

# Fever

## Guidance for Patients

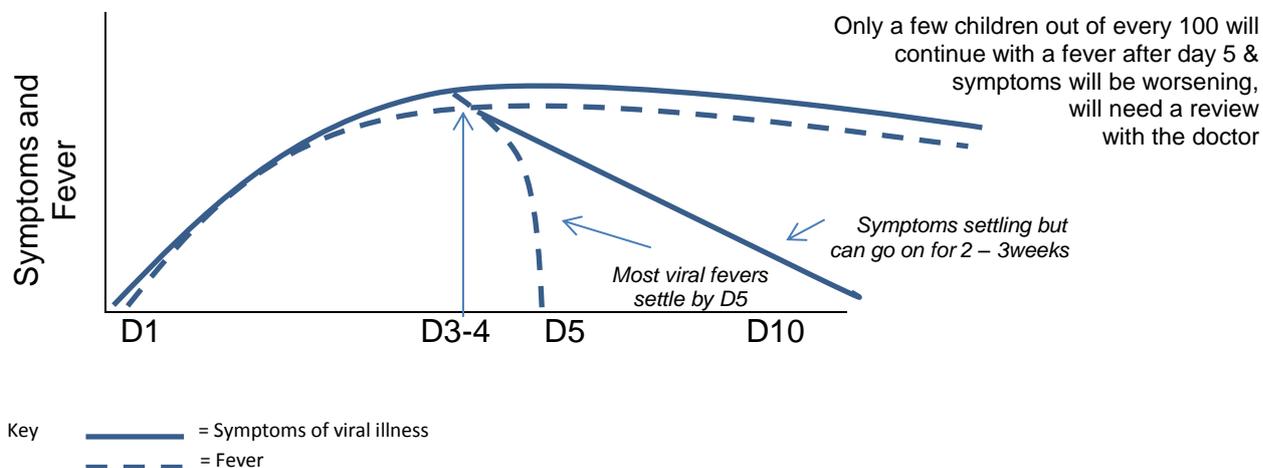
Having a poorly child can be a very scary experience for parents & carers. If you understand more about the illness and when to seek help, it can help you feel more in control. This leaflet contains advice about what to do when your child has a fever and when you should seek a medical opinion.

### What to do when your child has a fever (temperature of 37.5 or higher)

- Use the “Traffic Light Tool’ (see page 8) which can guide you when to seek help
- Check your child for rashes and know how to identify a non-blanching rash (this is a rash that does not fade/disappear with pressure), as that could be a sign of serious illness (see page 7 for details of the ‘tumbler test’)
- Children often drink & eat less when they are poorly. Offer your child plenty of regular drinks (if you’re breastfeeding then breast milk is best, otherwise formula milk or oral rehydration sachets in water can be used). Be creative, for example, if your child is old enough offer them ice lollies or diluted juice if they refuse water.
- Do not sponge your child with tepid or cold water to try and reduce their fever - this causes blood vessels under the skin to become narrower which actually reduces heat loss!
- Do not wrap up your child, but keep them in light clothing & bedding
- It is worth remembering that fever is a normal response by the body to fight infections. It does not harm your child, there is no benefit to simply treating a fever, and nor does it reduce the chance of a febrile fit. Therefore it is not recommended to try to reduce your child’s fever with medicine if your child simply has a fever, but you can use either paracetamol or ibuprofen if your child is distressed or uncomfortable (but do not use both at the same time)
- Check for signs that your child may be dehydrated (dry mouth, no tears, sunken eyes, fewer wet nappies, or little to no urine in 8-12 hours, soft spot on skull (fontanelle) looks sunken, much more sleepy than normal). If you notice these signs seek further advice.
- Check on your child during the night to make sure they are not becoming more unwell.
- Keep your child away from school or nursery while they have a significant fever and distress.

## Causes of Fever and how long can symptoms last?

### Typical Pattern of Viral Illness and Fever



#### Key symptoms

Fever is a natural and healthy response to infection. Most infections causing fever in children are caused by viruses such as the cold virus or a diarrhea & vomiting virus. These infections are very common. Normal, healthy children can have 8 or more colds per year and fever from these infections passes in 3-5 days without the need for any antibiotics. Other symptoms such as a cough or a runny nose or slightly loose poos can often continue for 2-3 weeks.

Sometimes a child with a viral infection may get a bacterial infection. This should be considered if a child's fever does not settle after 5 days and the child is more unwell.

Bacteria cause infections such as urine infections, some chest infections, some sore throats (especially if no cough) and some ear infections (especially those causing earache which lasts longer than 3 days).

If your doctor has diagnosed a bacterial infection they may treat this with antibiotics. Fevers from bacterial infections go away after 1-3 days of taking the correct antibiotic, but may improve even without it. If your child still has a fever after taking 3 days of antibiotics they should be seen again by their GP.

## The Tumbler test for Checking if a Rash is Non-Blanching

Do the 'tumbler test' if your child has a rash. Press a glass tumbler firmly against the rash. If you can see the spots through the glass and they do not fade at all this is called a 'non-blanching rash'. If this type of rash is present seek medical advice immediately.



If the spots fade/lighten when the glass is rolled over them, the rash is probably not serious, but keep checking, it can develop occasionally into a rash that does not fade.

Rashes are harder to see on dark skin so look for rashes on paler areas, such as palms of the hands, soles of the feet and on the tummy.

## When to seek advice

Use the traffic light table on the following page to help you decide if you need to ask for medical advice or review.

- If your child develops any of the features shown in the **RED** column you should seek medical help immediately, via 111 or A&E
- If your child develops any features shown in the **AMBER** column, they should be seen by a doctor within a few hours, but it is not as urgent as those with Red features. Contact your GP for an urgent appointment or 111 if your surgery is closed.
- If your child only has features listed in the **GREEN** column then they are probably well enough to remain at home with the advice set out above ([What to do when your child has a fever](#)) but you should reassess them if they appear to become more unwell.

	Risk of Serious illness	Risk of Serious Illness	Risk of Serious Illness
	<b>GREEN</b> (LOW RISK) 	<b>AMBER</b> (MIDDLE RISK) 	<b>RED</b> (HIGHER RISK) 
Activity	<ul style="list-style-type: none"> <li>Smiling &amp; responding normally to you.</li> <li>Normal strong cry with tears visible.</li> <li>Active</li> </ul>	<ul style="list-style-type: none"> <li>More difficult to wake up &amp; not interacting with you normally.</li> <li>Abnormal cry</li> <li>Poor feeding in babies or reduced drinking</li> </ul>	<ul style="list-style-type: none"> <li>Extremely sleepy/listless</li> <li>Not waking up</li> </ul>
Breathing	<ul style="list-style-type: none"> <li>Breathing normally.</li> </ul>	<ul style="list-style-type: none"> <li>Breathing faster than normal.</li> <li>Flaring of their nostrils</li> <li>Mild pulling in of muscles between &amp; under ribs.</li> </ul>	<ul style="list-style-type: none"> <li>Very fast breathing, 60 breaths per minute.</li> <li>Strong pulling in muscles between &amp; under ribs</li> <li>Bobbing of head with breaths</li> <li>Abnormal noises /grunting</li> </ul>
Colour & circulation	<ul style="list-style-type: none"> <li>Normal colour of skin, lips and tongue for your child.</li> </ul>	<ul style="list-style-type: none"> <li>Looking pale</li> <li>Dry lips &amp; tongue, no tears when crying.</li> <li>Fewer wet nappies/not weeing as often</li> <li>Sunken soft spot on head</li> </ul>	<ul style="list-style-type: none"> <li>Looking blue/grey in skin, lips or tongue.</li> <li>Very cold hands &amp; feet.</li> <li>No wee for &gt; 12 hours.</li> </ul>
Other features including level of fever		<ul style="list-style-type: none"> <li>Temperature <math>\geq 39^{\circ}\text{C}</math> in baby age 3-6 months.</li> <li>Temperature <math>\geq 39.5^{\circ}\text{C}</math> in child 6 m-5 years.</li> <li>Fever lasting &gt; 5 days.</li> <li>Limping or joint swelling</li> <li>Rigors (shaking/shivering with high fever)</li> </ul>	<ul style="list-style-type: none"> <li>Temperature <math>\geq 38^{\circ}\text{C}</math> in baby age 0-3 months.</li> <li>Non-blanching rash (doesn't fade on pressure with a glass)</li> <li>Fits/Seizures</li> </ul>