

# RSV\* Disease Risk Assessment

Patient Name: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gestational Age (GA): \_\_\_\_\_ weeks Birth Weight: \_\_\_\_\_ (kg/lb)

Season Start Date: \_\_\_\_\_

## Section 1

1. Does patient have any of the following:

- Chronic lung disease (CLD) or bronchopulmonary dysplasia (BPD)
- Hemodynamically significant congenital heart disease (CHD)
- Other serious conditions that compromise pulmonary or immune function (other than prematurity)?

**Yes**

Proceed to  
Question 2

**No**

Proceed to  
Section 2

2. Will patient be  $\leq 24$  months of age at the start of the RSV season?

**Yes**

**No**

## Section 2

1. Was patient born prematurely ( $\leq 35$  weeks GA)?

**Yes**

**No**

2. What was the patient's GA at birth?

$\leq 28$  weeks GA



$\leq 12$  months of age at the start of the RSV season?

**Yes**

**No**

29–32 weeks GA



$\leq 6$  months of age at the start of the RSV season?

**Yes**

**No**

32–35 weeks GA



$\leq 6$  months of age at the start of the RSV season?

**Yes**

**No**

If yes, presence of risk factors? (**check all that apply**)

Pre-school or school-aged sibling(s)

Low birth weight ( $< 2,500$  g)

Daycare attendance:  $\geq 2$  unrelated children for  $> 4$  hours/week

Multiple birth

Young chronological age:  $\leq 12$  weeks of age at the start of RSV season

Family history of asthma or wheezing

Crowded living conditions: multiple people sharing a bedroom or  $> 4$  additional people living in a home with infant

Congenital abnormalities of the airway

Exposure to environmental tobacco smoke

Severe neuromuscular disease

\*RSV = respiratory syncytial virus.

CONFIDENTIAL: This form is intended for internal office use only. This form may contain individually identifiable health information and is therefore subject to all applicable privacy laws and regulations.

This form is intended for use in assessing children for risk of acquiring severe RSV disease. This form has been provided as a guide only and is not intended to be a substitute or an influence on the independent medical judgment of the healthcare professional. Eligibility does not guarantee reimbursement; always verify the appropriate reimbursement information for services or items you provide. If evaluating in the off-season, assess risk factors again at the beginning of the RSV season as the presence of risk factors may change.

References available upon request.