RSV vs. Flu vs. COVID-19: Understanding the Differences

COVID-19 VACCINE INFECTION PREVENTION/CONTROL GETVACCINATED

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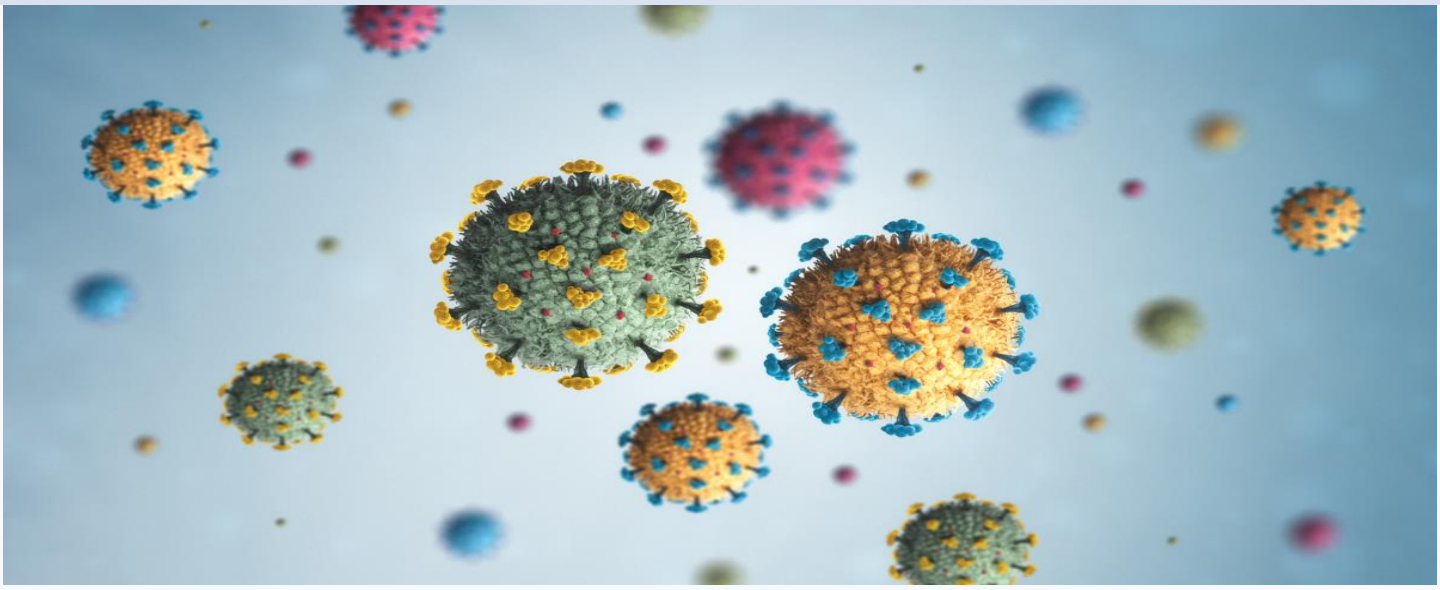

As we head into the fall and winter, long term care providers are preparing for an increased spread and incidence of respiratory viruses, namely RSV, flu, and COVID-19. All three respiratory viruses can be particularly dangerous for residents with weakened immune systems and other underlying health conditions. While the three viruses share many similarities, there are also key differences in treatment options and symptoms. Read on to understand more about the differences and similarities between these viruses.

	RSV	COVID	Flu
Vaccination Available	Yes- One time	Yes- Annual	Yes- Annual
Ideal Vaccination Window[1]	September-October	September-October	September-October
Vaccination Information Statement	Respiratory Syncytial Virus (RSV) VIS	COVID-19 VIS	Influenza (Flu) VIS
How it spreads[23]	Virus droplets from a cough or sneeze in your eyes, nose, or mouth Contact with a contaminated surface	Virus droplets from a cough or sneeze in your eyes, nose, or mouth Contact with a contaminated surface	Virus droplets from a cough or sneeze in your eyes, nose, or mouth Contact with a contaminated surface
How long do symptoms appear after exposure or infection[45]	4 to 6 days	2 to 5 days, but up to 14 days	1 to 4 days

Contagious Period[6][7]	3 to 8 days People with weakened immune systems can be contagious for as long as 4 weeks	1–2 days before and up to 8–10 days after symptoms begin	1 day before and up to 5–7 days after symptoms begin People with weakened immune systems may be contagious for longer periods of time
Common Symptoms[8]	• Runny nose • Decrease in appetite • Coughing • Sneezing • Fever • Wheezing	• Fever or chills • Cough • Shortness of breath or difficulty breathing • Sore throat • Congestion or runny nose • New loss of taste or smell • Fatigue • Muscle or body aches • Headache • Nausea or vomiting • Diarrhea	• Fever or chills • cough • sore throat • runny or stuffy nose • muscle or body aches • headaches • fatigue
Testing Options	Molecular and Antigen	Molecular and Antigen	Molecular and Antigen
Infection Control Practices	Infection Control Basics	Infection Control Guidance: SARS-CoV-2	Interim Guidance for Influenza Outbreak Management in Long-Term Care and Post-Acute Care Facilities
Treatment Options	Antiviral treatments are not recommended	• Antivirals are recommended for individuals at high risk for severe COVID-19, including hospitalization and death. • Several antiviral treatments are available. • Treatments must be initiated between 5 or 7 days of symptom onset.	• Antiviral treatment is recommended as soon as possible for any patient with suspected or confirmed influenza who is hospitalized; has severe, complicated, or progressive illness; or is at higher risk for influenza complications. • Several antiviral treatments are available.

Below are resources to check out for more explanation on the differences between these three viruses, as well as how to handle co-circulation:

- National Foundation for Infectious Diseases: Check out this table from NFID highlighting common symptoms of each virus.
- CDC Testing and Management Considerations for Nursing Home Residents with Acute Respiratory Illness Symptoms when SARS-CoV-2 and Influenza Viruses are Co-circulating: When COVID-19 and Flu are co-circulating in the nursing home, providers should use this infection control guidance from the CDC.

Related resources:

- CDC Long Term Care Quick Start Guide
- *Risk Less. Do More*
- #GetVaccinated

Reference: https://www.ahcancal.org/News-and-Communications/Blog/Pages/RSV-vs-Flu-vs-COVID-19-Understanding-the-Differences