

FEVER: WHAT YOU NEED TO KNOW

It is not how HOT they are, but how sick they are that matters.

- Fever is common in children.
- It is one of the ways the body fights infection.
- What matters most are the other signs of illness.
 - Will your child smile, respond, play, walk?
 - Is she drinking and urinating?
 - Does he have a rash with dark purple spots?
- Fever alone, caused by infection, DOES NOT cause brain damage. Only fevers greater than 108°F/42.2°C can cause brain damage. Fevers only go this high from rare events such as heat stroke.

What is a fever?

- Fever is a body temperature that is higher than normal. The body temperature normally varies with general health, strenuous activity and time of day.
- A thermometer reading over 100.4° F or 38° C is considered a fever, regardless of what method is used to take it.

How do I take a temperature?

- Rectal and oral methods are the most accurate. For safety reasons, do not use a glass or mercury thermometer. Fever strips and ear thermometers are less accurate.
- You can take the temperature under the arm if oral is not tolerated. In a child under 3 months old, confirm the temperature with a rectal temperature before calling us.
- We recommend using an inexpensive digital thermometer which can be used orally, under the arm, or rectally with a disposable cover.

Fever reducers.

- Acetaminophen (Tylenol or generic) or ibuprofen (Motrin, Advil or generic)
 - Do not alternate ibuprofen and acetaminophen. It is possible that this dosing can damage the kidneys.
 - Do not give ibuprofen if you think your child is dehydrated or is having stomach pain.
 - Do not use ibuprofen for children under 6 months of age.
 - These medications help lower fever, and, more importantly, help your child feel better.
 - Do not expect these medicines to bring the temperature completely down to normal.
 - Do not use aspirin in children and adolescents unless instructed to by your doctor (can increase the risk of getting a serious disease called Reye's syndrome).

See the chart on the reverse side for doses.

How and why do I treat a fever?

- Treating a fever is primarily for the child's comfort! Encourage liquids. The body requires extra fluids when there is a fever. Most children don't want to eat when they have a fever, which is not harmful.

Other ways to help your child feel better.

- A lukewarm bath may help for comfort. We do not recommend a bath that is too cool to be comfortable for the child, particularly if the child is shivering.
- A cool washcloth across the forehead may be comforting.
- Do not use cold water, ice, or alcohol to sponge off your baby.
- Dress a baby sensibly. Do not overdress or underdress, and do not bundle. Older children may prefer to be in warm clothing or blankets, particularly if they have chills. This does not cause a problem. Let your child decide what makes him comfortable.

Seizure with fever or febrile seizures.

- Only 4 in 100 children between the ages of 6 months and 6 years old are likely to get seizures with fevers.
- After six years of age, children grow out of febrile seizures.
- Febrile seizures do not cause brain damage.
- Most seizures end within 5 minutes.
- It doesn't matter how hot your child is. Febrile seizures can occur at temperatures as low as 101°F/38.3°C.
- If a child has a seizure, just lay him gently on his side on a flat surface.
- Don't put anything in his mouth. He won't swallow his tongue.

Call us about a fever right away if your child:

- Is less than 3 months old. Take a rectal temperature before you call us. Do not give medicine first.
- Has a fever that lasts more than 24 hours in a child **under age two years**, and there are no other symptoms.
- Is extremely lethargic or extremely irritable (with or without a fever).
- Is extremely ill.
- Is unable to walk, or has a stiff neck.
- Is confused or won't respond.
- Has difficulty breathing.
- Has a seizure.
- Has a rash with dark purple spots.

Call us about a fever during office hours if:

- The fever lasts more than 72 hours, and your child's other symptoms are not improving.
- The fever lasts more than 5 days.

Generally we do not recommend alternating Acetaminophen and Ibuprofen

**Acetaminophen (Tylenol) Dosing
for Infants and Children**

May be given every 4 to 6 hours; maximum 5 times in 24 hours

WARNING: Infant Drops must use the dropper provided to avoid risk of OVERDOSE

Weight (pounds)	Weight (kg)	Dose (mg)	Infant Suspension (160 mg/5 ml)	Children's Suspension (160 mg/5 ml)	Children's Tablets (80 mg each)	Jr. Strength Tablets (160 mg each)	Adult (325 mg each)
6 to 12 lbs	3 to 5 kg	40 mg	1.25 ml	1.25 ml			
12 to 18 lbs	5 to 8 kg	80 mg	2.50 ml	2.50 ml			
18 to 24 lbs	8 to 11 kg	120 mg	3.75 ml	3.75 ml			
24 to 36 lbs	11 to 16 kg	160 mg	5.0 ml	5.0 ml	2 tablets	1 tablet	
36 to 48 lbs	16 to 22 kg	240 mg	7.5 ml	7.5 ml	3 tablets	1-1/2 tablets	
48 to 60 lbs	22 to 27 kg	320 mg		10.0 ml	4 tablets	2 tablets	1
60 to 72 lbs	27 to 33 kg	400 mg		12.5 ml	5 tablets	2-1/2 tablets	1
72 to 95 lbs	33 to 43 kg	480 mg		15.0 ml	6 tablets	3 tablets	1
95-150 lbs	43 to 68 kg	640 mg		20.0 ml	8 tablets	4 tablets	2
Over 150 lbs	Over 68 kg	640 mg			8 tablets	4 tablets	2

**Ibuprofen (Motrin or Advil) Dosing
for Infants and Children**

May be given every 6 to 8 hours; maximum of 4 times in 24 hours.

*Not recommended for infants under 12 lbs (6 kg) or those under 6 months of age
OR people with dehydration*

WARNING: Infant Drops must use the dropper provided to avoid risk of OVERDOSE

Weight (pounds)	Weight (kg)	Dose (mg)	Infant Drops (50 mg/1.25 ml)	Children's Suspension (100 mg/5 ml)	Jr. Strength Tablets (100 mg each)	Adult (200 mg each)
11 to 16 lbs	5 to 7 kg	50 mg	1.25 ml	2.50 ml		
16 to 22 lbs	7 to 10 kg	75 mg	1.875 ml	3.75 ml		
22 to 28 lbs	10 to 13 kg	100 mg	2.50 ml	5.0 ml	1 tablet	
28 to 33 lbs	13 to 15 kg	125 mg		6.25 ml	1 tablet	
33 to 44 lbs	15 to 20 kg	150 mg		7.5 ml	1-1/2 tablets	
44 to 88 lbs	20 to 40 kg	200 mg		10.0 ml	2 tablets	1
88 to 100 lbs	40 to 45 kg	300 mg		15.0 ml	3 tablets	1-1/2
Over 100 lbs	Over 45 kg	400 mg		20.0 ml	4 tablets	2