

Fever advice for children and young people in Shropshire

What is a fever?

A fever is an increase in body temperature. This in itself is not dangerous. Your child's body temperature is normally between 36°C and 37°C, variations between 0.5 and 1 degree are common.

Fevers in children are not uncommon. This leaflet provides advice on when to seek help and on what you can do to help your child feel better. Often the fever lasts for a short duration and many children can be cared for at home if the child continues to drink, remains alert and does not develop any worrying symptoms.

However, if you are worried or your child is getting worse with warning symptoms as listed in this leaflet, then you should seek the advice of a healthcare professional.

Working out the cause of the fever

If you are talking to a healthcare professional on the telephone, they will ask you questions about your child's health and symptoms. This will help them to decide if your child is best cared for at home or needs to see a healthcare professional face to face.

Sometimes your healthcare professional will not find a reason for your child's fever, even after a full examination. If your child is otherwise looking well, then treatment may not be necessary.

Most children can be safely cared for at home if otherwise well. Your healthcare professional may decide that your child needs a follow-up appointment. They will give you information on how to look for symptoms that may suggest more serious illnesses and how to get further help if they occur.

Looking after your feverish child

- ## Give your child plenty of drinks e.g. water or squash. If you are breastfeeding then continue as breast milk is best.
 - Give babies smaller but more frequent feeds to help keep them hydrated.

- # Do not worry about food if your child does not feel like eating but encourage them to drink more fluids.
- ★ Look for signs of dehydration such as a dry mouth, lack of tears, sunken eyes, sunken fontanelle the soft spot on your baby's head, passing less amounts of urine.
- # Children with a fever should not be over or underdressed. If your child is shivering or sweating a lot, change the amount of clothes they are wearing.
- # Physical methods of cooling your child such as fanning them, cold bathing and tepid sponging can cause discomfort and are not advised.
- It is not necessary to use medicines to treat your child's fever but if your child is distressed, you can help them feel better by giving them medicines like paracetamol or Ibuprofen. These medicines should not be given together. Always follow the instructions on the bottle to avoid overdosing your child. These medicines can make your child feel more comfortable but they do not treat the cause of the temperature.
- ## Check on your child regularly, including during the night, especially if your child is under 6 months old as they are at higher risk of serious infection.
- ★ Keep your child away from nursery or school whilst they have a fever.

The tumbler test

If a rash appears, do the tumbler test.

Press a glass tumbler firmly against the rash. If
you can see spots through the glass and they
do not fade, this is called a 'non blanching
rash'. If this rash is present, seek medical advice
immediately to rule out serious infection.

The rash is harder to see on dark skin so check
paler areas such as the palms of hands and soles
of feet.

NHS

This guide will help you to select the right service to contact. You need to regularly check your child and follow the advice below:

- # If your child becomes unresponsive
- If your child becomes blue

 If your child becomes blue
- # If your child is finding it hard to breathe
- ₩ If your child has a fit
- # If your child develops a rash that does not disappear with pressure (see the tumbler test)

You need urgent help please phone 999 or go straight to the nearest Accident and Emergency Dept.



- # If your child's health gets worse or if you are worried
- If your child has signs of dehydration including dry mouth, no tears, sunken eyes, sunken fontanelle (soft spot on the baby's head), drowsiness and seems generally unwell
- ** The temperature lasts more than 5 days and your child has not seen a health care professional
- # If your child is less than 6 months old

You need to see a nurse or doctor today. Please ring your surgery/health visitor/ community nurse/Shropshire Walk-in Centre or contact NHS111 by dialing 111 for access to the Out of Hours GP service.

If you have concerns about looking after your child at home

Useful Information

GP Surgery

Shropshire Public Health Nursing Service General Contact Number: 0333 358 3654

Telford and Wrekin Public Health Nursing Service, General Contact Number: 0333 358 3328

Shropshire Walk-in Centre Located next to A&E at Royal Shrewsbury Hospital. Open from 8am to 8pm, 7 days a week including bank holidays

NHS 111:

Dial 111 24 hour telephone service

All advice sheets can be found on Shropshire CCG Website; http://www.shropshireccg.nhs.uk/

All advice sheets can be found on Telford and Wrekin CCG Website; https://www.telfordccg.nhs.uk/



Sepsis advice sheet

What is Sepsis?

- Sepsis is a rare but serious medical condition that results from the body's overwhelming response to an infection.
- Sepsis can occur in anyone at any time and from any type of infection affecting any part of the body.
- Without quick and timely treatment, sepsis can lead to septic shock, multi-organ failure and death.

Causes of Sepsis

Sepsis is most often caused by bacterial, viral or fungal infections; sometimes the cause of sepsis is never identified.

Children with pneumonia, urinary tract infections, meningitis and severe skin infections can rapidly deteriorate and develop sepsis.

It is important to recognise and act quickly on the symptoms of sepsis in order to reduce morbidity and mortality.

Look out for the signs of Sepsis

A raised temperature (fever) in children is common, but can be worrying. Almost all children will recover quickly and without problems. However, a very small proportion may have a serious infection with sepsis (bloodstream infection) that requires urgent treatment in hospital.

This information is designed to help you monitor your child's condition if they have a raised temperature, so you know when to ask for help and can describe the symptoms.

Just tick off any of those symptoms that you observe with a note of the date and time, and follow the advice at the top of the page.

For ease of use, the symptoms are split into:

Amber, where medical advice should be asked for

Red, which means you should get the child to hospital quickly – dial '999' if necessary and ask for an ambulance.

Again, we must stress that the great majority of children do not have sepsis. But if you do have concerns and your child seems to be getting worse, even if their temperature falls, act swiftly just in case.

Find out more

Detailed information can be found on the NICE website: www.nice.org.uk/Guidance/CG160 The UK Sepsis Trust also has a lot of helpful material at: www.sepsistrust.org **Email:** info@sepsistrust.org **Phone:** 0800 389 6255



Amber (intermediate risk: ask for advice)

Some (but not all) dildren with these symptoms are seriously unwell. If you have any concerns, a trained health professional needs to assess them promptly. Contact your GP, NHS 111 or minor injuries unit.

Skin, lips and tongue	time/date	time/date	time/date	NOTES
Unusually pale				
Rash that fades when pressed fimily (use a clear glass)				
Activity				•
Not responding normally to family or carers				
Not smiling				
Difficult to wake up or unusually sleepy				
Not wanting to do very much				
Breathing				
Nostrils are flaring				
Fast breathing				
Unusually noisy or crackly breathing				
Cough that sounds like a seal barking				
Circulation				
Cold hands and feet				
Temperature and body				
Shivering or shaking				
Raised temperature for 5 days or more				
Swelling of a limb or joint				
Not using/putting weight on an arm, leg, hand or foot				
Aged 3-6 months with temperature of 39°C or above				
Vomiting, diarrhoea and hydration				
Under 1 year of age - vomiting and/or diarrhoea				
More than 5 watery poos in the last 24 hours				
Has vomited more than twice in last 24 hours				
Not feeding or eating much				
Dry mouth				
Only one wet nappy or wee in 12 hours				



Red (high risk: take immediate action) Many (but not all) children with these features are seriously unwell and need to be assessed straight away in hospital. Dial '999,' for an ambulance if necessary. Notes Skin, lips and tongue Very pale or blue skin and sunken eyes Rash that does not fade when pressed firmly (use a clear glass) Activity Not responding to carers Very difficult to wake up Weak, high-pitched or continuous ay in younger children Older children are confused or unusually irritable Breathing Finding it much harder to breathe than normal Grunting breathing Very fast breathing: more than 60 breaths a minute Noticeable pauses in breathing Circulation Very cold hands and feet Temperature and body Under 3 months with raised temperature over 38°C The soft spot on an infant's head is bulging Stiff neck, especially when trying to look up and down The child has a seizure Vomiting, diarrhoea and hydration Very thirsty and not able to keep fluids down Bloody or black 'coffee ground' vomit Not had a wee for 12 hours



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