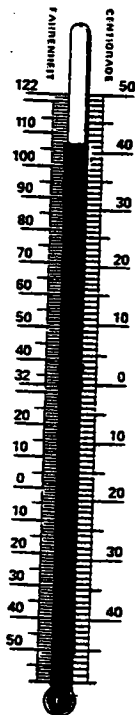




Just the Facts

57-002-118S

... About Fever



Fever is very common in childhood. Most often, fever is caused by an infection, but it may also result from some other illness. The degree of a fever does **not** tell you how serious the illness is; the child's behavior is generally the most important factor. A child with a mild infection could have a very high fever, while a child with a very severe infection might have no fever at all.

Parents can check for fever by taking their child's rectal, oral or axillary (under the armpit) temperature. Your child has a fever when:

- * The rectal temperature is 101.3 °F (38.5 °C) or higher.
- * The oral temperature is 100.4 °F (38 °C) or higher.
- * The axillary temperature is 100.4 °F (38 °C) or higher (axillary temperatures are generally not accurate).

If your child has a fever higher than 102 °F (39 °C), it is important to contact your physician. When a child has a fever, medication is not always needed to reduce the temperature. In fact, the best reason for giving your child medication is not to reduce the fever but to relieve the associated aches and pains.

Acetaminophen (Tylenol®, Tempra®, Panadol® and others) is the best medication to give for a fever. Unless your physician says otherwise, parents can give the dose recommended on the package until the child's temperature has come down. The temperature usually comes down in 1 1/2 to 2 hours and then rises again, in which case the medication may have to be repeated.

A child or teenager with a fever should not be given aspirin [acetylsalicylic acid (ASA)]. If the fever is due to chicken pox, influenza or certain other viral infections, taking aspirin can increase the risk of Reye's syndrome. This is a very serious condition that can damage the liver and brain.

THINGS PARENTS CAN DO:

- ◆ If your child has a fever, make sure the child is comfortable. Remove extra blankets and clothing so heat can leave the child's body and help lower the body temperature. **Do not** take off **all** your child's clothes, however, because the child may become too cold and start shivering, which produces more body heat, causing the temperature to rise again. Although sponging the child with tepid (lukewarm) water may help reduce the fever, it can make the child feel uncomfortable. Alcohol baths and rubs **are not** recommended.

- ◆ Child Care Facilities
- ◆ Information
- ◆ Symptoms and Treatment

For additional information contact your local health consultant or health care provider.

- ◆ Consult your physician for advice on how and when to take your child's temperature.

Be especially careful if you are using a glass thermometer to avoid breakage in the child's rectum or mouth. There are two types of glass thermometers: one for oral and axillary temperatures and one with a larger bulb for rectal temperatures.

A digital thermometer can be used for rectal and oral temperatures. It is made of unbreakable plastic, is easy to read and measures temperature faster than glass. When using a digital thermometer, hold it in place until it gives its signal.

A fever strip is **not** recommended because it does not give an accurate temperature reading.

- ◆ Contact a physician if your child:

- * Is excessively cranky, fussy, or irritable.
- * Is excessively sleepy, lethargic, or unresponsive.
- * Is persistently wheezing or coughing.
- * Has a fever and is less than 6 months old.
- * Has a fever higher than 102 °F (39 °C).
- * Has a fever and a rash.
- * Has any other signs of illness that worry you.

- ◆ Your child may continue attending the child care facility if feeling well enough to take part in the activities.

Any child younger than 6 months of age with a fever, or any child with a fever and any of the symptoms listed above, should be seen by a physician. Your child may return to the child care facility after your physician has made a diagnosis and started therapy and if your child is feeling well enough to take part in the activities.

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