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# Flu Treatment and Prevention: What Techs Need to Know

**Flu Treatment and Prevention: What Techs Need to Know**

**Top Takeaways**

- *Be ready to fill antivirals ASAP for high-risk patients.*
- *Watch oseltamivir sigs, days' supply, and doses closely.*
- *Double-check baloxavir doses with the patient's weight.*

An early surge in influenza in some parts of Canada will bring **questions about flu antivirals (Tamiflu, Xofluza, etc).**

**Prioritize flu antiviral Rxs**. Help patients at high risk for complications...such as kids under age 5, adults age 65 and up, or patients who are pregnant...start treatment ASAP.

Ask patients getting oseltamivir (Tamiflu) or baloxavir (Xofluza) for their weight. The pharmacist needs this to double-check dosing.

Update med lists and patient profiles...to help ensure safe use. For instance, baloxavir absorption can be reduced by dairy, antacids, or supplements with calcium, iron, magnesium, or zinc.

Expedite any payer or inventory issues. Antivirals work best when started within 48 hours of symptom onset...but high-risk patients still benefit if started later.

**Expect most high-risk patients to get oseltamivir.** It's preferred in pregnancy, severe illness, and young kids and costs about $11 for 5 days.

Watch sigs closely. Most adolescents and adults will get oseltamivir 75 mg TWICE daily for 5 days for treatment...and the usual prophylaxis dose is 75 mg ONCE daily.

Don't be surprised to see lower oseltamivir doses, such as 30 mg once or twice daily, for patients with kidney impairment.

Add a "Take with food" label to oseltamivir Rxs...to limit nausea.

**Know that baloxavir is a one-dose option.** It seems to work as well as oseltamivir for uncomplicated flu treatment...with less nausea. But it's only approved for patients age 12 and up...and costs about $175.

Double-check baloxavir doses with the patient's weight. It's one 40 mg dose for patients 20 kg to under 80 kg...and 80 mg for 80 kg and up.

Flag baloxavir Rxs for patients who are pregnant, breastfeeding, or severely ill or immunocompromised for the pharmacist to review. Data are lacking in these patients.

**Recognize post-exposure prophylaxis Rxs.** Anticipate them during nursing home outbreaks...for unvaccinated household contacts of a high-risk person...and for patients who are immunocompromised.

Watch days' supply...the length of treatment varies. For instance, some immunocompromised patients may take oseltamivir for up to 12 weeks.

Refer patients with flu symptoms to the pharmacist for OTC help.

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Encourage flu vaccines as long as flu is circulating...along with fluids, rest, handwashing, staying home when sick, etc.

See our chart, *Antivirals for Influenza*, for other meds (Relenza, etc)...and use our *Flu Vaccines for 2026-2027* chart for guidance.

**Key References:**

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