

Pediatric Associates of Elizabethtown Fever Management

www.PedAssocofEtown.com

First of all, realize that fever in and of itself is not a bad thing. Fevers are generally harmless. It is nature's way of telling us that the body is fighting an infection, and in some instances a little fever may actually help the body in fighting the infectious process. It is a sign that the immune system is working. However, we do feel that any time your child has a temperature over 101, in order to make your child feel more comfortable, the fever should be treated, as listed below. Most pediatricians consider a fever to be above 100.4. If your child has a fever and exhibits signs that scare you or does not respond to standard medicines listed below, please proceed to the emergency department at Hardin Memorial Hospital if the office is closed. If your child has an elevated temperature after hours that can be treated and has normal activity and breathing, they can usually be seen in the office by appointment the following morning. As always, regardless of temperature, if your baby or child has symptoms that alarm you, you can call for an appointment or proceed to the hospital after hours. We recommend an appointment also if the fever persists beyond the third day.

These guidelines <u>do not</u> apply to newborns six weeks of age or younger; if your **newborn** (prior to first set of vaccines) has a fever of 100.4 Fahrenheit or greater rectally, call immediately and <u>do not</u> give Tylenol/acetaminophen. All temperatures under two years of age should be rectal temps.

How to take a rectal temperature.

Infants and toddlers cannot hold a thermometer steady in their mouths to take an oral temperature and forehead scanners are not accurate. The best way to take a temperature in a child under two years of age is rectally. Rectal temperatures may be used in all ages, however. It is best to practice in advance so that you will be comfortable with the procedure when your child is ill. Digital rectal thermometers are preferred. Do not use glass mercury thermometers. Clean the thermometer bulb end with rubbing alcohol or soap and cool water. Place a small amount of lubricant such as petroleum jelly on the bulb/test end. Take care that the child is in a safe location and will not fall if he/she moves. Lie your child down on his/her back and gently raise his/her legs as if to clean for a diaper change. Turn the thermometer on. Insert the lubricated thermometer ½ to 1 inch into the anal opening. Hold the thermometer at the opening next to the skin to ensure it goes no further. Keep the thermometer in place until the thermometer indicates it is finished. It may stop changing numbers for 30 seconds; it may flash a light or symbol on the screen, or beep. Please refer to your individual thermometer's instructions on how it will indicate the temperature is complete.

How to take an oral temperature.

Rectal temperatures should be taken for children under two, or for older children, if appropriate. However, by age four or five your child will probably cooperate to have their temperature taken orally (by mouth). Wait at least 15 minutes after eating or drinking to take an oral temperature. Clean the thermometer bulb end with rubbing alcohol or soap and cool water. Do not use glass mercury thermometers. Digital

thermometers are preferred. Turn the thermometer on. Slowly place the thermometer in your child's mouth under the tongue and angle it to the side next to the molars. Have your child keep the tongue over the thermometer and close his/her mouth. Keep the thermometer in the closed mouth until the thermometer indicates it is finished.

How to take an axillary temperature.

For children over two years of age, another option to take the temperature is axillary (underarm). Clean the thermometer with rubbing alcohol or soap and cool water. Do not use a mercury thermometer. Remove the child's arm out of clothing. Turn the thermometer on. Gently place the bulb/test end of the thermometer in the armpit. Hold the child's arm next to his/her body. Ensure that the end of the thermometer is completely surrounded by armpit skin and not sticking out the other side and measuring air temperature. Hold this position until the thermometer indicates it is complete.

Several simple steps to take to reduce your child's fever.

- 1. Your child should be kept lightly clothed at all times. Infants or small children may need only a diaper and a T-shirt while older children will need only underpants and an undershirt.
- 2. You do not need to use heavy covers or blankets to cover your child while in bed, even if they request it due to chills.
- 3. The child's room should be kept no warmer than 70 degrees and well ventilated. You may use a fan.
- 4. The child should be given lots of cool, clear liquids because a fever will tend to dehydrate your child through moisture loss through the skin. Try popsicles.
- 5. Give the appropriate doses of antipyretics (fever medicine). Try acetaminophen first. Please refer to the accompanying chart, which will give you the dosage of fever medicine for your child's particular weight. Dosing based on weight (rather than age) is preferred.
- 6. If your child's fever remains elevated over 102 despite acetaminophen, a sponge bath may be given with lukewarm, not cold, water. Alcohol or other ingredients should not be added. Stay in the lukewarm water for 10 15 minutes and rinse frequently.
- 7. We recommend that you do not use aspirin products for anyone under 18 years of age due to possibility of intestinal bleeding or, more seriously, Reye Syndrome.
- 8. For fevers over 102, you may alternate acetaminophen and ibuprofen every three hours for children over 6 months.
- 9. Rectal thermometers are recommended for all children under two years. A simple digital oral/axillary (underarm)/rectal thermometer is recommended for older children. Temporal scans and tympanic (ear) thermometers are <u>not</u> recommended by us
- 10. If your child is vomiting, you may purchase acetaminophen rectal suppositories from your pharmacist without a prescription.
- 11. Ensure that your child is not on any other medicines that contain the same active ingredients.
- 12. Unvaccinated children should be seen in the office if they have fever, or go to the emergency room after hours, due to increased risk of life-threatening disease. Such children will require more investigation as to the source of their fever in order to ensure their safety.

Drug Comparison Table—Acetaminophen

(ex. Tylenol, Tempra, Panadol)

A	• 4
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Age We	ight Range	ht Range Childrens'		Chewtabs/Meltaways		
		(160mg/5ml)	(80 mg)	(160mg)		
6 weeks to 3mos	6-11 lb	¹ / ₄ tsp (1.25ml)	-	<u>-</u>		
4 to 11 mos	12-17 lb	$\frac{1}{2}$ tsp (2.5ml)	-	<u>-</u>		
12 to 24 mos	18-23 lb	$\frac{3}{4} \text{ tsp } (3.75 \text{ml})$	-	<u>-</u>		
2 to 3 yr	24-35 lb	1 tsp (5ml)	2	1		
4 to 5 yr	36-43 lb	1 ½ tsp	3	1 ½		
6 to 8 yr	44-62 lb	2 tsp	4	2		
9 to 10 yr	63-79 lb	2 ½ tsp	5	2½		
11 yr	80-89 lb	3 tsp	6	3		
12 yr +	90+ lb	3-4 tsp	6-8	3-4		

Drug Comparison Table—Ibuprofen

(ex. Motrin or Advil)

Ap	pr	OX	imate	

	Approximate			
Age	Weight Range	Childrens'	Chewables	
		(100mg/5ml)	(50mg)	(100mg)
6 to 11 mo	os 12-17 lb	½ tsp	-	
1 to 2 yr	18-23 lb	3/4 tsp	-	<u>-</u>
2 to 3 yr	24-35 lb	1 tsp	2	1
4 to 5 yr	36-47 lb	1 ½ tsp	3	1½
6 to 8 yr	48-59 lb	2 tsp	4	2
9 to 10 yr	60-71 lb	$2 \frac{1}{2} \text{ tsp}$	5	2 ½
11yr	72-95 lb	3 tsp	6	3

We do not recommend infant drops for reducing your child's fever. Ibuprofen is not recommended under six month's age or with dehydrated children.

It is better to dose medications based on weight than age.

If you call for an emergency after hours:

When you call the on-call doctor, you need to have the following items available: pen and paper for instructions, child's recent weight, child's temperature (without adding numbers) and location taken, child's brief list of symptoms, list of medications child is taking, list of any long-term health conditions, and pharmacy phone number. Please be available to answer the phone as soon as you page the doctor. Please check the temperature rectally for children under two years or orally/axillary for older children prior to calling. Tympanic (ear) and temporal (forehead) scanners are less accurate, so please recheck rectally, orally, or axillary (per age recommendations above) prior to calling with fever questions. Thank you.