Pediatric Initiative: What Penn State and PA Department of Health are doing to revise sick child exclusion policies in childcare settings to reduce overuse of antibiotics and reduce stress on families.

The United States Census Bureau estimates that approximately 63% of children less than 5 years of age are in some type of regular childcare arrangement (www.census.gov). In Pennsylvania, there are approximately 8000 licensed childcare settings with about a quarter million children. Children attending childcare centers are at a greater risk of acquiring infections due to their exposure to other children and adults, which inherently increases the likelihood of being prescribed antibiotics inappropriately.

Unfortunately, antibiotics offer no benefits to children with viral respiratory illnesses. Instead, they contribute to unnecessary costs, risk for adverse effects, and they contribute to emergence of drug-resistant bugs. Penn State Hershey Medical Center and the Pennsylvania Department of Health are collaborating in a survey to better understand the knowledge and attitudes towards antibiotics among parents and guardians of young children. This survey began in 2013 as part of the Get Smart Pediatric Initiative. The survey is being administered to consenting parents during visits to primary care clinics at Penn State Hershey Pediatrics on Hope Drive. We hope that many parents will participate to increase knowledge on this subject.

Cold Weather Safety Tips for Children

The American Academy of Pediatrics (AAP) has several great tips for keeping children safe and warm during the cold weather months. With the polar vortex, snow storms, and artic blasts, it is important to remember these tips to keep children safe.

**What to wear:**

- Dress children warmly for outdoor activities using several thin layers, boots, gloves or mittens, and a hat.
- Babies and young children should be dressed in one more layer than adults would wear in the same conditions.
- Blankets, quilts, pillows, bumpers, and other loose bedding are associated with suffocation deaths and may contribute to Sudden Infant Death Syndrome (SIDS) and should be kept out of an infant's sleeping area. One piece sleepers or wearable blankets should be used. If a blanket must be used, it should be tucked tightly into a crib mattress and only reach the infant’s chest so the baby’s face is less likely to be covered.

Hypothermia develops when a child’s temperature falls below normal due to exposure to colder external temperatures. It can happen when playing outside in the cold, walking in the cold, not wearing proper clothing, or continuing to wear clothing that is wet. Hypothermia can occur more quickly in children than adults, if the adults are cold and shivering the children may already be suffering. Shivering, lethargy, and clumsiness are all signs of early hypothermia. As hypothermia worsens, the child’s speech may become slurred and the child’s body temperature will decline.

**What to do in case of hypothermia:**

- Remove child from the cold. Keep the child inside in a warm, covered area.
- Call 911 for help. When EMTs arrive, be specific about length of time outside, any exposure to wetness, age and weight of child, symptoms, and onsets of symptoms.
- Until help arrives, remove any wet clothing and wrap the child in warm blankets and clothes.

Frostbite occurs when skin or outer tissue becomes frozen. Frostbite is most likely to occur on
fingers, toes, ears, and noses. The affected areas may become pale, gray, and blistered. Common complaints from children include that the child’s skin is burning or is numb.

**What to do in case of frostbite:**

- Remove the child from the cold. Keep the child inside in a warm, covered area.
- Place the frostbitten parts of the child’s body in warm (not hot) water. 104 degrees Fahrenheit, the temperature of most bathtubs, is the recommended temperature. If the area cannot be submerged, warm washcloths can be applied to affected areas.
- Do not rub affected areas.
- After a few minutes in water, dry the child and cover the child with clothing or blankets. Then, give the child something warm to drink.
- If the numbness continues for more than a few minutes, call a doctor to consult for next steps.

**What To Do For Cold or Flu!**

At the height of cold and flu season, it is important to remember that antibiotics are NOT effective for colds or the flu. This information is important. The Get Smart Program urges the judicious use of antibiotics- that is, only using antibiotics when faced with a bacterial infection as prescribed by a medical doctor. However, this message will not help manage cold and flu symptoms!

Upper respiratory infections, such as sore throats, ear infections, sinus infections, colds, and bronchitis caused by viruses can last up to two weeks. To feel better, upper respiratory suffers can try to get plenty of rest, drink fluids, use a clean humidifier or cool mist vaporizer, avoid smoking and other airborne pollutants, take a pain reliever/fever reducer such as acetaminophen, ibuprofen, or naproxen. Over-the-counter products such as pain relievers, decongestants, and saline nasal sprays may relieve some of the symptoms; however, they will not shorten the length of the infection. Some over-the-counter products are not recommended for children of certain ages; therefore, it is important to use these products as directed.

Specific symptoms have different recommendations. For sore throats ice chips, sprays, lozenges, clean humidifiers or cool mist vaporizers, and pain relievers may help. Throat lozenges should not be given to young children. Ear pain may be relieved by putting a warm moist cloth over the ear that hurts and taking a pain or fever reliever. Runny nose and sinus pain can be lessened by using a decongestant, nasal spray, warm compress over the nose and forehead, breathing in steam from a bowl of hot water or a shower, and taking a pain reliever.

The best way to avoid unpleasant cold and flu symptoms is to prevent them. The seasonal influenza shot is recommended for everyone 6 months of age and older, including pregnant women. The seasonal influenza shot is one of the best ways to prevent the spread of influenza. Another way to prevent the spread of cold and flu viruses is proper, vigorous hand washing. With the cold weather, children may be staying inside and not washing their hands as frequently as they should. Hand washing should occur before and after play, before and after eating, before and after restroom use, and anytime hands appear dirty. Proper hand washing includes wetting hands with warm water, scrubbing hands for 20 seconds (or two verses of the Happy Birthday song) making sure to reach between the fingers, under the fingernails, back of the hands, and the wrist, rising hands with warm water, then drying hands on disposable paper towels. Mechanical hand washing is more effective than water-free antibacterial soaps and should be encouraged with children and adults. To request a Glo-Germ hand washing presentation to teach proper hand washing techniques to any age group, please e-mail nmueller@pa.gov!

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