

KEY POINTS

- COVID-19 cases are surging
- Influenza is coming soon
- COVID-19 and flu symptoms are nearly the same
- Efficient triage needs both infections covered in one guideline

AUTHOR

Barton Schmitt, MD

COVID-19 and Influenza: Double Trouble this Winter

A major change in the November update of the COVID-19 Diagnosed or Suspected guideline was to incorporate influenza calls. This change was made in both the pediatric and adult After Hours and Office Hours guidelines. All COVID-19 updates have been released to our distributor partners. Our goal was to prevent the need to use two guidelines when influenza is also in the community.

HOW WE COMBINED COVID-19 AND INFLUENZA TRIAGE

The following triage questions were added to the COVID-19 Diagnosed or Suspected guideline:

Call PCP within 24 hours

[1] Influenza also widespread in the community AND [2] mild flu-like symptoms with fever AND [3] HIGH-RISK patient for complications with Flu (See that CDC List)

Reason: may need testing for influenza and COVID-19. If positive for flu. PCP will decide if antiviral meds would be helpful for this patient.

Note to Triager: SEVERE RISK patients (those with serious chronic disease at risk for respiratory compromise or sepsis) will continue to be referred urgently to: **Call PCP Now.**

Call PCP when Office is Open

[1] COVID-19 infection suspected by caller or triager AND [2] mild symptoms (cough, fever, or others) AND [3] no complications or SOB

Reason: PCP will discuss if any testing is needed for COVID-19 or influenza

See More Appropriate Guideline

The following 2 statements were also added to manage calls about patients who already have been diagnosed with Influenza:

[1] Diagnosed with influenza within the last 2 weeks by HCP AND [2] follow-up call
Go to Guideline: Influenza (Flu) Follow-up Call (Pediatric)

[1] Household exposure to known influenza (flu test positive) AND [2] child with
influenza-like symptoms
Go to Guideline: Influenza (Flu) - Seasonal (Pediatric)

REASONS WHY COVID-19 AND INFLUENZA INFECTIONS CAN BE MANAGED USING ONE GUIDELINE

There are several reasons why the COVID-19 Diagnosed or Suspected guideline can be used simultaneously for calls about patients with suspected COVID-19 and also for those with suspected Influenza.

- **Presenting Symptoms** are nearly identical. For that reason, the two infections cannot be differentiated based on symptoms alone. Only exception: loss of taste or smell is more specific for COVID.
- **Triage** is the same. Rule out serious symptoms and complications of respiratory infections. The nurse can complete triage for both at same time. However, the rate of complications is much higher with COVID-19.
- **Viral Tests.** Tests are available for both viruses. Testing is the only way to reach an accurate diagnosis.
- **Care Advice** is the same. Treat the symptoms that bother the patient the most. Provide symptom relief as needed for the cough, sore throat, muscle aches and fever. Drink extra fluids and stay well hydrated.
- **Oral Antivirals** are only available for patients with influenza who are considered at High-Risk for complications. Those risk factors need to be recognized and addressed.
- **High-Risk Patients for Complications:** the long-established CDC list of High-Risk chronic diseases for complications with influenza is similar to the evolving list for patients with COVID-19. It can be used for both.

- **Prevention.** Wearing face masks, extra hand washing and social (safe) distancing have been proven helpful for both infections.
- **Why COVID-19 Guideline was Chosen to Cover Both:** Influenza is seasonal. COVID-19 is not seasonal. It will not go away in six months like influenza. Also, home isolation is required for patients suspected of having COVID-19 to prevent further spread in the community.

NEW PEDIATRIC HANDOUT FOR CALLS ABOUT COVID-19 VERSUS INFLUENZA

Since March 2020, the pediatric COVID-19 triage and advice guidelines have also provided three related handouts for callers. We recently added a new one to deal with the arrival of Influenza. **The new one accompanies this article as a separate pdf document for your use.** The updated COVID-19 Pediatric Care Advice handouts were sent to distributor partners on November 6th. Below are the titles of the COVID-19 pediatric handouts:

- COVID-19 Prevention
- COVID-19 Exposure (Close Contact)
- COVID-19 Diagnosed or Suspected
- COVID-19 or Influenza: How to Tell

Pediatric Care Advice is a collection of 287 parent handouts matched to After Hours and Office Hours guidelines by name. They can easily be sent by email or text at the end of the call. They can also be routed to the patient portal. For office in-person or telemedicine visits (virtual visits), they also are matched to diagnoses and ICD-10 codes.

Pediatric Care Advice handouts align with the home care advice provided by triage nurses. The intent of the handouts is to expand upon the care advice voiced by the pediatric nurse and reinforce parent memory for the spoken instructions. Use of care advice handouts can also reduce call times in this busy season.

PEDIATRIC SYMPTOM CHECKER AND COVID-19

For those of you who use the pediatric symptom checker, the self-triage, self-care guides for COVID-19 have also been updated on a regular basis.

Here is a direct link to the November 6th update of the Coronavirus Diagnosed topic:

<https://www.selfcare.info/covid-news>.

Over 20 children's hospitals and thousands of pediatric offices use the symptom checker to educate parents and offload some of the unnecessary calls about COVID-19.

EXPERT REVIEWER OF NEW COVID-19 HANDOUT

Jessica Cataldi, MD, Pediatric Infectious Disease and Epidemiology specialist,
Children's Hospital Colorado

TRUSTED WEBSITES FOR COVID-19 DAILY UPDATES

CDC website: <https://www.cdc.gov/coronavirus>

American Academy of Pediatrics parent website: www.healthychildren.org

AUTHOR

Barton Schmitt, MD, FAAP

Pediatric Medical Editor, Schmitt-Thompson Clinical Content, LLC

Past Medical Director 1988-2019, Pediatric Call Center, Children's Hospital Colorado

Professor of Pediatrics, University of Colorado School of Medicine