

Fever

What is fever?

It is normal for the body's temperature to change during the day. Exercise, warm clothing and hot weather can cause a small rise in temperature. A fever is a body temperature of over 100.4 degrees F (or 38.0 degrees C). Most of the time fever is not harmful. Fever is the body's way of fighting an illness.

Treatment of a fever

You do not always need to treat a fever. The best thing to do is to watch how your child acts. Are they eating and sleeping well? How do they look? Do they play at times? If they are not comfortable, you can try these tips.

Things you should do:

- Offer extra fluids to drink all through the day. This restores lost body fluids.
- Dress your child in comfortable clothes or pajamas. Avoid too many clothes or bundling. This can raise body temperature.
- Decide if your child is comfortable. If not, you can give acetaminophen (like Tylenol) or ibuprofen. Make sure to give the correct dose based on your child's weight. Give ibuprofen with food or drink to avoid stomach upset.
- Make sure your child gets enough rest.

Things you should not do:

- Don't sponge your child with alcohol or give cold baths to lower a fever.
- Don't give fever medicine to a baby under 3 months old, unless told to by a doctor.
- Don't worry if your child is not eating solid food. Liquids are needed most during a fever.
- Don't ever give aspirin to your child.

- Don't wake up your child to give him fever medicine.
- Don't use ibuprofen for babies less than 6 months unless told to by a doctor.

Call the doctor if your child:

- Is less than 3 months and has a fever. Call right away.
- Has a fever for more than 3 days.
- Is getting sicker.
- Is in pain or complains of pain, especially in the neck, ears or throat.
- Is very cranky or sleepy.
- Has trouble breathing.
- Has a seizure.
- Has a rash (except chicken pox).
- Has a dry tongue and lining of the mouth.
- Vomits often or for more than a day.
- Becomes confused or starts seeing things that are not there.
- Is less than 1 year old and has less than 3 wet diapers in a day.
- Is over 1 year old and does not pee at least two times in a day.
- Has a chronic health condition that weakens their immune system.
- Has a fever of over 105 degrees F.

Thermometers

Digital thermometers can be used in the mouth, in the bottom (rectally) or in the armpit (axillary).

Ear (tympanic) thermometers measure the temperature in the eardrum. They do not give a

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good reading for babies under 6 months. When used correctly, they work for older babies and kids.

Forehead strip thermometers and pacifier thermometers are not very reliable, so avoid using them.

The American Academy of Pediatrics advises that parents stop using thermometers that contain mercury. This is because your child could be harmed by mercury if the thermometer breaks. If this occurs, call your local poison center. They will tell you how to safely dispose of the mercury.

Use non-glass, non-mercury thermometers.

Taking your child's temperature

First, clean the thermometer with warm soapy water or wipe with rubbing alcohol. Rinse with cool water. Always stay with your child while taking a temperature. Remember to clean the thermometer again before putting it away.

Rectal temperature (for babies under 6 months)

Taking your child's temperature in the bottom (rectum) gives the most correct reading for babies under 6 months.

1. Dab some lubricant that does not contain petroleum (like KY Jelly) on the tip of the thermometer.
2. Place your baby lying face down or on their side with the knees drawn up to the belly.
3. Gently insert the thermometer into the opening in their bottom (rectum), about 1/4 to 1/2 inch. You will know when to stop inserting when the silver tip disappears.
4. Keep one hand firmly on your child.
5. Read the temperature when you hear the digital thermometer signal (after 2 minutes for a glass thermometer).

Armpit temperature (for children and babies, including newborns)

1. Place the tip of the thermometer in the top of your child's armpit, next to the skin.
2. Hold your child's arm tightly against their chest.
3. Read the temperature when you hear the digital thermometer signal (4 to 5 minutes for a glass thermometer).

Oral temperature (For once children are 4 or 5)

1. Wait 30 minutes after your child eats or drinks.
2. Gently put the tip of the thermometer under one side of the tongue, toward the back.
3. Read the temperature when you hear the digital thermometer signal (3 minutes for a glass thermometer).

Ear (tympanic) temperature (only for children over 6 months)

1. Put a new, throw away cover on the tip of the thermometer.
2. Gently pull your child's ear straight back and ask them not to move.
3. Place the tip of the thermometer in the opening of the ear. Be careful not to push hard or too far in the opening.
4. Press the button until the thermometer beeps.
5. Remove the thermometer from the ear and read the temperature.
6. Throw the used cover in the garbage.

Most fevers caused by a viral infection last for 2 or 3 days. Your child can return to school or day care once they have not had a fever for 24 hours (without having taken a medicine to reduce the fever during those 24 hours.)

Temperature conversion chart

Celsius	Fahrenheit
34.0	93.2
34.2	93.6
34.4	93.9
34.6	94.3
34.8	94.6
35.0	95.0
35.2	95.4
35.4	95.7
35.6	96.1
35.8	96.4
36.0	96.8
36.2	97.2
36.4	97.5
36.6	97.9
36.8	98.2
37.0	98.6
37.2	99.0
37.4	99.3
37.6	99.7
37.8	100.0
38.0	100.4
38.2	100.8
38.4	101.1

Celsius	Fahrenheit
38.6	101.5
38.8	101.8
39.0	102.2
39.2	102.6
39.4	102.9
39.6	103.3
39.8	103.6
40.0	104.0
40.2	104.4
40.4	104.7
40.6	105.2
40.8	105.4
41.0	105.9
41.2	106.1
41.4	106.5
41.6	106.8
41.8	107.2
42.0	107.6
42.2	108.0
42.4	108.3
42.6	108.7
42.8	109.0
43.0	109.4

To Learn More

- www.seattlechildrens.org
- **Seattle Children's Resource Line**
206-987-2500 or 866-987-2500
toll-free Washington, Alaska, Montana, Idaho
- **Your child's healthcare provider**

Seattle Children's will make this information available in alternate formats upon request. Call Marketing Communications at 206-987-5205 or 206-987-2280 (TTY).

This handout has been reviewed by clinical staff at Seattle Children's. However, your child's needs are unique. Before you act or rely upon this information, please talk with your child's healthcare provider.

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