

Swine flu paediatric community assessment tool

For use in all children under 16 years old in the community.

This assessment tool should be used during a pandemic situation to assist with the decision as to whether a sick febrile child with flu-like illness needs referral to the nearest general hospital Emergency Department. The majority of children are expected to be managed in the community.

Respiratory failure, overwhelming gastroenteritis, shock, heart failure and encephalitis are the most likely modes of critical illness in children suffering from swine flu. Complications such as sepsis and meningitis may co-exist.

Criteria label	REFER CHILDREN TO THE NEAREST GENERAL HOSPITAL EMERGENCY DEPARTMENT IF THEY PRESENT WITH ANY OF THE FOLLOWING:
A	Severe respiratory distress Lower chest wall indrawing, sternal recession, grunting, or noisy breathing when calm.
B	Increased respiratory rate measured over at least 30 seconds. ≥50 breaths per minute if under 1 year, or ≥40 breaths per minute if ≥1 year.
C	Oxygen saturation ≤92% on pulse oximetry, breathing air or on oxygen Absence of cyanosis is a poor discriminator for severe illness.
D	Respiratory exhaustion or apnoeic episode Apnoea defined as a ≥20 second pause in breathing.
E	Evidence of severe clinical dehydration or clinical shock Sternal capillary refill time >2 seconds, reduced skin turgor, sunken eyes or fontanelle.
F	Altered conscious level Strikingly agitated or irritable, seizures, or floppy infant.
G	Causing other clinical concern to their own GP or clinical team e.g. a rapidly progressive or an unusually prolonged illness.

Further information

- This tool is designed to support and empower all healthcare professionals working in difficult circumstances with limited resources, but does not supersede a decision by an experienced clinician about whether, when or where to refer a child.
- The assessment applies to all children under 16 years old and is independent of any prior or existing medical condition.
- **Infants less than 2 months old with increased respiratory rate and sternal recession should be referred promptly to the nearest hospital because they are at high risk of suffering severe illness or death.**
- Fever alone is not used as a criterion for referral to hospital in children over 3 months of age, as it is a poor discriminator for severe illness.
- Difficulty in feeding indicates a need for assessment but is not by itself a good measure of severe illness.
- When referral is not indicated, a copy of the home care advice leaflet should be provided, with encouragement to call again should the child's condition deteriorate.
- Every assessment should include a record of the time of assessment and time of onset of illness. Referrals must include the criteria label(s) to assist with the treatment of children on arrival at hospital.

The Swine Flu Paediatric Community Assessment Tool is endorsed by: The Royal College of General Practitioners, The Royal College of Paediatrics and Child Health, The Royal College of Nursing, The Royal College of Midwives, The College of Emergency Medicine, The Directors of Clinical Care of UK Ambulance Trusts, The British Medical Association and Unite/The Community Practitioners' and Health Visitors' Association.

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