

Influenza H1N1 Virology Sampling and Oseltamivir Dose

Patient with suspected/known H1N1 in Critical Care:

Day 1. Respiratory secretions for viral respiratory pathogen PCR testing.
E.g. sputum, tracheal secretions, bronchial washings.
If not ventilated, nose/throat swab in VTM
(throat swab is less optimal)

IF DAY 1 POSITIVE:

Day 5. Repeat Respiratory secretions for viral respiratory pathogen PCR

IF DAY 5 POSITIVE:

Day 10. Repeat Respiratory secretions for viral respiratory pathogen PCR

IF ANY OF THESE IS NEGATIVE, ISOLATION NOT REQUIRED
IF ANY POSITIVE, KEEP ISOLATED AND REPEAT SAMPLES AT 5 DAY INTERVAL

Other Tests Which MAY Be Useful (d/w Virology/Microbiology):

- EDTA plasma for H1N1v PCR to assess extra pulmonary involvement
- CSF may be taken if clinically indicated ?Encephalitis
- All positive H1N1 samples are tested for oseltamivir resistance routinely

Oseltamivir Dose:

- Treatment – Oseltamivir – 75mg bd for 5 days
- Decrease dose to 30 mg bd if Renal Failure with Cr Cl<30ml/min or on CVVH/RRT
- In severe immunocompromised cases or poor GI adsorption use IV zanamivir (on named patient basis)
- Pregnant- No differences to above options.
- Do NOT nebulise Zanamivir (Relenza) powder.

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	Authors: Drs Kate Templeton, John Bremner, Brian Cook
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