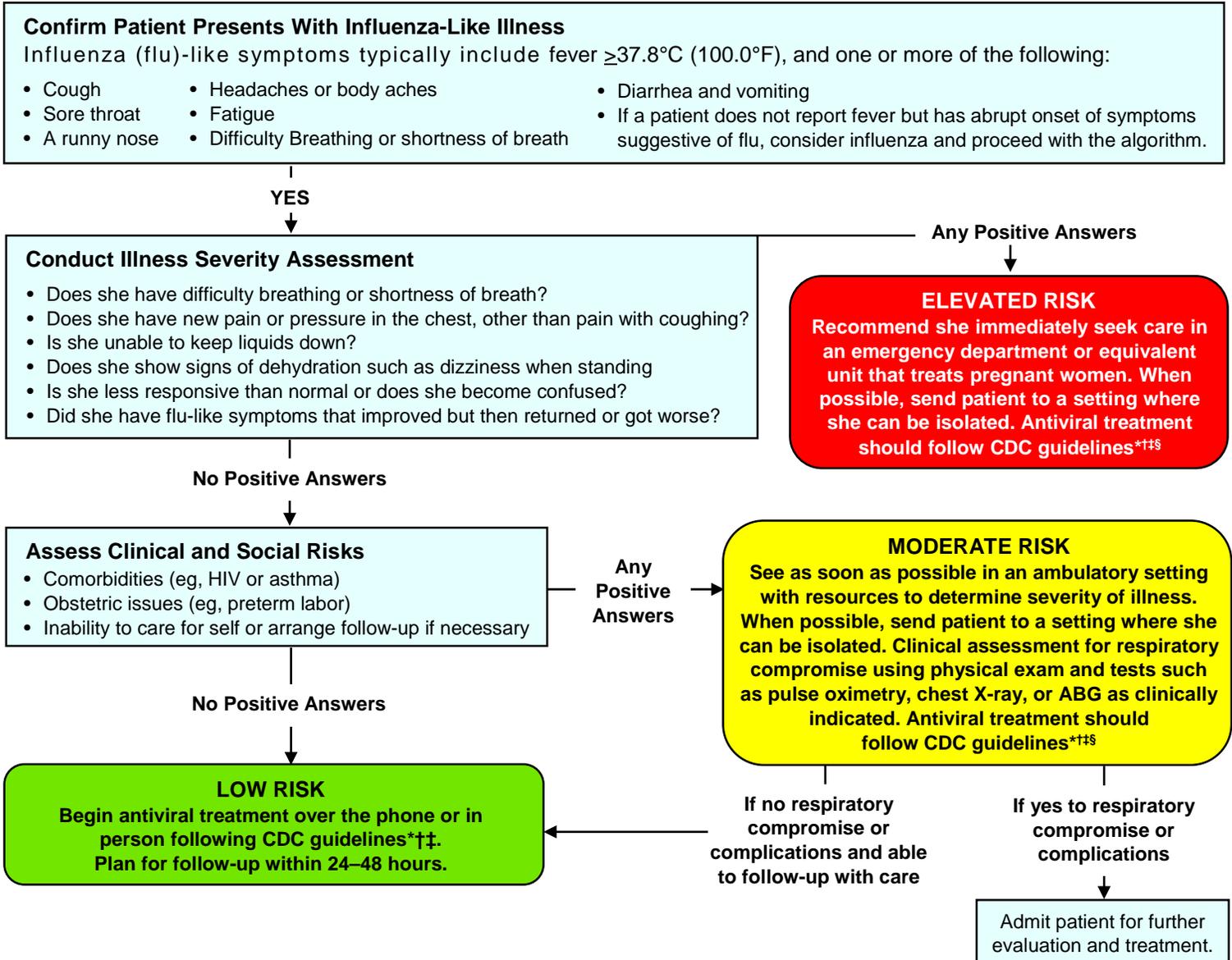




Influenza Season Assessment and Treatment for Pregnant Women With Influenza-Like Illness

Pregnant women are at high-risk for serious complications of influenza infection such as ICU admission, preterm birth and maternal death. The following Algorithm is designed to aid practitioners in promptly assessing and treating influenza-like illness in pregnant women.



*Oseltamivir: 75-mg PO twice per day for 5 days or Zanamivir: Two 5-mg inhalations (10 mg total) twice per day for 5 days

†Check with institution to determine requirements for testing. Do not rely on test results to initiate treatment; treat presumptively based on clinical evaluation.

‡Patient with influenza-like illness should be treated with antiviral medications presumptively regardless of vaccination status.

§Treatment within 48 hours of the onset of symptoms is ideal but should not be withheld if the ideal window is missed.

Abbreviations: ABG, arterial blood gases; CDC, Centers for Disease Control and Prevention; HIV, human immunodeficiency virus.

Vaccination with seasonal influenza will help reduce incidence of flu. Check the College's Immunization for Women website at www.immunizationforwomen.org for any future updates on this information.

This information is designed to aid practitioners in assessing and treating influenza-like illness during pregnancy. This guidance should not be construed as dictating an exclusive course of treatment or procedure. Variations in practice may be warranted based on the needs of the individual patient, resources, and limitations unique to the institution or type of practice.