BACKGROUND: Lack of guidelines based on local data has lead to unnecessary hospital admissions and improperly timed investigations for suspected Dengue fever. We aimed to identify clinical features that will be useful for case detection, appropriate timing of investigations and hospital admissions, in patients with short duration fever suspected of having dengue. **METHODS:** Case notes from consecutive patients admitted with fever during the most recent dengue outbreak were studied to assess the severity of six clinical features; headache, body aches, vomiting, retro-orbital pain, generalised weakness and erythema. The severity of first five symptoms were assessed from day one of illness using a visual analogue scale 0-9 (pre admission details; on recall) and erythema (assessed when the patient was febrile) from the date of admission, using a predetermined grading system (GI-5). All of the patients were followed up until improvement of symptoms and diagnosis was confirmed serologically. **RESULTS:** There were 148 dengue patients (95 males), mean (SD) age 28 (12) years, controls 54 (44 males), mean (SD) age 25 (11). More than 95% of patients with dengue had a platelet count above <u>50 QOO till</u> the third day of illness.

Symptom	Cut off	Day 2		Day 3		Day 4	
		PV+	PV-	PV+	PV-	PV+	PV-
Erythema	>1	96	100	96	77	97	82
Headache	>5	80	40	83	43	88	42
Body aches	>5	83	43	' 87	46	90	44
Retro-orbital pain	>5	88	30	89	30	91	30
Generalised weakness	>5	98	46	96	47	95	42
Vomiting	>1	92	35	88	32	88	44