

## How to Care for Someone with Influenza

### MONITORING AND COMFORTING THE PATIENT

- Keep a care log. Record information about the ill person (such as temperature, unusual skin color or rash, quantity of fluids consumed) at least once a day, plus date and time.
- Keep the ill person as comfortable as possible. Rest is important.
- Keep tissues and a trash bag for their disposal within reach of the patient.



- Keep in mind that fever is a sign that the body is fighting the infection. It will go away as the patient gets better. Sponging with lukewarm water may lower the patient's temperature, but only during the period of sponging. Do not sponge with alcohol.
- Watch for complications. Call your healthcare provider or the pandemic flu hotline if the ill person:
  - Has difficulty breathing, fast breathing, or bluish color to the skin or lips
  - Begins coughing up blood
  - Shows signs of dehydration and cannot take enough fluids
  - Does not respond appropriately or appears confused
  - Complains of pain or pressure in the chest
  - Has convulsions
  - Gets worse again after appearing to improve
  - Is an infant younger than 2 months old with fever, poor feeding, urinating less than 3 times per day or other signs of illness

### MEDICATIONS

- Use ibuprofen or acetaminophen or other measures, as recommended by your healthcare provider, for fever, sore throat and general discomfort.
- Do not use aspirin in children or teenagers with influenza because it can cause Reye's syndrome, a life-threatening illness.

### FLUIDS AND NUTRITION

- If the patient is not vomiting, offer small amounts of fluid frequently to prevent dehydration, even if he or she does not feel thirsty. If the ill person is not eating solid foods, include fluids that contain sugars and salts, such as broth, sports drinks (diluted half and half with water), Pedialyte® or Lytren® (undiluted), sodas, but not diet drinks.
- If the patient is vomiting, do not give any fluid or food for at least 1 hour. Next, offer a clear fluid in very small amounts. If the patient vomits, let the stomach rest again for an hour. Again, try to give small frequent amounts of clear fluid. When there is no vomiting, gradually increase the amount of fluid offered and use fluids that contain sugars and salts. After 6-8 hours of a liquid diet without vomiting, add solid food that is easy to digest, such as saltine crackers, soup, or rice.
- Babies who are breast-fed and vomiting can continue to nurse, but offer smaller amounts.
- Make sure the patient avoids drinking alcohol and using tobacco.
- Watch for signs of dehydration. Someone who is dehydrated may have:
  - Weakness or unresponsiveness
  - Decreased saliva/dry mouth and tongue
  - Decreased output of urine, which becomes dark in color. Ill persons who are getting enough fluids should urinate at least every 8-12 hours.
- If the ill person is dehydrated, give a generous amount of fluid through frequent sips or spoonfuls over a 4-hour period. Watch for an increase in urination, a lighter color of the urine, and improvement in the patient's overall condition.