

## **“FLU FACTS”**

**Target:** All community members over 6 months of age

**Dose:**

<b>AGE</b>	<b>Dose (mL)</b>	<b>Number of Doses</b>
6 – 35 months	0.25 mL	1 or 2 (as indicated)
3 – 8 years of age	0.50 mL	1 or 2 (as indicated)
> 9 years of age	0.50 mL	

**Children:** (< 9 years)

If they received a flu shot last year:

- ▶ receive one dose, according to above table

If they did not receive a flu shot last year:

- ▶ receive two doses, according to above table separated by a 4 week interval

**Route:** IM

**Contraindications:**

- anaphylactic reaction to previous flu shot
- anaphylactic hypersensitivity to eggs
- acute febrile illness

# Influenza Like ILLNESS

ILI Visit

Date: \_\_\_\_\_ Time: \_\_\_\_\_ AM PM Name: \_\_\_\_\_  
 Fort Severn Nursing Station DOB: \_\_\_\_\_  
 Temp: \_\_\_\_\_ HR: \_\_\_\_\_ RR: \_\_\_\_\_ SpO<sub>2</sub>: \_\_\_\_\_ Band: \_\_\_\_\_ File: \_\_\_\_\_  
 BP: \_\_\_\_\_ Wt: \_\_\_\_\_ RBS: \_\_\_\_\_ HC: \_\_\_\_\_

Presenting complaint: \_\_\_\_\_  
 \_\_\_\_\_

Review of symptoms	Yes	No	Description
Temperature			
Cough			
SOB			
Sneeze			
Runny Nose			
Throat			
Myalgia (Muscle pain)			
Anorexia			
Drinking			
Diarrhea			
Other			

Social and family contacts with ILI or diagnosis: Yes NO  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Tylenol: \_\_\_\_\_ Dose: \_\_\_\_\_ Frequency: \_\_\_\_\_ Time of last dose: \_\_\_\_\_  
 Ibuprofen: \_\_\_\_\_ Dose: \_\_\_\_\_ Frequency: \_\_\_\_\_ Time of last dose: \_\_\_\_\_  
 Postpartum: (≤ 6 weeks): Yes

PMHx \_\_\_\_\_  
 Asthma \_\_\_\_\_  
 DM<sup>2</sup> \_\_\_\_\_  
 Renal \_\_\_\_\_  
 IHD \_\_\_\_\_  
 COPD \_\_\_\_\_  
 Lupus/RA \_\_\_\_\_  
 Cancer \_\_\_\_\_  
 Other \_\_\_\_\_

MEDS: \_\_\_\_\_  
 Prednisone: \_\_\_\_\_  
 Chemo: \_\_\_\_\_  
 Immunosuppressive: \_\_\_\_\_  
 Other: \_\_\_\_\_ See med profile  
 Recent illness: \_\_\_\_\_  
 Allergies: \_\_\_\_\_