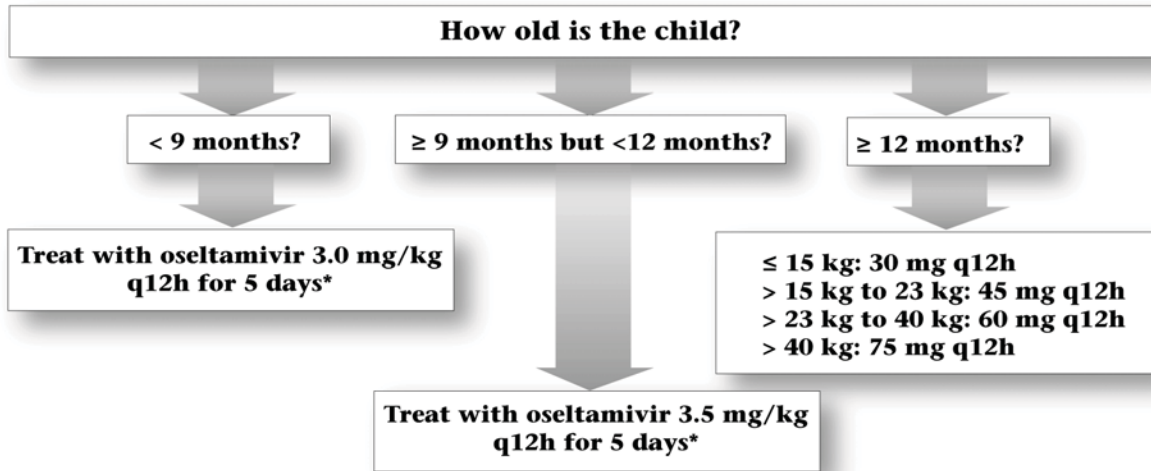


Treatment Algorithm for Children < 5 years of Age using Oseltamivir



*D Kimberlin et al. Oseltamivir (OST) and OST Carboxylate (CBX) Pharmacokinetics (PK) in Infants: Interim Results from a Multicenter Trial. Abstract accepted to Infectious Diseases Society of America meeting, October 2009.

Note A: Where supplies of N95 respirators and other personal protective equipment (PPE) are limited or depleted, N95 respirator and PPE use by healthcare workers should be prioritized as recommended in chapter 7 of the OHPIP (www.health.gov.on.ca/english/providers/program/emu/pan_flu/ohpip2/ch_07.pdf). If an N95 respirator is not available, health care workers are advised to don a surgical mask wherever an N95 respirator is called for and, if possible, to put a surgical mask on their patient.

Note B: Tamiflu® adult renal impairment dosing (for patients with creatinine clearance (CrCL) between 10 mL/min and 30 mL/min) is 75 mg once daily for 5 days. Not recommended for use when CrCL is less than 10mL/min. No recommended dosing regimens are available for patients undergoing routine hemodialysis and continuous peritoneal dialysis treatment with end-stage renal disease.

¹ Risk Factors

- People with chronic health conditions, including
 - Cardiac disease
 - Pulmonary disorders, particularly asthma
 - Diabetes mellitus and other metabolic diseases
 - Cancer
 - Immunodeficiency (e.g. HIV)
 - Immunosuppression (e.g. transplant patients)
 - Renal disease
 - Anemia or hemoglobinopathy
 - Conditions that compromise the management of respiratory secretions and are associated with an increased risk of aspiration – e.g. chronic neurologic/neuromuscular/cognitive disorders that increase risk of aspiration
- Morbid obesity (i.e. BMI>40)
- People > 65 years old
- Children < 5 years old (risk greater <2 years old)
- Children <18 on long-term acetylsalicylic acid therapy
- Pregnant women and women up to 4 weeks post-partum (The risk of developing complications from pH1N1 is higher later in pregnancy – 2nd and 3rd trimester – and up to 4 weeks post-partum)
- Persons living in rural areas remote from hospital care (e.g. remote First Nations communities)
- Residents of long-term care homes (most of whom have chronic conditions that put them at risk of complications)

² Abnormal Vital Signs

- One or more of pulse, blood pressure, respirations and O₂ saturation by pulse oximetry if available, that are not within range of normal for age and health status. Hypotension, tachycardia and tachypnea may be early indicators of serious illness

³ Worsening Clinical Status

- Progression of signs and symptoms (including increasing signs of pneumonia, dyspnea, prostration, hypotension, tachycardia and tachypnea, dehydration, shock) indicative of pending serious illness and hospitalization