WHO PANDEMIC ALERT PHASE 5: Algorithm for the management of returning travellers and visitors from countries affected by swine influenza A/H1N1 presenting with febrile respiratory illness: recognition, investigation and initial management

**SCREENING & ASSESSMENT**

Patients must fulfil a condition/test in both boxes (1) and (2)

(1) CLINICAL
Fever \(\geq 38^\circ C\) or history of fever AND EITHER flu-like illness (two or more of the following symptoms: cough, sore throat, rhinorrhea, limb/joint pain, headache.\(^1\)) OR other severe/life-threatening illness suggestive of an infectious process.

AND

(2) GEOGRAPHICAL
Onset of symptoms within seven days of visiting areas where sustained human-to-human transmission of swine influenza A/H1N1 is occurring:
- Mexico
- United States (California; New York; Texas)

**Infection Control & Reporting**

As soon as the patient mentions a febrile respiratory illness and travel to an area of the world affected by swine flu A(H1N1) within 7 days of illness onset, the following precautions should be taken before continuing with the assessment.

**Primary Care/Community:**
- **Location:** At patient’s home if possible; if not, away from communal areas
- **Patient:** facemask
- **Staff:** facemask, plastic apron and gloves

**Hospital:**
- **Location:** Side room
- **Patient:** facemask
- **Staff:** facemask, plastic apron and gloves

If admitted to hospital, inform hospital infection control and occupational health. Inform local laboratory of sample status.

**Pediatric**

**Inpatient**

**Preventive**

**Non-pediatric**

**Post-acute**

**Follow-up**

**FLU A NEGATIVE**

Investigate as clinically appropriate. Discontinue oseltamivir AND remove from strict respiratory isolation as appropriate. Discharge if appropriate. Discontinue oseltamivir in contacts. Follow-up until symptoms resolve if alternative diagnosis is not established. Consider HPA protocol for other undiagnosed serious illness.\(^2\)

**FLU A POSITIVE**

Inform local HPU immediately. Local HPU inform CfI duty doctor immediately and consider prophylaxis of contacts (see P5 algorithm). HPU staff to use Avian Influenza Management System (AIMS) database to collect patient’s data, for the current time.

**Footnotes:**
1. Vomiting and diarrhoea have been a feature of some of the confirmed US cases.
3. 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.bnf.org/bnf/bnf/current/119743.htm](http://www.bnf.org/bnf/bnf/current/119743.htm)
4. FFP3 standard masks, see HSE guidelines: [http://www.hse.gov.uk/biosafety/diseases/avianflu.htm](http://www.hse.gov.uk/biosafety/diseases/avianflu.htm)

In case of uncertainty, discuss with local Health Protection Unit.