



Patient and Family Education

This teaching sheet contains general information only. Talk with your child's doctor or a member of your child's healthcare team about specific care of your child.

### What is RSV?

RSV stands for Respiratory Syncytial Virus.

- RSV is a type of cold virus. It is easy to catch and infects most babies less than 18 months of age.
- Antibiotics do not treat RSV because antibiotics kill bacteria, not viruses.
- RSV is most common in the fall, winter and spring.

## What are the possible symptoms?

RSV in older children and adults causes a cold. It can cause a more severe illness in babies less than 18 months of age.

- RSV usually begins as a cold.
- It can then progress to wheezing, fast breathing, coughing and fever.

To find out if your baby has RSV, the doctor may order a test on the mucus from his nose.

### What is the treatment?

If your baby has a mild case, you may be able to treat him at home. If your baby has a more severe case, he may need to stay in the hospital. Some general treatment guidelines include:

## If your baby is admitted to the hospital:

- Our staff will check your baby's temperature, heart rate and breathing often. They will also check his breathing to help decide whether he needs oxygen. A machine called a pulse oximeter may be used to measure his oxygen levels.
- Our staff may use suction devices to keep his nose clear of mucus.
- You will need to learn how to use the bulb suction and help with your baby's care.
- Breathing treatments usually do not improve the symptoms of RSV.
- Once your baby starts improving, our staff will help you learn how to take care of him at home.
- Our staff will place your baby in "Isolation" in case he has something contagious (catchy). This means that we take extra measures to keep germs from spreading to others. Staff may wear masks, gowns or gloves when caring for your baby.
- Washing your hands or using an alcohol hand cleaner often can also help keep germs from spreading to others.

### You can plan to go home when:

- Your baby is breathing slower and easier.
- Your baby is drinking and eating well.
- You can give any medicines, if still needed, at home.

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

# **RSV**, continued

- You and your baby's caretakers can use a bulb suction to keep his nose and mouth clear.
- You and your baby's doctor feel that he is ready for discharge.

### For your baby's care at home:

- Give your baby plenty of rest. Most babies do not feel well enough to be very active.
- Give your baby plenty to drink.
- Avoid cigarette smoke and odor around your baby.
- Give acetaminophen (Tylenol or other less costly store brand) if advised by your baby's doctor to control fever. Follow the directions on the box carefully, or ask your doctor how much medicine to give.
  - Do not give your baby more than 5 doses of acetaminophen in a 24-hour period.
  - Do not give acetaminophen to babies less than 3 months of age without talking with your child's doctor.
- Suction the nose or mouth with a bulb syringe as needed, especially if your child has trouble drinking or feeding. This helps keep your baby from coughing and gagging during his feeding.
- Salt water (saline) drops may be used before suctioning the nose.
- Give cough and cold medicines only as advised by your baby's doctor. This includes both prescription and over-the-counter medicines.
  - For children less than 6 years of age cough and cold medicines usually do not work well in babies and toddlers. They also can cause serious side effects. Do not use them if your child is less than 6 years old, unless his doctor tells you to do so.
  - Do not give a child less than 6 years old any medicine that is made for children over the age of 6 years.
  - Many brands of cough and cold medicines have the same kinds of ingredients. Many also have unnecessary ingredients. Using more than 1 brand or mixing brands can cause a serious overdose and harm your baby. Use these medicines only as directed by your baby's doctor.
- Washing your hands or using an alcohol hand cleaner often can help stop germs from spreading to others.

Your baby can return to daycare as soon as your doctor advises. This is usually about 24 hours after the fever is gone without using medicines.

#### When should I call the doctor?

### Call 911 or your local ambulance service <u>right away</u> if your baby:

- Is so weak and tired that he hardly responds to you.
- Is working **very** hard to breathe or finds it hard to take a breath.
- Grunts when he breathes.
- Has chest retractions (skin pulling in around the ribs and chest when breathing).
- Has a blue or dark purple color to the nail beds, lips or gums.
- Stops breathing for more than 10 seconds.
- Cannot speak while trying to breathe.
- Has any breathing problem that needs care **right away**.

# **RSV**, continued

### Call your baby's doctor right away if your baby:

- Does not smile or show interest in play for at least a few minutes during a 4-hour period.
- Wheezes or breathes harder than he did when he was seen by the doctor.
- Is unable to breathe and suck at the same time or chokes when he sucks.
- Has any fever and is less than 3 months old, or has a fever lasting longer than 3 days in older babies.
- Cannot be calmed for at least a few minutes each hour using methods that usually work for your baby, such as holding, rocking, pacifiers or soothing talk.

### Also, call the doctor if you:

- See signs of dehydration (drying out):
  - No urine in 6 hours in a baby less than 1 year of age
  - No urine in more than 8 hours in a baby or child older than 1 year of age
  - No tears when crying
  - Sunken eyes
  - Dry lips and mouth
- Have any questions or concerns about how your baby looks or feels.