

PEDIATRIC ASSOCIATES OF AUSTIN, P.A.

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Symptomatic care and guidance for common respiratory illnesses

Whether your child has a common cold virus, influenza, or COVID symptomatic treatment is often identical. Because a viral infection is not helped by antibiotics, we focus on helping your child feel better while their body works to heal from the illness. Common COVID symptoms and their treatments are explained below.

FEVER

Fever is a sign that the body is fighting infection. The goal of therapy is to bring the fever down to a comfortable level. True fever begins at 100.4°F (using rectal [most accurate for infants], ear, or forehead thermometer) and with many illnesses is present 2-3 days (sometimes as many as 5 days). Fevers only need to be treated with medicine if they cause discomfort. Fever reducers may only lower temperature 1-2 degrees. Therefore, if a temperature drops only from 103°F to 101°F with medication, know that this is very normal and is not harmful. **If an infant less than 3 months has fever, evaluation is needed.** Do not give aspirin to any child under 16 yrs. or ibuprofen (Advil/Motrin) to any infant under 6 months.

In addition to offering medication, helpful fever remedies are as follows (especially if >104°F):

- Dress in 1 layer of clothing, unless shivering, to prevent trapped heat close to the body
- Increase fluids until urinating every 2-3 hrs. to help cool the body & prevent dehydration
- Offer tepid baths or cool compresses to help cool the body

[Acetaminophen & Ibuprofen dosages](#)



CONGESTION, RUNNY NOSE, and COUGH

Cold symptoms can be frustrating because they linger, and symptomatic treatment only helps temporarily. These symptoms are not typically harmful unless they are causing respiratory distress or dehydration.

Dehydration symptoms: no tears with crying, dry tongue/inside mouth, and/or diminished urination (<2 yrs: < 4-5 times/24 hrs., >2 yrs: < 4 times/24 hrs.). If alert, happy, and playful, dehydration is very unlikely.

Respiratory distress symptoms: These could include [retractions](#), [wheezing](#), or [a combination of both](#) (see QR codes on back for audio/video examples). Another sign may be an increased respiratory rate.

Age	Usual breathing rate per minute
< 1 year	30-40 (no higher than 60)
1-2 years	25-35 (no higher than 40)
3-5 years	25-30 (no higher than 35)
5-12 years	20-25 (no higher than 30)
>12 years	12-20 (no higher than 20)

It may take as long as 3-4 weeks for cold symptoms to completely resolve. You can feel encouraged when nasal drainage becomes more colored (and then starts to go away), and the cough becomes more productive or “phlegmy.” These are typically good signs that the virus is resolving. Thankfully, in kids under 8 years old, sinus infections are extremely uncommon and colored nasal drainage may be a sign the virus is resolving. In an older child or teenager, though unlikely, sinus infections can occur. Please call if colored nasal drainage has lasted 10 days without improvement and is accompanied by fever and headache or facial pain.

Treatments for cold symptoms:

- Stay well hydrated and blow nose frequently (if unable to blow nose, it’s helpful to use nasal saline followed by suction). Steam showers are also helpful (Sit in bathroom filled with steam for 15-20 minutes.)
- Use a cool-mist humidifier while sleeping. Dry air makes mucus thicker.

Treatments for cold symptoms continued:

- Allergy medications are not helpful unless your child also has nasal allergies.
- **Cold/cough medicines (cough suppressants like dextromethorphan or decongestants like phenylephrine) and are not FDA approved under age 6.**
 - For infants under 1 year, Agave-based Zarbee's marketed for 6 months and older can be used (be sure it does not contain Melatonin).
 - For those over 1, honey is helpful for coughing and can either be given plain or mixed in diluted apple juice or diluted lemonade or in water.
 - For children over 2 yrs., plain Mucinex (guaifenesin), without combo of other medications, can help to thin secretions and make cough more productive.

Guaifenesin dose by age

2-5 yrs: 50-100 mg every 4 hrs. 6-11 yrs: 100-200 mg every 4 hrs. ≥12 yrs: 200-400 mg every 4 hrs.

- **Decongestants** (phenylephrine or pseudoephedrine) can be used for those 12 and up. Either medication should work similarly, but it is important not to take both at the same time. Side effects can include jitteriness, sleeplessness, elevated heart rate, and elevated blood pressure. Dosing in the morning is best.
- Though those over 12 years can use Afrin (oxymetazoline) very sparingly, we don't recommend it. If congestion is severe, limit use to 2-3 days at most. Side effects can include nosebleeds, nasal dryness, and rebound congestion.
- **Cough suppressants** are not generally recommended because we don't want to suppress a beneficial cough. For those over 12, if you've already tried honey and/or cough drops without relief, and there is no history of asthma or wheezing, it's okay to try a cough suppressant such as dextromethorphan (Robitussin).
- **Combination cough/cold medications:** If over 12 and prefer to take a combo medicine like Dayquil/ NyQuil or something "cold and sinus" rather than the individual components, be sure to look closely at ingredients so that you don't take 2 types of the same medication or overdose on a single component.

DISCOMFORT: SORE THROAT/HEADACHE/BODY ACHES

If sore throat, headache, or body aches are present, they may last several days but should improve by day 5. Treatments for discomfort includes drinking cool liquids/eating cold items (popsicles), staying well hydrated, getting plenty of sleep, and taking medication such as ibuprofen or acetaminophen, even if fever is not present.

Return to School

In general, your child can return to school when fever free for 24 hours (without fever reducing medication) and symptoms are improved. Additional guidelines include:

- **RSV** (testing only < 3 yrs): fever free for 24 hrs. and runny nose has resolved.
- **Strep** (testing typically > 3yrs): fever free for 24 hrs. and on antibiotics for 24 hrs.
- **COVID:** follow the [CDC Guidelines](#) and school-specific rules, which vary school to school.
- **Influenza:** fever free for 24 hrs. and improved symptoms. Within the first 72 hrs. of illness, antiviral medications can be prescribed, but are typically reserved for children who are at a high risk for flu complications. Medications have side effects to consider; [read more here.](#)
- **If none of the above:** fever free for 24 hours and improvement in symptoms.



REASONS TO CALL OUR OFFICE

- There is respiratory distress: [retractions](#), [wheezing](#), a [combination of both](#), or stridor
- Fever is over 105°F (and continuing to rise despite medication or a tepid bath)
- Fever lasts more than 5 days (true fever = 100.4°F)
- Fever returns after having disappeared for a full 24 hrs. or more (without fever reducers)
- No urine output in 8 hours
- Signs of ear pain
- Symptoms are progressively worsening

