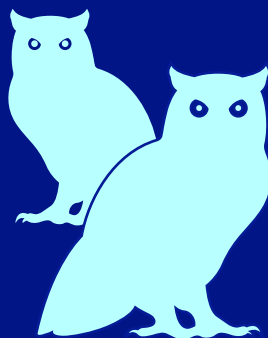


Are you
sure it's
really

FLU???

Your differentials go way beyond “just” sepsis!

“Flu-like illness”, like other dangerous descriptions such as “off-legs”, “acopia” and “social admission” may be a deadly trap. Be careful!



During a flu outbreak, when flu is common, our (lazy!) human brain will try to make us short-cut to a flu diagnosis, a cognitive bias called “availability heuristic”

“Trust,
but verify”

Russian
proverb

Beware the pre-labelled patient:
Patients who are referred to you already carrying a label of “flu” (e.g. from family, triage nurse, GP, ED, or paramedics) need objective assessment too.

Worldwide confessions from Twitter:

Here's some we got wrong earlier

Some are fairly obvious differentials for flu...

- Pneumonia
- Pulmonary Embolism

Other infections less so!

- TB (“Tamiflu didn't help...”)
- Leptospirosis
- Scarlet Fever

There's definitely a respiratory theme:

- Pulmonary oedema/ Heart Failure
- Myocardial infarction
- “Non cardiac chest pain”(Tn >5000!)
- Primary lung cancer
- DKA (1st presentation)

And finally, from the scary to the niche!

- Lymphoma
- Addisonian crisis
- Disseminated malignancy
- Stroke
- Hyperkalaemia (8.6)
- Shigella dysentery

Your  will try to lead you astray #cognitivebias

@Bernardkhoo
@thebeardedmedic
@stunt_penguin
@StephenGulli
@nursegow

@ChrisJ999
@DeyoOkubadejo
@CarolineKin
@KMHACPs
@bmmadigan

@DrJlo29
@alisonleary1
@michelledrage
@swann50
@RothEdEducator

@Critcare_bear
@graeme1spencer
@Nurse_DeDee
@ScottTDiamond
@GrumpyOldDoc

Compiled by Dr Linda Dykes
@DrLindaDykes in Jan 2018
all thanks to Twitter users!