

Northeast Pediatrics and Adolescent Medicine



Winter 2008-2009
Volume 2, Issue 1

Baby, it's Cold Outside:

Tips for keeping warm during the winter season.

For infants and young children, we typically stick with the general rule that your child should be dressed in one more layer than you are comfortable in for the same conditions.

Apparel for outside play should include layers such as thermal long underwear, turtlenecks, pants, socks, and a sweater under the outdoor wear. And don't forget the warm mittens and a hat!

Remember! Blankets, comforters, pillows, and quilts are not safe in an infant crib. Instead, a fleece one piece sleeper over a onesie is most appropriate.

For older children, it is important that they learn to recognize when their bodies, especially fingers and toes are becoming too cold. Frostbite can happen quickly especially for a child who is enjoying building snow forts or snowboarding with friends.

For more tips on winter safety, check out this link, <http://www.aap.org/advocacy/releases/decwintertips.cfm>

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"My child has a fever, what do I need to know?"

Childhood Fevers: Friend or Foe?

Fever is one of the most common reasons parents call the doctor or take their child in for an office visit, or even to the hospital. They are often concerned about getting the fever down as quickly as possible, especially if it seems high.

What many parents lose sight of is that fever itself is not the enemy; rather, it is the disease that's causing the fever that might be harmful. Fever is simply one of the body's defense mechanisms: it actually makes your white blood cells more active, and can kill or slow the growth of some viruses and bacteria. Unfortunately, fever can also make your child feel pretty bad too, and that's the main reason to consider reducing it during an illness.

To measure body temperature properly, carefully follow the instructions provided with your thermometer. Rectal thermometers are preferred for infants; for older children an ear (tympanic) thermometer or an oral thermometer are more convenient and better accepted, and are quite accurate if used properly. Plastic strips that measure skin temperature are highly inaccurate and should not be used.

If your child is running a fever, it's important to assess what else is going on. Is the child eating, drinking, and active? Or, is the child vomiting, lethargic, or covered with a rash? This is important information to gather before you call the doctor. A child with symptoms such as these and a low fever may be much sicker than a child with a relatively high temperature who is active and feeling fine.

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Childhood Fevers, continued



What should I do if my child has a fever?

This depends in part on the age of the child. A baby less than 12 weeks old with a fever needs immediate medical attention. Between 12 weeks and 6 months of age, a child with a fever should be examined within 24 hours.

Beyond six months of age, if there is a fever, but no other serious symptoms, the chances are your child has a mild viral illness. However, you should still watch your child closely, and if any other worrisome symptoms appear, or if the fever does not disappear in a few days, a medical evaluation is appropriate.

If your child is shivering, bundle her up. If your child is hot and flushed, keep him lightly dressed. Bathing a child with fever is safe only if the water is warm. Never put a child with a fever into the bath without giving him a fever reducing medication first and giving it enough time to take effect. If your child starts shivering in the bath, it's time to get out and dry off quickly.

Should I medicate my child for fever?

When trying to decide if your child needs medication, first assess his or her comfort level. If your child is not uncomfortable, you don't have to medicate. Fever is not dangerous provided your child is drinking plenty of fluids. If your child is uncomfortable, then you may use acetaminophen (Tylenol) or ibuprofen (Motrin or Advil). Never use aspirin. Read the label carefully because the dose will depend on your child's weight and age. Medications such as this take 1-2 hours; they won't always bring the temperature back to normal, although they will most always lower it enough to help your child feel more comfortable. If a child is dehydrated, a fever reducing medication cannot work effectively.

Parents are sometimes told to give both acetaminophen and ibuprofen at the same time or in alternating doses, but there is little evidence that this is more effective than either one alone; it's usually better to stick with whichever one you prefer. Using both can increase the risk of poisoning due to dosing errors, and the safety of this approach has not been adequately tested in young children.

Did You Know?

- Northeast Pediatrics has given over 3,800 flu vaccines since October 2008 in order to keep our patients and community healthy this flu season!
- In 2008, Tompkins County saw 26 cases of confirmed Pertussis (Whooping Cough). The best protection from whooping cough is vaccination with DTAP for children 2 months – 5 years and TDAP for adolescents and adults. If you have questions about your child's vaccination status, please call our office.
- In Tompkins County, up to 48% of homes may contain lead. At Northeast Pediatrics, we routinely test children for Lead at 1 and 2 years of age. However, we will test older children if you have concerns. Call our office to schedule an appt. for Lead testing. A small fingerstick can provide you with lead levels within 3 minutes!

Many families have asked us about the great new wall decals found in all the Pediatric Rooms. The designs we chose and more can be found at www.wallsofthewild.com

Thank You for helping us to keep the walls beautiful by enjoying with your eyes and not with your hands.

Do I have to worry about brain damage as a result of fever?

Brain damage never occurs as a result of fever itself. A temperature of 106 degrees, which is about as high as a fever can get, makes a person feel terrible, but doesn't cause brain damage. 1-2% of children under age 5 may occasionally have brief seizures with high fever, but such seizures do not cause brain damage.

Brain damage can occur during heat stroke, but this is not the same as fever. Heat stroke can happen if your child plays or works outdoors in hot weather, doesn't drink sufficient fluid, and wears excessive clothing. This can result in temperatures as high as 108 degrees or more, which is extremely dangerous.