



Middle Ear Infection

Patient and Family Education

This teaching sheet contains general information only. Your child's doctor or a member of your child's health care team will talk with you about specific care for your child.

A middle ear infection is caused by a bacteria (germ) or virus. It happens in the space behind the eardrum. If this space is blocked or clogged by a cold or allergy, it can fill with fluid. The fluid can cause a decrease in hearing for a while until the space is clear again. The fluid can also become infected.

What are the possible symptoms?

Your child may have one or more of these:

- Fever (temperature over 100.3°F)
- Ear pain or pulling at the ears
- Temporary decrease in hearing
- Being fussy or not being able to sleep
- Vomiting or loose stools
- Eating less food
- Pus draining from the ear

Your child's ears may also hurt for other reasons. Ear pain can be caused by:

- An infection of the outer ear canal known as "swimmer's ear"
- Blocked or plugged eustachian tube (the tube that connects the ear and the throat) from a cold or allergy
- A sore throat
- An infected tooth
- Back teeth (molars) coming through the gums

What is the treatment?

Some general guidelines to follow include:

- Not all ear infections need to be treated with antibiotics. Many ear infections get better just as well and as quickly without antibiotics.
 - If antibiotics are prescribed for your child, take them as directed for the full amount of time.
 - Do this even if your child's ear begins to feel better.
- Give acetaminophen (Tylenol or less costly brand) or ibuprofen (Motrin, Advil or less costly store brand) if advised by your child's doctor for fever or pain. Follow the directions on the box carefully or ask your child's doctor how much medicine to give.

DO NOT:

- Give your child more than 5 doses of acetaminophen in a 24-hour period.
 - Give acetaminophen to babies younger than 3 months old without talking with your child's doctor.
 - Give ibuprofen to a child younger than 6 months old without talking with your child's doctor.
 - Give acetaminophen and ibuprofen together.
 - Alternate these medicines.
- Give plenty of fluids to drink.

In case of an urgent concern or emergency, call 911 or go to the nearest emergency department right away.

Middle Ear Infection, continued

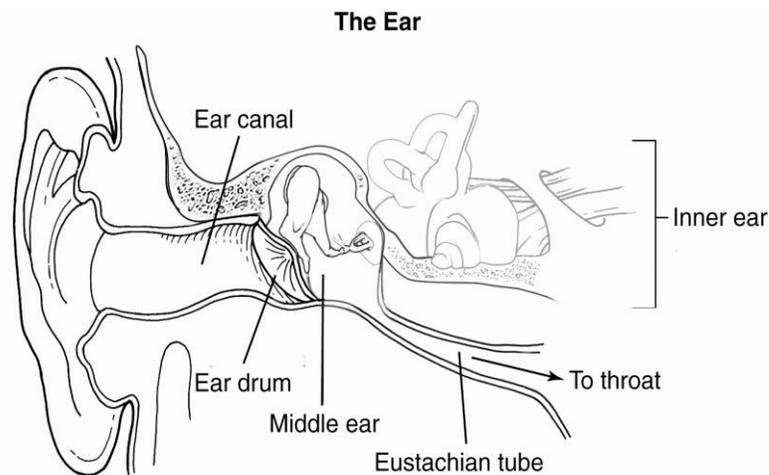
- Give cold and cough medicines only as advised by your child's doctor. This includes both prescription and over-the-counter medicines.
 - For children younger than 6 years old – cough and cold medicines usually do not work in this age group. They also can cause serious side effects.
 - **DO NOT** give a child younger than 6 years old any medicine that is made for children over the age of 6.
 - Many brands of cough and cold medicines have the same kinds of ingredients or unnecessary ingredients. Using more than 1 brand or mixing brands can cause a serious overdose and harm in your child.
 - **DO NOT** use a combination cold medicine that contains acetaminophen or ibuprofen.
- Keep your child away from cigarette smoke and odor.
- Do not allow your child to take a bottle to bed.
- Have your child's ears rechecked as told by your doctor.
- Never stick a cotton swab or other pointed object in your child's ear to clean it out. This can harm the ear.

When should I call the doctor?

Call your child's doctor **right away** if your child has any of these:

- Does not smile or play for even a few minutes every 4 hours
- Still has fever 48 hours after antibiotics are started if they were prescribed by the doctor
- Has new symptoms
- Has pain that does not go away after 48 hours
- Vomits more than 2 times
- Shows signs of dehydration (drying out):
 - No urine in six to eight hours in an infant younger than 1 year old
 - No urine in more than eight hours in a child older than 1 year old
 - No tears when crying
 - Sunken eyes
 - Dry lips and mouth
- Has problems taking the antibiotic
- Has redness or swelling of the skin behind the ear or if his ear sticks out more than normal

Also call if you have any questions or concerns about how your child looks or feels



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