

After Hours Tip Sheet

This sheet has been designed to help you with questions, which may arise when our office is closed, and to help distinguish between what is an urgent and non-urgent medical problem with your child. Dr. Gibson-Hull is always on-call to assist you if you need assistance. However, please respect the doctor's family life and hold non-urgent calls for business hours; your consideration is greatly appreciated.

To **schedule an appointment**, call during business hours.

Review this information before calling the doctor to determine if a call is required. The following information is divided into topics based on symptoms.

Click here for the
**POISON
CONTROL
CENTER**



Important resources:

Website: www.healthychildren.org

Poison Control (800) 222-1222

FEVER

Fever is a normal response by your body to various causes (i.e., infections, vaccines). Fever can make a child feel uncomfortable, but it can be beneficial; fever helps the body fight infection, turns on the body's immune system, and may help shorten the course of the illness. Our group defines fever in a child older than 3 months as a temperature $\geq 101^{\circ}\text{F}$. There are many ways to take temperature including under the arm (axillary), rectally, orally, in the ear, or with a temporal scanner. Keep track of your child's actual temperature and how you take the temperature. If your child has a fever, we recommend treating the fever only if the child is uncomfortable. In most cases the **anti-fever medicine (i.e., ibuprofen (Motrin[®], Advil[®]) and acetaminophen (Tylenol[®], Feverall[®])** will only bring the child's temperature down 1° - 2° degrees. For example, if your child has a 104°F temperature, we expect the fever to drop to 102° - 103°F with medication. As an adjunct to fever reducers, you can give your child a tepid (water temperature of 85° - 90°F) bath. In certain circumstances, fever can be a sign of a more serious illness. Notify Dr. Gibson-Hull of your child's fever if it meets one of the criteria listed below.

When to call the doctor after-hours:

- If your child is younger than 3 months with a rectal temperature $>100.4^{\circ}\text{F}$
- If your child has a very high fever ($>104^{\circ}\text{F}$)
- If your child is inconsolable or unresponsive despite giving an adequate dose of a fever reducer

Fever reducers are only designed to make your child more comfortable. It will **NOT** stop your child from having a fever.

On average, fever reducers take up to one hour to work. Acetaminophen can last as long as 4-6 hours and can be safely given at any age. Ibuprofen can last as long as 6-8 hours and can be safely given to children ≥ 6 months of age.

With over-the-counter cold medicines, avoid preparations, which also contain acetaminophen or ibuprofen in order to minimize the chance of overdosing on a fever reducing agent.

IMMUNIZATION REACTIONS

When your child receives vaccines, it is quite common for him/her to have fever, discomfort, swelling and redness around the injection site. For more information about shot reactions, consult the vaccine handout you received in the office.

In most cases shot reactions are not emergencies.

When to call the doctor after-hours:

- If your child is unresponsive or has a fever >105°F after the immunization
- If the immunization site is very swollen, greater than 3 inches in size, or has a red streak running from the injection site

PRESCRIPTIONS AND ANTIBIOTICS

In the best interest of a sick child, an examination should always be done first before any medication, if warranted, is prescribed. If you are concerned about your child's illness and think your child cannot wait until the morning to be evaluated, take your child to an emergency room or urgent care center. Should issues arise with a refill request, please call during regular business hours when we are best able to handle these requests.

VOMITING

There are many illnesses that will cause vomiting and/or diarrhea. These illnesses are commonly referred to as viral gastroenteritis. In most cases, children do not need to be seen immediately for these symptoms. The most important thing you can do is keep your child hydrated. The best way to keep small children (< 3 years old) hydrated is with an oral rehydration liquid (i.e., Pedialyte®). Older children can take water, flat ginger ale, or Gatorade®. Avoid red or green colored drinks for it may artificially make the vomit appear to be bloodstained or bile-stained. Also avoid drinks high in sugar such as apple juice. If your child has begun to vomit, let him/her rest for 1-2 hours to allow the stomach to settle then start with small sips of liquids (i.e., 5cc every 5 minutes for 1-2 hours). Some children will continue to vomit but in most cases the frequent small amount of liquid will keep them hydrated.

When to call the doctor after-hours:

- If your child is unable to keep liquids down for several hours (6 hours for infants or 12 hours for older children)
- If your child is having severe pain in his/her stomach with vomiting
- If the vomit has blood or is green in color

If your child is unresponsive, or appears very dehydrated (sunken eyes, not urinating for > 8 hours if your child is an less than 1 year old, 12 hours if your child is > 1 year old)

DIARRHEA

As with vomiting, diarrhea is most often caused by a viral gastroenteritis. The key is to keep your child hydrated with water. Avoid juices (especially apple, pear, or prune juice) or any drinks high in sugar for these types of drinks can make the diarrhea worse. For formula fed infants, continue normal feeds. In older children (> 1 year old), give more starchy foods (rice, bread, plain pasta). In most cases, diarrhea is not an emergency and can be addressed during office hours.

We do not recommend any medication to stop diarrhea. Such medications may prolong the illness.

When to call the doctor after-hours:

- If your child is having bloody stools
- If your child has become very dehydrated (sunken eyes, not urinating for > 8 hours if your child is less than 1 year old, 12 hours if your child is > 1 year old)

COUGH

Cough is a normal response to most upper respiratory infections. With a few exceptions, you can treat your child at home. Please refer to our website for more information. Medication, if warranted, will be prescribed after your child has been evaluated.

When to call the doctor after-hours:

- If your child is having trouble breathing, is breathing rapidly or is wheezing during breathing
- If your child has asthma or reactive airway disease and his/her breathing is not responding to breathing treatments given every four hours.

NASAL CONGESTION

As with cough, children may suffer from nasal congestion or runny nose with colds. Nasal congestion is not an emergency.

EARACHE AND SORE THROAT

In general, both earaches and sore throats are not emergencies, but may need to be seen in the morning. Antibiotics, if warranted, will be prescribed after your child has been evaluated. If you feel that your child cannot wait until the morning to be seen, then take him/her to an urgent care center. In the meantime, pain relievers and warm compresses may provide comfort. For an older child with a sore throat, try having him/her gargle with a teaspoon of salt dissolved in warm water for temporary relief.

When to call the doctor after-hours:

- If your child's sore throat includes other symptoms: excessive drooling, severe difficulty swallowing, difficulty breathing, or being unable to open his/her mouth fully.
- If your child's earache includes other symptoms: stiff neck, loss of balance when walking, or redness and swelling behind one ear in comparison to the other ear.

RASH

In most cases, rash or unusual skin changes are not emergencies and cannot be diagnosed over the phone. If you are concerned about a rash, please call during regular office hours. If your child has recently started a medicine and develops a rash, stop the medication and call our office in the morning.

When to call the doctor after-hours:

- If your child is inconsolable or unresponsive or with a high fever (>104°F) and also has a new rash. This situation is considered an emergency. We recommend that your child be seen immediately in an emergency room or urgent care facility.
- If the rash is purple/blood-colored spots, or bright red and tender to touch, or red streaks that is spreading, or appears like a burn
- If the rash is associated with swollen lips, swollen tongue, difficulty breathing, or abdominal pain, go to the emergency room, as this may be a severe allergic reaction.

PINK EYE

Conjunctivitis is commonly referred to as pink eye. Pink eye does not require immediate therapy in most cases. If your child has developed redness in the eye or discharge from the eye, please call our office during business hours. Until your child is seen, you can treat the eye with warm compresses or artificial tear drops (available at

most drug stores). The teardrops can be used as often as needed to irrigate away the discharge. Remember, conjunctivitis may be contagious, so wash your hands after caring for your child. Medication, if warranted, will be prescribed after your child has been examined.

When to call the doctor after-hours:

- If your child sustained trauma to the eye
- If your child is unable to see from the eye or complaining of severe pain
- If your child cannot open his/her eye because of eyelid swelling, wipe away any discharge with a warm washcloth to help the eye open.

ACCIDENTAL INGESTIONS

Please call the [poison control number](tel:800-222-1222) (800-222-1222) for all accidental ingestions. They are best equipped to answer all your questions.

INJURIES

In general, if your child sustained a severe injury, you will need to bring him/her to an emergency room or urgent care center. A diagnosis can only be made after an evaluation of your child. The on-call doctor in most cases will only be able to give recommendations as to whether your child needs to be seen immediately or if it can be addressed during our regular hours.

CONSTIPATION

Constipation is not an emergency and can be addressed during office hours. To minimize the occurrence of constipation, provide a well-balanced diet to your child and make certain your child is well hydrated.

– Again, this sheet is just an aid for you after hours. If you are still uncomfortable in managing your child’s illness after hours after reviewing this information, please call us. —