

Caring for Someone with Influenza at Home



During this influenza (“flu”) outbreak, some people will need care at a hospital. **But many influenza patients must be cared for at home.** This handout will help you care for an influenza patient — a friend or family member — at home. Follow these instructions carefully, as well as any others the doctor gives you.

Protect yourself and prevent the spread of flu.

- Wash your hands often — especially after touching things that have been used or touched by the patient.
- Wear a mask when you’re with the patient.
- Cover your coughs and sneezes with your elbow.
- **Keep a trashcan near the patient’s bed, and line it with a plastic bag.** Toss every used tissue, straw, etc. Seal the plastic bag before emptying it into the garbage.
- Take care of yourself. Get plenty of rest and exercise, and make healthy food choices.

Keep the patient comfortable.

- Let the patient sleep or rest as much as they like. This will help the patient recover.
- Treat aches and fever with medication (see below). Sponging the patient’s body with lukewarm (wrist-temperature) water may lower the patient’s temperature, but only for a brief time. Do not sponge with alcohol.

Give medication as directed.

- For pain and fever, give ibuprofen (Advil or Motrin) or acetaminophen (Tylenol) regularly, as instructed on the bottle or box. Do not give aspirin to children or teenagers because it can cause Reye’s syndrome, a life-threatening illness.
- For flu or any other medical condition the patient has, follow the doctor’s advice carefully. If you have any questions about medication, contact the patient’s doctor.

Prevent dehydration.

Our bodies need fluids to function well. But sickness can lead to dehydration (lack of fluid in the body). To prevent this, do the following:

- Unless the patient is vomiting (throwing up), offer small amounts of liquids frequently throughout the day. Do this even if the patient doesn’t feel thirsty and especially if the patient has a fever. (A person with a fever needs more fluids than usual.) Here are some targets for patients of different ages:

- For young children, give 1½ ounces of liquid per pound of body weight every day (multiply 1.5 times the weight of the child). For example, a toddler weighing 30 pounds needs 45 ounces of liquid a day (30 x 1.5 = 45).
- For older children and adults, give at least 1½ to 2½ quarts of liquid per day — 3 to 5 eight-ounce cups or 2 to 3 twelve-ounce cans or bottles.
- If the patient isn’t eating solid foods, offer liquids that contain sugars and salts. For example, offer broth or soups, sports drinks like Gatorade® mixed with water (aim for half water, half sports drink), Pedialyte® or Lytren® drinks, and any soda that is NOT diet and does NOT have a lot of caffeine.
- Pay attention to how much the patient urinates (pees). (Dehydration causes people to urinate less often and the urine to have a dark yellow color.) An infant should have at least 3 wet diapers in 24 hours. An adult should urinate at least every 8 to 12 hours. If the patient is not meeting these targets, offer frequent sips and spoonfuls of liquids for a 4-hour period, and watch for signs of dehydration (see “Call the doctor” at the end of this handout).

Limit food and drink to a patient who is vomiting (throwing up). Follow this procedure:

- For 1 hour after a patient vomits, don’t give any liquid or food. Let the stomach rest.
- Next, offer a very small amount of clear liquid such as water, weak tea, ginger ale, or broth. Start with 1 to 3 teaspoons of clear liquid every 10 minutes (or give the patient an ice cube to suck on). If the person vomits, let the stomach rest for an hour, then try again with small, frequent amounts of clear liquid.
- When there is no vomiting, gradually increase the amount of liquid offered, and add liquids that contain sugars and salts. After 6 to 8 hours of a liquid diet without vomiting, add foods that are easy to digest, such as saltine crackers, dry toast, mashed potatoes or rice. Gradually, return to a regular diet.

Note: Continue to breastfeed a baby who is vomiting. Let the baby nurse more often — for 4 to 5 minutes every 30 to 45 minutes or so. You can also give the baby small amounts (½ ounce or less) of Pedialyte or Lytren every 10 minutes in a bottle.

Keep a daily record of symptoms

If the patient should need further medical attention, detailed information will be helpful to the doctor. Write down the following information every day:

- **Temperature.** Using an oral or ear thermometer, take the patient's temperature at least once a day (more often if symptoms change). Write down the reading along with the date and time.
- **Skin condition.** Once a day — more often if symptoms change — note the patient's skin color (pink, pale or bluish) or whether there is a rash.
- **How much liquid the patient drinks.** Write down the approximate number of ounces taken in during the day and through the night.
- **Urination.** Record how many times the patient goes to the bathroom each day and the color of the urine (clear to light yellow, dark yellow, orange, brown, or red).
- **Medications given.** For every medication you give the patient, write down what you gave, how much you gave, and the time you gave it.
- **Symptoms.** Write down any changes in these common flu symptoms:
 - Fever (often high — should go away as the patient gets better)
 - Headache
 - Tiredness (can be extreme)
 - Cough
 - Sore throat
 - Runny or stuffy nose
 - Body aches
 - Nausea and vomiting
 - Diarrhea (more common in children than adults)

Call the doctor if you notice any of the following:

- **Signs of dehydration that continue** even after 4 hours of increased liquids as described in the “Prevent dehydration” section. Signs of dehydration include:
 - Weakness or unresponsiveness
 - Dry mouth and tongue, decreased saliva (spit)
 - Dry eyes (and no tears if crying)
 - Sunken eyes
 - Urinating less than 3 times in 24 hours
- **Worsening symptoms** (especially if the patient seems worse after appearing to improve)
- **An infant younger than 2 months old** has a fever, is **feeding poorly**, or has **fewer than 3 wet diapers in a 24 hour period.**

Call 911 or take the patient to the hospital emergency room if you notice any of these complications:

- **Difficulty breathing, fast breathing, or bluish color to the skin or lips**
- **Coughing up blood**
- **Difficulty responding or communicating, confusion**
- **Convulsions (seizures)**

