Janola) to 500ml of water.
    - Do not share items such as eating utensils and drink bottles with other members of the family and ensure dishes are washed using hot water either by hand or dishwasher.
    - Wash clothes and linen in a washing machine and, if possible, hang on a clothes line. If linen is stained or contaminated with secretions then soak in a stain removing product and wash separately.

**Wearing masks at home is not necessary:**

* + - If the sick person is in a room with others, ensure that they wear a surgical mask at all times to prevent or minimize the spread of the virus when coughing or sneezing and replace if they become wet or damaged.
    - Dispose of used or damaged masks – put them into a plastic bag and then into the rubbish.
    - If you are not sick do not use a mask.
    - Wash hands regularly after any contact with the sick.

### **Keep a record of progress:**

* + - Note the sick person’s temperature, fluid intake, and symptoms.
    - This can be used to monitor any improvement or deterioration and in asking for advice.