CHILDREN'S RESPIRATORY SYMPTOMS

UNM CHILDREN'S HOSPITAL

WHERE TO GO WHEN YOUR CHILD IS ILL

It's important to know what level of care your child needs.

Emergency Care

- **Rapid Breathing:** difficulty breathing or working hard to breathe
- **Wheezing**
- **Dehydration:** no tears, dry mouth, urine is less in volume than normal
- **Infant fever:** less than 6 weeks old
- **Difficult to Wake Up**
- **Headache with Neck Pain and/or Vomiting**
- **Fever:** lasting 5+ days

Urgent or Primary Care

- **Fever:** lasting 3+ days
- **Dehydration:** concern of not wanting to drink
- **Vomiting and Diarrhea:** with concern for dehydration
- **Cold:** symptoms that seem to be getting worse after 7 days or lasting longer than 10 days
- **Symptoms:** improving, then worsen with a new fever
- **Concern for Sinus Infection:** nasal drainage and 3 days in a row of fever

Home Care

- **Fever/Fussiness/Pain:** Tylenol all ages or Ibuprofen if 6+ months
- **Sore Throat:** Tylenol all ages or Ibuprofen if 6+ months
- **Scratchy Throat:** Warm or cold liquids
- **Prevent Dehydration:** Drink: fluids - popsicles, Jello, broths, Pedialyte, Gatorade (dilute half with water) Avoid: caffeinated beverages
- **Runny Nose/Congestion:** Saline spray, humidifier, and suction (suction should be limited to 3x/day)
- **Cough:** Honey for children older than 1
- **Cold:** Cold formulas should not be used for children 4 years and under
- **Ear Pain:** Tylenol, warm or cool compress
- **Muscle Aches:** Ibuprofen
- **Vomiting:** Fluids
- **Diarrhea:** Drink: Fluids Avoid: Juice, antidiarrheal mediations, BRAT (Banana, Rice, Applesauce, Toast)

Children should resume a normal, well-balanced diet appropriate for their age, within 24 hours of getting sick

