

PINK EYE

Conjunctivitis is commonly referred to as pink eye. **Pink eye does not require immediate therapy in most cases.** If your child has developed redness in the eye or discharge from the eye, please call our office during business hours. Until your child is seen, you can treat the eye with warm compresses or artificial tear drops (available at most drug stores). The tear drops can be used as often as needed to irrigate away the discharge. Remember, conjunctivitis may be contagious so wash your hands after caring for your child. Medication, if warranted, will be prescribed after your child has been examined.

When to call the on-call doctor:

- If your child sustained trauma to the eye
- If your child is unable to see from the eye or complaining of severe pain
- If your child cannot open his/her eye because of eyelid swelling. Wipe away any discharge with a warm washcloth to help the eye open.

ACCIDENTAL INGESTIONS

Please call the poison control number **(800-222-1222)** for all accidental ingestions. They are best equipped to answer all your questions.

INJURIES

In general, if your child sustained a severe injury, you will need to bring him/her to an emergency room or urgent care center. A diagnosis can only be made after an evaluation of your child. The on-call doctor in most cases will only be able to give recommendations as to whether your child needs to be seen immediately or if it can be addressed during our regular hours.

CONSTIPATION

Constipation is not an emergency and can be addressed during office hours. To minimize the occurrence of constipation, provide a well-balanced diet to your child and make certain your child is well hydrated.

Beansprout After Hours Bee Cave 512-610-7030

Mon- Thu 5 – 7pm, Fri 5 – 6pm & Saturdays 8am – 12 noon *by appointment

EMERGENCY ROOMS

Dell Children's Medical Center 512-324-0000
4900 Mueller Blvd. Austin, TX 78723

Baylor Scott & White - Lakeway
100 Medical Parkway, Lakeway, TX 78734

St. David's Emergency Center Bee Cave 512-816-2100
12813 Galleria Circle, Bee Cave, TX

Five Star ER 512-893-7410
330 E. Hwy 290, Dripping Springs, TX 78620

*For non urgent medical matters for children over 12 months go to local urgent care center



AFTER HOURS HELPFUL INFORMATION

This information has been designed to help you with questions which may arise when our office is closed and to help distinguish between what is an urgent and non-urgent problem. Review this information before calling the doctor to determine if a call is required

- **Poison Control (800) 222-1222**

FEVER

Fever is a normal response by your body to various causes (i.e., infections, vaccines). Beansprout Pediatrics (BSP) defines fever in a child older than 3 months as a temperature $\geq 101^{\circ}\text{F}$. There are many ways to take temperature including under the arm (axillary), rectally, orally, in the ear, or with a temporal scanner. Keep track of your child's actual temperature and how you take the temperature. If your child has a fever, we recommend treating the fever only when the child is uncomfortable. In most cases the anti-fever medicine i.e., ibuprofen (Motrin, Advil) and acetaminophen (Tylenol) will only bring the child's temperature down 1° - 2° degrees. For example, if your child has a 104°F temperature, we expect the fever to drop to 102° - 103°F with medication. As an adjunct to fever reducers, you can give your child a tepid (water temperature of 85° - 90°F) bath. **Notify the on-call physician of your child's fever if it meets one of the criteria listed below.**

When to call the on-call doctor:

- If your child is younger than 3 months with a rectal temperature $>100.4^{\circ}\text{F}$
- If your child has a very high fever ($>105^{\circ}\text{F}$)
- If your child is inconsolable or unresponsive despite giving an adequate dose of a fever reducer

Fever, resulting from an infection, of $\leq 104^{\circ}\text{F}$ is beneficial. It helps the body fight infections; turns on the body's immune system; and may help shorten the course of the illness.

Fever reducers are only designed to make your child more comfortable. It will NOT stop your child from having a fever.

On average, fever reducers take up to one hour to work. Acetaminophen can last as long as 4-6 hours and can be safely given at any age. Ibuprofen can last as long as 6-8 hours and can be safely given to children ≥ 6 months of age.

IMMUNIZATION REACTIONS

When your child receives vaccines, it is quite common for him/her to have fever, discomfort, swelling and redness around the injection site. For more information about shot reactions, consult the vaccine handout you received in the office.

In most cases shot reactions are not emergencies.

When to call the on-call doctor:

- If your child is unresponsive or has a fever $>105^{\circ}\text{F}$ after the immunization
- If the immunization site is very swollen, greater than 3 inches in size, or has a red streak running from the injection site

PRESCRIPTIONS AND ANTIBIOTICS

In the best interest of a sick child, an examination should always be done first before any medication, if warranted, is prescribed. If you are concerned about your child's illness and think your child cannot wait until the morning to be evaluated, take your child to an emergency room or urgent care center. Should issues arise with a refill request, please call during regular business hours when we are best able to handle these requests.^{21 8}

VOMITING

There are many illnesses that will cause vomiting and/or diarrhea. These illnesses are commonly referred to as viral **gastroenteritis**. In most cases, children do not need to be seen immediately for these symptoms. The most important thing you can do is **keep your child hydrated**. The best way to keep small children (< 3 years old) hydrated is with an oral rehydration liquid (i.e., Pedialyte). Older children can take water, flat ginger ale, or Gatorade. Avoid red or green colored drinks for it may artificially make the vomit appear to be blood-stained or bile-stained. Also avoid drinks high in sugar such as apple juice. If your child has begun to vomit, let him/her rest for 1-2 hours to allow the stomach to settle then start with small sips of liquids (i.e., 5cc every 5 minutes for 1-2 hours). Some children will continue to vomit but in most cases the frequent small amount of liquid will keep them hydrated.

When to call the on-call doctor:

- **If your child is unable to keep liquids down for several hours (6 hours for infants or 12 hours for older children)**
- **If your child is having severe pain in his/her stomach with vomiting.**
- **If the vomit has blood or is green in color.**
- **If your child is unresponsive, or appears very dehydrated (sunken eyes, not urinating for > 8 hours if your child is < 1 year old, or > 12 hours if your child is > 1 year old)**

DIARRHEA

As with vomiting, diarrhea is most often caused by a viral gastroenteritis. The key is to keep your child hydrated with water. Avoid juices (especially apple, pear, or prune juice) or any drinks high in sugar for these types of drinks can worsen the diarrhea. For formula & breast fed infants, continue normal feeds. In older children (> 1 year old), give more starchy foods (rice, bread, plain pasta). In most cases, diarrhea is not an emergency and can be addressed during office hours.

→ **We do not recommend any medication to stop diarrhea.** These medications may prolong the illness. *Continued*→

When to call the on-call doctor:

- **If your child is having bloody stools**
- **If your child has become very dehydrated (sunken eyes, not urinating for > 8 hours if your child is < 1 year old, or > 12 hours if your child is > 1 year old)**

COUGH

Cough is a normal response to most upper respiratory infections. With a few exceptions, you can treat your child at home. Please refer to our website for more information. Medication, if warranted, will be prescribed after your child has been evaluated.

When to call the on-call doctor:

- **If your child is having trouble breathing or is breathing rapidly**
- **If your child has asthma or reactive airway disease and his/her breathing is not responding to breathing treatments given every four hours**

NASAL CONGESTION

As with cough, children may suffer from nasal congestion or runny nose with colds. Nasal congestion is not an emergency. Visit our website for more information.

EARACHE AND SORE THROAT

In general, both earaches and sore throats are not emergencies, but may need to be seen in the morning. Antibiotics, if warranted, will be prescribed after your child has been evaluated. If you feel that your child cannot wait until the morning to be seen, then take him/her to an urgent care center. In the meantime, pain relievers and warm compresses may provide comfort. For an older child with a sore throat, try having him/her gargle with a teaspoon of salt dissolved in warm water for temporary relief.

When to call the on-call doctor:

- **If your child's sore throat includes other symptoms: excessive drooling, severe difficulty swallowing, difficulty breathing, or being unable to open his/her mouth fully**
- **If your child's earache includes other symptoms: stiff neck, loss of balance when walking, or redness and swelling behind one ear in comparison to the other ear**

RASH

In most cases, rash or unusual skin changes are not emergencies and cannot be diagnosed over the phone. If you are concerned about a rash, please call during regular office hours. If your child has recently started a medicine and develops a rash, stop the medication and call our office in the morning.

When to call the on-call doctor:

- **If your child is inconsolable or unresponsive or with a high fever (>105°F) and also has a new rash. This situation is considered an emergency. We recommend that your child be seen immediately in an emergency room or urgent care facility.**
- **If the rash is purple/blood-colored spots, or bright red and tender to touch, or red streaks that is spreading, or appears like a burn**
- **If the rash is associated with swollen lips, swollen tongue, difficulty breathing, or abdominal pain, go to the emergency room as this may be a severe allergic reaction.**