



West Cambridge Pediatric & Adolescent Medicine

“My kid is sick, what do I do!?!”

After getting the first round of infant vaccines at two months of age, especially the Hemophilus influenzae B (HiB) and pneumococcal (PCV13) vaccines as those bacteria were the main causes of severe bacterial infections in infants, kids with fevers, cold symptoms, or gastroenteritis symptoms such as vomiting and diarrhea, are allowed to be sick and recover at home. Most of these illnesses are caused by viruses and our bodies just need some supportive care while we fight off the infection.

Here are the expectations for most illnesses that cause a fever or a basic upper respiratory infection, ie colds:

Fevers are temperatures over 100.4F or 38C and typically peak on day two or three if not earlier. We count fevers and often want to know the highest fever recorded for each 24 hour period. So, if Sunday was the first day of fever, we expect the fever to peak within 72 hours, on Wednesday. It is OK to have a fever after that, but usually kids are feeling better, the frequency of the fevers is spacing out and you don't need as much ibuprofen and/or acetaminophen to keep them under control. We usually do not care too much about the height of the fever if you can keep it under control with medicine and you can stay hydrated. Even fevers to 104F or 105F are safe. Children will often look and feel miserable with temps that high so getting right to the ibuprofen and acetaminophen is important. If you do have fevers that high, you might have a long tail of fevers where the next day it goes up to 103F and the day after that up to 102F, etc.

Regarding ibuprofen (Motrin, Advil) and acetaminophen (Tylenol), both medicines are for fever and discomfort. Often kids, especially very little ones, can't explain or tell us what is bothering them. So, if they are out of sorts, try given them some ibuprofen or acetaminophen. Also, these medicines do not interact with each other, so you only must follow the directions for each medication. That means you can give them safely at the same if the fever is up to 105F as long as it is time to give them again. Or you can get on an alternating pattern where if you gave ibuprofen at 12:00pm, you can give acetaminophen at 3pm, then ibuprofen at 6pm and acetaminophen at 9pm, etc. Especially in the early days of fever when it may still be climbing this can be quite useful. The dosing by weight is on our [patient resources webpage](#). Remember that ibuprofen can only be used after 6 months of age. Also remember that sometimes these medicines are in other cold medicines. NyQuil for example has acetaminophen mixed in with it so you must wait 4-6 hours after taking NyQuil to take any other form of acetaminophen.



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In addition to fever and discomfort control, **hydration is the other big supportive care needed.** Often best to push fluids when the medications have kicked in and kids are feeling somewhat better, especially when there is a sore throat involved. Don't worry about food and focus on liquids or foods that have a lot of liquids in them like soup, juicy fruits, popsicles, jello, pudding, etc. For infants, breast milk or formula is great if they are willing to feed but it often turns into shorter more frequent feedings. Specifically for a vomiting illness, see our handout on vomiting and diarrhea on the [patient resources webpage](#) which walks through keeping kids hydrated during those symptoms.

If you can keep your child relatively comfortable and hydrated, with some variability in behavior (i.e., your child may be more tired than usual, more clingy, but there are some ups and downs, they can respond to you appropriately, when medicine kicks in they can even give a smile, or they still have a good strong cry and scream when they are upset about something) then you are safe at home.

What symptoms or signs requires more urgent care and call or visit with us?

The biggest one here is work of breathing. And I don't mean just cough. Coughs are miserable but generally safe. We really want to know if it is hard to breath when not coughing. Are you using your belly to forcefully exhale and push the air out of you with each breath, do you see sucking in under the ribs or at the base of the neck, do you see sucking in between the ribs so that with every breath you can see the rib cage very clearly, are you breathing fast and hard, do you think you hear wheezing? These symptoms point to a worsening that needs to be evaluated.

Other symptoms point to specific diagnoses that we could potentially treat. **Ear infections, usually caused by congestion from an initial viral illness, often lead to continuing fever or new fever after the fever from the viral illness resolved, and miserable sleep.** Ear infections often hurt so kids who can't tell you about their pain, show you when you try to lay them down by screaming! Again, try pain control with ibuprofen and acetaminophen. For older kids who can tell you about the pain, it is appropriate to use ibuprofen and acetaminophen for comfort for a few days if that works and see if it clears on its own. As the viral symptoms improve, the tube that drains the ear can open, drain, and clear the ear infection. If you can't control the discomfort, then come and see us to have a look. **Severe sore throat is another reason to come in for possible strep testing,** especially if there are not many other viral symptoms and instead it is just sore throat, fever, headache, and belly ache. A high fever that comes on quick with body aches could point to **flu**, and if caught early we can offer Tamiflu treatment though that medicine is not great. It can shorten the course of illness by one day.



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Some notes on specific diagnoses:

Bronchiolitis is inflammation in the bronchioles of the lungs that typically affects young children and infants. It is almost always caused by a virus and in some kids leads to work of breathing that requires hospitalization just to help make breathing easier for them. The most common and well-known virus that causes this is respiratory syncytial virus, **RSV**. RSV is a super common virus to which we have all been exposed. We don't test for RSV because it does not change management, there is no specific treatment for RSV. What we really need to diagnose is whether it is bronchiolitis, which we do with our physical exam, and whether higher level of care is needed.

Croup, like bronchiolitis, is a syndrome that is also caused by many viruses and causes swelling in the upper airway leading to a barking seal cough and when worse, stridor. **Stridor** is a high-pitched whistling noise on inhalation. This often occurs more when children are upset. The classic croup story is a child wakes in the middle of the night, scared because of the coughing and feeling hard to breath so they are more upset and crying which makes the stridor worse. You may also see those work of breathing signs though much more common in stridor it is a deep sucking in at the base of the neck. Not uncommonly then, parents are rushing to the emergency room, but it turns out that cold air can be very helpful for croup. So, between the cold air, the attention from parents and the car ride calming the child, they can look like a peach by the time you get to the hospital. If you find yourself with some of these symptoms, do everything you can to calm your child down, try getting them some cold air either outside or from the freezer. If that is not possible then try steam from the shower which also can be helpful. There are treatments for severe croup, and we can give dexamethasone, a steroid, as a single dose in the office that can really prevent worsening stridor, particularly the stridor at rest that would really require an emergency room visit. So, if you are hearing a barking cough or high-pitched whistling when upset and definitely if you hear it at rest, then give us a call.

Lastly, a reminder that kids are supposed to get sick! It is normal for them to pass around germs and feel like there are stretches of time when they are sick non-stop. In addition, the **cough and congestion** from these viral illnesses can linger for weeks, often leading right into the next illness. Unfortunately, there is not much more for those symptoms. Cough medicines do not work well and generally are not great for kids. Steam, nasal saline spray and suctioning or blowing noses right before bed can be helpful. If over a year you can try honey.

Good luck out there!