

Children's

Permafold®: What You Need To Know



Topics

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Reviewed and Approved by the
Senior Medical Advisory Board

This Permafold® is not meant to take the place of expert medical care or treatment. Follow your doctor's or health care provider's advice.

1. Colds & Flu

Colds and the flu are caused by viruses. They are infections in the nose and throat.

Cold Symptoms

- Runny or stuffy nose. Sneezing.
- Scratchy throat. Cough.
- Mild fever and body aches, if any.

Flu Symptoms

- Fever (can be high). Chills.
- Feeling *very* tired.
- Headache and body aches.
- Cough. Sore throat (sometimes).
- Can have upset stomach and vomit.



To Prevent Colds and Flu

Your child should

- Wash his or her hands often.
- Turn away from others' sneezes and coughs.
- Use a tissue to blow the nose and sneeze into.

You should

- Not smoke. Not let your child smoke.
- Take your child for yearly flu vaccine(s) as advised by his/her doctor.
- Have your child eat well, rest, and exercise.



Self-Care

Your child should

- Rest if he or she has a fever.
- Drink lots of fluids. Eat chicken soup.
- Gargle with $\frac{1}{4}$ teaspoon of salt in 1 cup of warm water, if age 6 or older.
- When resting, suck on a piece of hard candy or cough drop, if age 5 or older.

You should

- For fever and muscle aches, give your child the right kind and dose of acetaminophen (Tylenol®, etc.) or ibuprofen (Children’s Advil®, Children’s Motrin®, etc.) for your child’s weight. **Do not give aspirin.**
- Clear your child’s nose. Use over-the-counter saline nasal drops, such as Ocean® brand. If a child can blow his or her own nose, have the child do it 1 minute after you put the drops in. For a baby or young child who can’t blow his or her nose, use a soft rubber suction bulb to draw out the mucus.
- Use a cool-mist vaporizer in your child’s room. Clean it as the owner’s guide states.



Call Your Child’s Doctor For:

- An earache or tugging at the ears.
- Swollen, painful glands in the neck.
- Fever as listed in topic 7 under “Call Your Child’s Doctor For:”
- A cough with mucus of any color or mucus that drains from the eyes.
- A bad smell from the throat, nose, or ears.
- Bright red color or white spots in the back of the throat or on the tonsils.



Get Medical Care Now For:

- Blue color around the lips, fingernails, or skin.
- Signs of Reye’s Syndrome. (See the end of topic 9.)
- Stiff neck, high fever, headache, no energy, and nausea or vomiting.
- Quick breathing, trouble breathing, grunting sounds with breathing, severe cough, or wheezing.
- Fever as listed in topic 7 under “Get Medical Care Now For:”

2. Coughs & Croup

Cough Symptoms

- Dry cough or one that brings up mucus.

Croup Symptoms

- Cough that sounds like a seal’s bark.
- Hoarse voice.
- Your child gasps for air and breathes loudly.



Self-Care

- Give your child lots of liquids.
- Sit with your child in the bathroom while hot water runs in the shower.
- Use a cool-mist vaporizer in your child’s room. Put a humidifier on the furnace.
- Make a cough medicine: Mix 1 part lemon juice and 2 parts honey. Give 1 teaspoon 4 to 5 times a day to a child over 1 year old.
- Have your child rest with his or her head raised.
- While sick, limit your child’s physical activity.



Call Your Child’s Doctor For:

- A sudden cough for 1 hour or longer.
- Signs of an infection (e.g., fever and/or mucus of any color, or skin that is red and swollen or has pus).
- A cough that has lasted more than 2 weeks without getting better.
- A cough in a child less than 6 months old.



Get Medical Care Now For:

- High fever, drooling, and sticking the chin out to breathe.
- Constant wheezing.
- Not drinking anything and acting very sick.

3. Diarrhea

Symptoms

- Many loose or watery stools.
- In a baby, many very runny stools.

To Prevent Diarrhea

Have your child wash his or her hands after using the toilet and after playing with others, near animals, or in the dirt.



Self-Care

- If vomiting, treat for vomiting first. (See topic 9.)
- Follow normal diet if there are no signs of dehydration. (See the end of topic 9.) If there are signs of dehydration, stop solid foods. Give clear liquids (not too hot or cold).
- For babies, give an electrolyte solution like Pedialyte®. For breast-fed babies, give only as much breast milk as your baby wants. Feed every 2 hours. Give water and an electrolyte solution as advised by your baby's doctor.
- For kids, give sport drinks, like Gatorade®.
- Avoid giving high "simple sugar drinks" like apple juice, colas, other soft drinks, and gelatin.
- Start feeding light meals within 12 hours, but don't give fatty and fried foods.
- Do not give your child over-the-counter medicines to stop the diarrhea, especially Pepto-Bismol®.

Call Your Child's Doctor For:

- Diarrhea that has lasted 48 or more hours.
- Diarrhea more than 8 times a day in a baby.
- Diarrhea that started after your child took medicine.

Get Medical Care Now For:

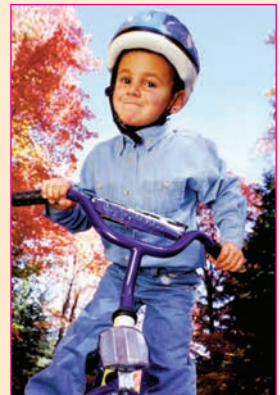
- Signs of dehydration. (See the end of topic 9).
- Blood, pus, or mucus in the stool.

4. Health & Safety Tips

- Feed your child healthy foods.
- Have your child brush his or her teeth 2 or more times a day.
- See that your child exercises.
- Don't smoke. Don't let your child smoke.
- Teach your child to wash his or her hands often.
- LISTEN to and LOVE your child.



- Don't leave a baby alone on a bed or table. Place your baby on his or her back to sleep.
- Take strings and ties off baby clothes. Cut the loop and tie off the ends of window blind cords.
- Keep matches, lighters, guns and bullets, etc. in locked places your child cannot get into. Teach your child to stay away from the stove.
- Keep medicines and vitamins in "child-safe" bottles. Keep these and all poisons away from your child. If you think your child has taken a harmful substance, call the Poison Control Center (800.222.1222). Follow the advice given.
- When riding in a car, use seat belts and an approved child-safety seat that is right for your child's weight. Use as directed.
- Make sure your child wears a helmet when riding a bike, rollerblading, etc.
- Never give things with small parts to a young child.
- Don't leave a child alone in or near water. See that your child wears a life-preserver when near or in the water.
- Take a course in first aid and CPR.
- Teach children how to call 9-1-1.



Cut and hang this card where you can see it (on the refrigerator, etc).

5. Vaccine Schedule

Vaccine	When Vaccines Should Be Given
Hepatitis B	Birth, 1 - 2 months, (4 months - if needed), and 6 - 18 months. *(A 3-dose series by age 18.)
Rotavirus	2 months, 4 months, 6 months
Diphtheria Tetanus Pertussis	2 months, 4 months, 6 months, 15 - 18 months, 4 - 6 years and 11 - 12 years (or by age 18).
H. influenzae type b	2 months, 4 months, (6 months - if needed), and 12 - 15 months. *(18 months - 5 years.)
Inactivated Polio	2 months, 4 months, 6 - 18 months, and 4 - 6 years.
Pneumococcal	PCV at 2 months, 4 months, 6 months, 12 - 15 months. *(PCV 24 months - 5 years) PPV, also, for certain high risk groups.
Influenza (Flu Shot)	6 months - 18 years, yearly as advised by your child's doctor or your local health department.
Measles, Mumps, Rubella	12 - 15 months, 4 - 6 years *(11 - 12 years.)
Varicella (Chicken Pox)	12 - 18 months. *(24 months - 18 years. Not needed if a child had chicken pox.)
Hepatitis A	12 - 23 months and a 2nd dose at least 6 months after the 1st dose. *(A 2-dose series by age 18.)
Meningococcal	11 - 12 years. *(At the start of high school). Advised for college freshmen who live in dorms, too.
Human Papillomavirus	3 doses for girls ages 11-12 years. *(May be given between ages 9 and 26 years.)

* Times for vaccines if a child has not yet had them.

Guidelines for vaccines may change. Ask your child's health care provider what vaccines your child needs.

For Information, Contact:

National Immunization Hotline
800.232.2522 (English or Spanish)
www.cdc.gov/vaccines

Get free health information, from:
www.HealthyLearn.com

6. Earaches

Symptoms

Ear pain. Pulling, rubbing, or tugging at the ear.

To Prevent Earaches

- Do not put anything in your child's ears.
- Do not smoke or let your child smoke.
- When swimming, wear earplugs or a bathing cap.



Self-Care

- Put a warm or cold wet washcloth (the one that feels better) next to the ear for 20 minutes.
- Give your child the right kind and dose of acetaminophen (Tylenol®, etc.) or ibuprofen (Children's Advil®, Children's Motrin®, etc.) for your child's weight. **Do not give aspirin.**

Have your child

- Sit up. Yawn. Swallow.
- Sleep with the head raised.
- Chew gum or suck on a piece of hard candy, if age 5 or older.
- Drink lots of cool water. Feed from a bottle in an upright position, if bottle fed.



Call Your Child's Doctor For:

- An infant or small child who has a fever, tugs at the ear(s) a lot, is very, very fussy, especially when lying down, or doesn't respond to sounds.
- Sticky, green, or bloody mucus from the ear.
- An ear that is hot and hurts when touched.
- Ear pain that lasts longer than 2 days.



Get Medical Care Now For:

- An earache with a stiff neck; severe headache that lasts; no energy; or red or purple rash that doesn't fade when the skin is pressed.
- No response or being very upset by loud noises.
- Ear pain after a blow to the ear or head injury.

7. Fever

Symptoms

- Your child's temperature is over 99.5°F (by mouth or ear), over 100.4°F (by rectum), over 89.5°F (under the armpit), or over 100°F (by a pacifier thermometer, in a 3 month to 2 year old).
- Your child's chest or forehead feels hot.



Self-Care

- Have your child rest and drink a lot of fluids.
- Dress your child in light, not heavy clothes.
- For a high fever, sponge or bathe your child with warm water. **Do not use rubbing alcohol.**
- Give your child the right kind and dose of acetaminophen (Tylenol®, etc.), or ibuprofen (Children's Advil®, Children's Motrin®, etc.) for your child's weight. **Do not give aspirin.**

Call Your Child's Doctor For:

- Fever with: Ear pain or abdominal pain; sore throat; vomiting; diarrhea; pain or burning when passing urine; passing urine often; or skin that is red and swollen or has pus.
- Fever of 99.5°F and up to 100.4°F in a baby younger than 3 months old; of 102.2°F and up to 104°F in a child 3 months to 3 years old; over 104°F in a child 3 to 18 years old.
- Fever with dizziness after a DTaP or MMR shot.

Get Medical Care Now For:

- Fever with a stiff neck; severe headache that lasts; no energy; red or purple skin rash that doesn't fade when the skin is pressed; or seizure.
- Fever of 100.4°F or higher in a baby less than 3 months old; 104°F or higher in a child between 3 months and 3 years old.

8. Sore Throats

Symptoms

- Mild to severe throat pain.
- Bright red color or white spots in the back of the throat or on the tonsils.
- Swollen neck glands.

Self-Care

- A child 6 or older can gargle every few hours with a mixture of 1/4 teaspoon of salt and 1 cup of warm water.
- Give warm drinks like soup and water mixed with honey and lemon. (Don't give honey to a baby under age 1.)
- A child 5 or older can suck on a piece of hard candy or a cough drop.
- For a strep throat, give cold foods and liquids, such as frozen yogurt, popsicles, etc.
- For pain and fever, give your child the right kind and dose of acetaminophen (Tylenol®, etc.) or ibuprofen (Children's Advil®, Children's Motrin®, etc.) for your child's weight. **Do not give aspirin.**
- Use a cool-mist vaporizer in your child's room. Clean it as the owner's guide states.
- Avoid using throat sprays with benzocaine. These bother some children.



Call Your Child's Doctor For:

- Bright red color or white spots in the back of the throat or on the tonsils.
- Any of these problems with the sore throat: Fever; swollen or sore neck glands; headache; ear pain or tugging at the ears; bad breath; vomiting; stomach pain; or it hurts too much to swallow.
- Advice if your child has been near someone with strep throat or if your child gets strep throat often.

9. Vomiting

Symptoms

Vomiting is throwing up the stomach's contents.



Self-Care

- Be calm and loving.
- Keep a bowl nearby.
- Give your child water to rinse the mouth out after he or she vomits. Sponge your child's face.
- Change soiled clothes and bedding.
- Do not smoke near your child.
- Do not give your child solid food or milk.
- One hour after vomiting, give clear liquids (not too hot or too cold). For babies, start with 1 teaspoon to 1 tablespoon of liquid every 10 minutes. For children, start with 1 to 2 ounces every 15 minutes. Give twice as much fluid each hour after the vomiting stops. If your child still vomits, stop fluids for 1 hour. Then start to give small amounts of fluid again. Slowly give your child more clear fluids.
- If you are breast-feeding:
 - If the baby vomits 3 or more times, give your baby an over-the-counter electrolyte drink like Pedialyte®. Give the amount the baby's doctor tells you to.
 - Nurse again when your baby has gone 2 to 4 hours without vomiting. Feed less. Do one side for about 10 minutes.
 - Nurse on both sides after 8 hours of no vomiting. Feed less than usual for 8 hours.



- After your child stops vomiting, give clear fluids for 8 hours. Then give foods easy to digest like crackers and rice. Then go back to usual foods.



Call Your Child's Doctor For:

- Vomiting for more than 6 hours in a child under 6 months old; 12 hours in a 6 month to 2 year old; 24 hours in a child over 2 years old.
- Vomiting with: Pain below the waist; passing urine very often or wetting the bed (if he or she didn't before); pain when passing urine; or bad-smelling urine.
- Vomiting that came after bad coughing.
- An older child or teen who forces himself or herself to vomit.



Get Medical Care Now For:

- Vomiting after a head injury. Black or bloody vomit.
- Vomiting with a stiff neck; severe headache that lasts; or red or purple skin rash that doesn't fade when the skin is pressed.
- Signs of Reye's Syndrome or dehydration. (See below.)

Signs of Reye's Syndrome

Vomiting over and over again, or vomiting that does not stop; loss of pep and energy; acting very, very sleepy and cranky; striking out at others; acting strange; convulsions.

Signs of Dehydration

Sunken eyes, crying with no tears; dry skin and mouth; dry diaper for more than 3 hours in a baby; passing no urine for 6 or more hours in a child; acting confused.