



# Clinical Update

## *For Telephone Triage Nurses*

September-October 2009

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### **H1N1 Flu - The 10 Most Common Pediatric Calls**

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#### ***Dear Nursing Colleague:***

Our call center volume at the Children's Hospital of Denver is up 80% over the same time last year. All of the extra calls are about H1N1 flu. Our call center reviewed 100 calls and here are the 10 most common reasons (rank-ordered) that parents are calling after-hours

#### **1. Does she have H1N1 flu?**

*Response:* The classic symptoms of Swine Flu are a fever with cough and sore throat symptoms. Since your child has flu symptoms and Swine Flu is widespread in our community, then she probably has Swine Flu. You don't need to get any special tests to reach this conclusion. Currently the tests are only being used on patients who need to be hospitalized. Exception: if your child has a sore throat with fever and doesn't develop a cough, we need to consider a Strep infection.

#### **2. How can I make her feel better?**

*Response:* The treatment of Swine Flu depends on your child's main symptoms. Tell me your child's symptoms, and I can tell you what to do for each of them. For a blocked nose, use nasal washes with saline. For a cough, use honey (exception: under 1 year old). For a sore throat, use ibuprofen. (Consider emailing the Swine Flu treatment handout).

#### **3. She hurts everywhere, is that serious?**

*Response:* The Swine Flu illness can cause sore muscles everywhere: headache, neck and back pain, chest pain and leg pains. To make the sore muscles feel better, give ibuprofen because it can reduce the inflammation. To prevent stomach irritation, always give it with food.

**Notes for triage nurse:** These can be complicated symptoms to sort out. For leg pains, be sure the child can walk. For headaches, be sure the child is alert and doesn't have altered mental status. For chest pains, rule out any work of breathing, wheezing or stridor. For neck pain, rule out meningeal signs. If the pain is severe and incapacitating 90 minutes after taking ibuprofen, the child needs to be seen. Sometimes triaging again with a pain guideline will help you decide the best disposition.

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### H1N1 Flu - Ten Most Common Calls (Continued)

#### 4. Does she need to be seen?

*Response:* For serious symptoms such as trouble breathing, rapid breathing or dehydration, get seen now. For non-urgent symptoms such as an earache or sinus pain, get seen within 24 hours. But most children with Swine Flu don't develop any complications and can easily be treated at home.

**Notes for triage nurse:** Most admissions are for pneumonia with hypoxia, a tight asthma attack or dehydration.

#### 5. Does she need Tamiflu?

*Response:* The CDC recommends Tamiflu for anyone who develops severe symptoms. It's also recommended for High Risk children who come down with any flu symptoms. The High Risk children are mainly those with underlying chronic health problems or healthy children under 2 years of age. Tamiflu is not very helpful if more than 48 hours have passed since the start of the flu symptoms. Since your child is healthy and over age 2, she should do fine.

#### 6. Fever concern 1: The fever is so high.

Most of these calls are about 102 to 104 F degree fevers.

*Response:* Provide education: a high fever is over 104 F and a fever is not of concern unless it's over 105 F. Provide reassurance: Fever turns on the body's immune system and helps us fight infections. If your child is sick, having a fever is beneficial. Don't treat it unless it's above 102 F. Fevers are not harmful. (Consider emailing the Fever Facts and Myths handout).

#### 7. Fever concern 2: She still has a fever.

Most of these calls occur on day 3 of the fever.

*Response:* The fevers with the H1N1 virus normally last 2 or 3 days. If the fever lasts more than 3 days (72 hours), your child may need to be examined. More importantly, if the fever goes away for over 24 hours and then returns, we need to check your child for a secondary bacterial infection such as an ear infection.

### Children at HIGH RISK for Complications from H1N1

- ◆ Age less than 2 years.
- ◆ Chronic heart, lung, or kidney disease
- ◆ Chronic muscle or metabolic disease
- ◆ Malignancy or immune-suppression
- ◆ Pregnancy
- ◆ Sickle cell disease.
- ◆ Diseases requiring long-term aspirin therapy (e.g., Kawasaki's disease)



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#### 8. Fever concern 3: Can I alternate Tylenol and ibuprofen?

*Response:* It's rarely necessary and we don't recommend it. However, if your child's doctor recommends it, we suggest you only do it for fevers over 104 F and unresponsive to 1 medicine alone. The safe way to alternate fever meds is to give one of the medicines every 4 hours and change it each time. Don't use alternating medicines for more than 24 hours, because of the risk of over-dosage. (Consider emailing the Acetaminophen and Ibuprofen drug dosage tables).

#### 9. Cough concerns: The fever is gone; why is she still coughing?

*Response:* The fever goes away when your body's immune system starts producing antibodies against the virus. But the cough will normally continue for 2 or 3 weeks because of the damage to the lining of the throat and windpipe. Remember that recent research showed that honey was much more effective than OTC cough medicines at quieting coughs. If the coughing is non-stop and interferes with normal activities, however, have your child seen to rule out underlying asthma. Asthma occurs in 10% of children and has good medicines to control it.

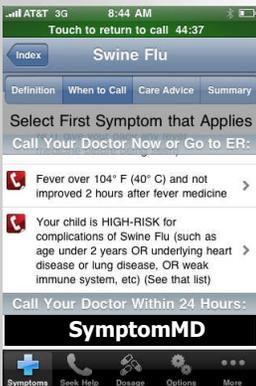
#### 10. Vomiting concerns: Why is she vomiting?

*Response:* Vomiting can be a part of the Swine Flu illness. Treat it the usual way with small amounts of clear fluids every 5-10 minutes. Sometimes the vomiting is severe. Have your child seen if it causes dehydration or if isolated vomiting without diarrhea lasts over 48 hours. (Reason: could have another cause). If your child only vomits after taking Tamiflu, try to hide the bitter flavor in foods such as chocolate pudding. If vomiting continues, the Tamiflu may need to be stopped. If the fever is high, don't forget you can use Tylenol suppositories. (same dosage as oral Tylenol).

**Summary:** Parents are fearful about H1N1 Flu. Usually their fears will respond to your calm voice and reassurance. Listen carefully, determine the caller's main concerns, give targeted reassurance and help the caller put their child's mild or moderate illness into perspective. Underscore that H1N1 is behaving like Seasonal Flu and most children handle it well and recover easily.

Bart Schmitt, MD, FAAP

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Clinical Content



**SymptomMD**, the Schmitt-Thompson App for iPhone, has been updated to include parallel H1N1 (Swine Flu) information.