

Fever

- Fever is one of the most common complaints we see in the pediatric office.
- It may indicate the presence of a serious illness, but usually a fever is caused by common infections that are not serious.
- The body produces fever as a way to fight infections.
- Fever depends on the child's age:
 - 0-3 Months: Rectal temp 100.4°F or higher.
 - 3-36 Months: Rectal temp closer to 101°F or higher.

Fever Myths

Fever and Teething

- Although caretakers sometimes attribute fever to teething, temperature >101°F is unlikely from teething.

Fever and Overbundling

- Bundling causes *skin* temp elevation, not core (rectal).
- Temperature >101°F is not attributed to bundling.
- If you suspect fever from overbundling, unbundle your child and retake the temperature rectally in 15-30 minutes.
- If the repeat temperature is normal, your infant remains well appearing, and was not given any medications, then you can say that he/she does not have fever.

Fever and “Brain Damage”

- Another myth about fever is that if the temperature is too high (e.g. above 103°F), it will cause brain damage, but this is not true.
- Remember that fever is just the body's reaction to an infection.
- Fever by itself does not cause brain damage.

Fever Facts

Subjective Reporting of Fever by Parents

- Parental reporting of fever on the basis of subjective information (e.g. touching the child's torso or extremities or feeling his/her forehead) is a reliable indicator of a fever having been present.
- Studies have shown that parental assessment of fever in this situation is usually accurate.
- It is still better to check your child's temperature with a thermometer.

When to call the clinic for an office visit

- Fever lasting longer than three days and not improving.
- Fever 102°F or higher and no other symptoms
- Your child is younger than 3 months of age with any temperature 100.4°F or higher.
- You have been to see us, and your child is now getting worse, new symptoms have developed, or the fever is lasting longer than five days.

When to take your child to the Emergency Department

- A seizure occurs.
- Your child has a purple or red rash with the fever and is not looking well.
- A change in consciousness occurs-your child is difficult to arouse.
- Your child's breathing is shallow, rapid, or difficult.

Self-care at Home

- Three goals of home care for your child are to make your child comfortable, prevent dehydration, and monitor for serious or life-threatening illness.
- **First Goal**
- Make your child comfortable.
- Use a thermometer and medications and dress the child appropriately.
- Different types of thermometers are available, including glass, mercury, digital, and tympanic (used in the ear).

- *We do not recommend tympanic thermometers, because their use outside the clinic is unreliable.*
- Glass thermometers work well but may break, and they take several minutes to get a reading.
- Digital thermometers are inexpensive and obtain a reading in seconds.
- It is best to check an infant's or toddler's temperature rectally.
 - Hold your child chest down across your knees.
 - Spread the buttocks with one hand and insert the thermometer lubricated with a water-soluble jelly no more than 1 inch into the rectum with the other hand.
- Oral or axillary (under arm) temperatures may be obtained in older children.
- Acetaminophen (Children's Tylenol) and Ibuprofen (Children's Advil, Children's Motrin) are used to reduce fever.
 - In children 0-6 months of age use only Tylenol.
 - In children older than 6 months use Tylenol or Ibuprofen.
 - There is usually no need to combine or alternate Tylenol with Ibuprofen.
 - Do not use aspirin to treat fever.
 - Follow the dosage and frequency instructions printed on the label. See end of article for doses.
- Do not overdress your child because this keeps the body from cooling itself.
- Dress your child in a single layer of clothing, then cover him/her with a sheet or light blanket.
- A warm water bath can also be helpful for comfort, but should be used for no more than 10 minutes each hour.
- Do not cover your child with wet towels because this prevents the body from cooling itself by the evaporation of water off the skin.
- Contrary to popular folk remedy to reduce fever, DO NOT use rubbing alcohol in a bath or rub it on the skin. Alcohol is usually dangerous to children.
- **Second Goal**
- Keep your child from becoming dehydrated. Humans lose extra water from the skin and lungs during a fever.
- Encourage your child to drink clear fluids such as non-carbonated drinks without caffeine. Do not use water only because it does not contain the necessary salts that the body needs.
 - Examples: Chicken soup, Pedialyte, and other rehydrating drinks available at your grocery or drug store.
- Do not use caffeinated tea because it causes you to lose water through urination and worsens dehydration.
- **Third Goal**
- If your child is ill-appearing, a more serious problem may exist if:
 - Your child is younger than 3 months of age.
 - Your child has a headache that will not go away and/or a stiff neck.
 - Your child continues to vomit.
 - Your child has complex medical problems or takes prescription medications on a chronic basis.
- If any of these conditions occur please call the office for an appointment or go to the Emergency Department.
- ****Of course, while these guidelines provide information to help you care for your child, no general overview can address the needs of each specific person. Please feel free to call our office with any questions or concerns, and we will be happy to discuss your child's course of treatment over the phone, or recommend an office visit if necessary.**

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