

Caring for Your Child's Fever

What is a fever and why does it happen?

- A fever is the body's natural way to fight infections.
- A fever means that the body temperature is higher than normal.
- How high your child's temperature is does not tell you how serious the illness is. How your child looks or acts is more important than how high the fever is.
- Causes of fevers may include:
 - Viral infections such as influenza and parvovirus ('fifth disease').
 - Bacterial infections such as urinary tract infections and pneumonia.
 - Immunizations. Fevers may occur 1 to 14 days after immunization, depending on the types of vaccines that were received.

What is a child's normal body temperature?

A child has the same body temperature range as an adult:

- 35.5°C– 37.5°C (95.9°F – 99.5°F) when taken by mouth.
- 36.5°C– 37.5°C (97.7°F – 99.5°F) when taken under an armpit.
- 36.6°C– 38°C (97.9°F – 100.4°F) when taken rectally (bum).

How can I tell if my child has a fever?

- Accurate temperature taking is important to check if your child has a fever. Electronic digital thermometers are recommended for use in children. Follow the instructions on the package for cleaning the thermometer before and after use.

By armpit:

- Place the thermometer high up in the centre of the armpit making sure it touches bare skin on all sides.
- Hold the child's arm close to his/her body.
- When the thermometer beeps, remove it and read the temperature.

By mouth (can be used for older children):

- Wait 20 minutes after your child has a hot or cold drink or food before taking their temperature by mouth.
- Place the thermometer probe under their tongue.
- Tell the child to hold the thermometer with their lips. Remind them not to bite down on the thermometer.
- When the thermometer beeps, remove it and read the temperature.

Rectally (this method is not recommended as there is a chance of injury):

- Apply a lubricant or petroleum jelly (like Vaseline®) on the thermometer probe so that you can easily insert it.
- Lay the child down on their stomach or side, and spread their buttocks with one hand and gently insert the thermometer probe into the rectum about 1.25 cm (0.5 in.) to 2.5 cm (1 in.). Don't force it into the rectum.
- Hold the thermometer in place with your fingers and press the child's buttocks together to keep the thermometer in place.
- When the thermometer beeps, remove it and read the temperature.
- Wash the thermometer well after rectal use. To prevent spreading bacteria, don't use it to take oral temperatures.

Note:

- Ear (tympanic) thermometers are quick but the result may not be accurate.
- Forehead strips, pacifier (soother) and disposable thermometers are not accurate and should not be used.
- Glass thermometers can cause mercury poisoning if they break.

How can I treat my child's fever?

Comfort measures:

- Encourage your infant to breastfeed or formula feed as often as possible to prevent dehydration (infants do not need to be given additional water or other fluids).
- Encourage your child to drink water or diluted juice or eat popsicles, gelatin or ice chips, and watch for signs of dehydration (e.g., their pee is dark colored or they are thirstier than usual).
- Dress your child lightly and cover with a light sheet.

Medication to manage fevers:

- Do not give fever medications before **or** at the time of immunization because it can decrease the body's immune response to vaccines.
- Only treat their fever (at least 6 to 8 hours after immunization) **if** your child is uncomfortable, refusing fluids and not sleeping.

- **If your child is otherwise healthy and acting normal, it is not necessary to treat their fever.**
- For correct dosages carefully read and follow the directions on the medicine bottle and package, or contact your doctor, nurse practitioner or pharmacist.
- **Acetaminophen** (Tylenol®, Tempra®) can treat children's fevers and pain.
- For infants less than 6 months of age, check with your doctor, nurse practitioner or pharmacist for the correct dosage of **acetaminophen**.
- **Always check your child's weight** so that they receive the right dosage of medication.
- **Acetaminophen** can be given every 4-6 hours until the fever drops. **Do not give your child more than 5 doses in a 24 hour period.**
- **Acetaminophen may be present in other over-the-counter medications.** Overdoses of acetaminophen have been known to cause permanent liver damage and/or death in children and adults.
- **Do not give ibuprofen** (Advil®, Motrin®) to infants younger than 6 months old. For infants less than 6 months old check with your doctor, nurse practitioner or pharmacist.
- For children over 6 months of age ibuprofen can be given every 6-8 hours. **Do not give your child more than 4 doses in a 24 hour period.**
- **Do not alternate giving acetaminophen and ibuprofen** as this does not control a fever or pain any better than just giving acetaminophen and may cause accidental drug overdoses.
- **ASA (Aspirin®) should NOT be given to children due to the risk of Reye's syndrome.**

For more information, contact HealthLine at 811 (24 hours a day), your local public health office, or your physician or nurse practitioner.

When should I be concerned about my child?

Call HealthLine at 811 or take your child to a doctor, nurse practitioner or emergency room:

- **When the fever lasts for more than 3 days.**
- **When the fever is 38°C (100.4°F) or higher in a child younger than 3 months of age.**
- **When a child regardless of age who has any fever and any of the following symptoms, even if the fever responds to acetaminophen:**
 - Develops small purple spots on his/her skin that may look like bruises or a rash.
 - Has a seizure or convulsion ('a fit' or shaking) whether or not they have a fever.
 - Is lethargic (very weak), or difficult to wake up.
 - Seems confused or delirious.
 - Has problems breathing.
 - His/her skin colour does not look right or becomes grey, pale or blue.
 - Has headaches, neck pain, stiffness or is sensitive to light.
 - Is irritable, cries constantly and cannot be settled.
 - Does not use an arm or leg normally or refuses to stand up.
 - Has repeated vomiting and/or diarrhea even if they don't look like they are dehydrated.
 - Cries when going to the bathroom, or if his/her pee smells bad.

Resources: <http://healthlineonline.ca/>;

Canadian Pediatric Society [www.caringforkids.cps.ca](http://www.caringforkids.cps.ca;);

The Hospital for Sick Children (2019)

www.aboutkidshealth.ca;

Tylenol Canada www.tylenol.ca

<http://www.metric-conversions.org/temperature/celsius-to-fahrenheit.htm>