



The Prepared Parent: Essential Guide to Keeping Kids Safe

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Fevers: Managing at-home

Fevers can be scary, but they're actually helpful! Fevers are a body's way to begin fighting off an illness. For children, 100.4°F is considered a fever. So take a breath and relax. We're here to help.

Here are a few things you can do at home for your child to help keep them comfortable, and your nerves at ease.

- **Hydrate!** It's very easy for babies and children to quickly become dehydrated. Drinks like Pedialyte, coconut water, cucumber juice, and plain water are great options. If they're not drinking much, try to get a couple sips every 5-10 minutes. When your child is sick and has a fever, don't be worried about missing meals or lack of appetite. Their little bodies need the energy to fight the bug. It is most important to stay hydrated.
- **Baths.** Fill the tub with warm water and let them soak for about 10 minutes. Avoid the urge to cool the water, it can make things worse.
- **Light clothing.** Don't over dress your child or put too many blankets on them. We know it's hard when they have chills or want to snuggle up under a blanket, but that isn't what's best for them. Try a light sheet versus a blanket if they insist on a cover.
- **Cooling towels.** Grab a pack, rinse in cool water, ring it out, and place it on their forehead. Fan it out every 15 minutes to "activate" the cooling action further and replace on their head.
- **Tylenol and Ibuprofen.** If your child is feeling terrible and cannot stay hydrated, treat with one of these. Ibuprofen can be given every 6 hours and Tylenol every 4 hours. Check with your pediatrician for correct dosage as underdosing won't be effective.

When to seek medical help	Stay at-home
<ul style="list-style-type: none"> • Infants less than 3 months old with a temperature greater than 100.4°F • A fever that lasts more than 4 days • Dehydrated - no wet diapers or potty visits within 6 hours • Trouble breathing • Lethargic 	<ul style="list-style-type: none"> • Hydrating well • Playful • Alert and acts normal when temperature is down • Normal skin color





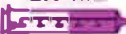



















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Fevers: Ibuprofen Dosing






How to give the right amount of IBUPROFEN (also known as Motrin, Advil) is different depending on which type of ibuprofen you plan to give.




















Dose: Give every 6 hours if needed, for fever or pain. **DO NOT GIVE MORE THAN 4 DOSES IN 24 HOURS.** Do **NOT** use with any other medicine containing ibuprofen.



Weight	Age	Infant's Ibuprofen Drops (50 mg / 1.25 mL)	Children's Liquid Ibuprofen (100 mg / 5 mL)	Children's Ibuprofen Chewable Tablets (100 mg)	Adult's Ibuprofen Tablets (200 mg)
0 to 11 pounds (up to 5 kilograms)	0 to 5 months	—	—	—	—
12 to 17 pounds (about 6 to 7 kilograms)	6 to 11 months	1.25 mL 	2.5 mL 	—	—
18 to 23 pounds (about 8 to 10 kilograms)	12 to 23 months	1.875 mL 	4 mL 	—	—
24 to 35 pounds (about 11 to 15 kilograms)	2 to 3 years	2.5 mL 	5 mL → 	1 tablet 	—
36 to 47 pounds (about 16 to 21 kilograms)	4 to 5 years	3.75 mL 	 ← 7.5 mL	1 ½ tablets 	—
48 to 59 pounds (about 22 to 26 kilograms)	6 to 8 years	5 mL 	10 mL → 	2 tablets 	1 tablet 
60 to 71 pounds (about 27 to 32 kilograms)	9 to 10 years	—	 ← 12.5 mL	2 ½ tablets 	1 tablet 
72 to 95 pounds (about 33 to 43 kilograms)	11 years	—	15 mL → 	3 tablets 	1 ½ tablets 
96 pounds or more (44 kilograms or more)	12 years or older	—	10 mL + 10 mL = 20 mL 10 mL →  and 10 mL → 	4 tablets 	2 tablets 

Fevers: Tylenol Dosing

Weight →	6 to 11 pounds (3 to 5 kilograms)	12 to 17 pounds (5 to 7 kilograms)	18 to 23 pounds (8 to 10 kilograms)	24 to 35 pounds (11 to 15 kilograms)
Age →	0 to 3 months	4 to 11 months	12 to 23 months	2 to 3 years
Infant's Acetaminophen (160 mg / 5 mL)	1.25 mL 	2.5 mL 	3.75 mL 	—
Children's Acetaminophen (160 mg / 5 mL)	—	—	—	5 mL 
Children's Acetaminophen Chewables (160 mg)	—	—	—	1 tablet 
Children's Acetaminophen Dissolvable Packets (160 mg / powder pack)	—	—	—	—
Adult's Acetaminophen Tablets (325 mg)	—	—	—	—
Adult's Acetaminophen Tablets (500 mg)	—	—	—	—

Weight →	36 to 47 pounds (16 to 21 kilograms)	48 to 59 pounds (22 to 26 kilograms)	60 to 71 pounds (27 to 32 kilograms)	72 to 95 pounds (33 to 43 kilograms)	96 pounds or more (44 kilograms or more)
Age →	4 to 5 years	6 to 8 years	9 to 10 years	11 years	12 years or older
Infant's Acetaminophen (160 mg / 5 mL)	—	—	—	—	—
Children's Acetaminophen (160 mg / 5 mL)	7.5 mL 	10 mL 	12.5 mL 	15 mL 	10 mL + 10 mL = 20 mL 
Children's Acetaminophen Chewables (160 mg)	1 ½ tablets 	2 tablets 	2 ½ tablets 	3 tablets 	4 tablets 
Children's Acetaminophen Dissolvable Packets (160 mg / powder pack)	—	2 packets 	2 packets 	3 packets 	—
Adult's Acetaminophen Tablets (325 mg)	—	1 tablet 	1 tablet 	1 ½ tablets 	2 tablets 
Adult's Acetaminophen Tablets (500 mg)	—	—	—	1 tablet 	1 tablet 

Allergic Reactions: Managing at-home

Allergic reactions can range from mild to life-threatening. As a parent, it's crucial to know how to recognize the signs of an allergic reaction and how to respond effectively. This guide provides detailed steps on how to handle allergic reactions to keep your child safe.

What Can I Do About Allergic Reactions?

- If the symptoms are severe and you have an epinephrine autoinjector, use it as directed right away and call 911 for emergency medical help.
- If the symptoms are mild, give an antihistamine by mouth such as diphenhydramine (Benadryl or a store brand) or Cetirizine (Zyrtec or a store brand). If your child keeps having mild allergy symptoms, let your doctor know.
- Call the doctor if your child has an allergic reaction that is more than mild or worries you.

Mild Allergic Reaction	Severe Allergic Reaction: often 2 or more of these symptoms - call 911 immediately
<ul style="list-style-type: none"> • Itchy and slightly swollen skin • Change in skin tone or color, like red or a deeper shade of the skin tone • Stuffy, runny nose • Sneezing • Itchy, watery eyes • Red bumps (hives) anywhere on the body 	<ul style="list-style-type: none"> • Trouble speaking and/or swallowing • Swelling in face, eyes, or tongue • Skin changes with rash, redness, or hives • Wheezing, trouble breathing or shortness of breath • Feeling like it's harder to breath - airway is getting tight • Chest tightness or chest pain • Looks flushed or pale • Nausea or vomiting with belly pain • Dizziness and lightheadedness • Unconsciousness

Being prepared and knowledgeable about how to handle allergic reactions can save your child's life. By recognizing the symptoms, knowing how to respond, and taking preventive measures, you can ensure your child's safety and well-being.

Visit [Inspire Health Pediatrics](https://www.inspirehealthpediatrics.com) for more information or to schedule an appointment.

Allergic Reactions: Anaphylaxis & Prevention

How do you help a child in anaphylaxis?

This is a medical emergency. Seek help immediately.

- Use epinephrine auto injector (EpiPen) if available. Simply follow the instructions on the injector. Do not be afraid to use it. It can save their life.
- Call 911 - yes, you're going to the emergency room. Symptoms can recur. They will go to be monitored and provided additional care as needed.
- Make sure the exposure that triggered the response is removed. For example, if it was food, brush their teeth (and throw away the tooth brush immediately after!).
- Give them Children's Benadryl (check bottle for dosing).

For mild allergies, use over-the-counter antihistamines to help keep things under control.

Prevention Tips:

- **Know the triggers:** Identify and avoid known allergens. Common allergens include certain foods (nuts, shellfish), insect stings, medications, and latex.
- **Read labels:** Always read food labels and ask about ingredients when eating out.
- **Educate your child:** Teach your child about their allergies and how to avoid triggers. Make sure they know to inform an adult immediately if they experience symptoms.
- **Emergency action plan:** Create an emergency action plan that includes steps to take in case of an allergic reaction and ensure all caregivers, teachers, and babysitters are aware of it.
- **Carry medications:** Always have an antihistamine and an epinephrine auto-injector available, especially when traveling or attending events.

Most common food allergens:

- Cow's milk
- Eggs
- Peanuts
- Tree nuts (walnuts, almonds, cashews, pistachios)
- Fish
- Shellfish (shrimp, crab, lobster)
- Soy
- Wheat
- Sesame

Scan me to learn more
about managing allergic
reactions at home



This document was developed to help better guide parents in making a decision on how to help their child, not as a substitute for the medical care and advice of a medical professional.

Head Injuries

It's inevitable that your child will bump their head, and most of the time, it's not something you need to worry about. However, in some cases, there may be warning signs that you need to take action. Always remember to stay calm. This is the best thing you can do for your child and yourself.

To make better decisions on what to do, ask yourself:

- How are they acting?
- When you look at them, do their eyes interact with you like normal? Do they know what happened?
- If you didn't know they hit their head, would you be worried?
- Are they getting better or worse as time goes on?

To further assist you with making a decision on what to do, here are some quick guidelines:

Seek medical help when:	Stay at-home when:
<ul style="list-style-type: none"> • Loss of consciousness • Seizures • Vomiting more than 2 times • Bleeding on face or head • Irregular breathing, neck pain, or numbness in extremities • Constant headache that gets worse • Change in behavior - irritable, confused, slurred speech • Soft or squishy spot where they bumped their head 	<ul style="list-style-type: none"> • Your child is acting normal - playful and responding appropriately to you • Child has normal speech and they're awake and alert • No vomiting • Mild to no headache • Hard spot where they hit their head • Progressively getting better

Visit [Inspire Health Pediatrics](#) for more information or to schedule an appointment.

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Seizures

Seizures can be scary for both the child experiencing it and their parents, but not all are cause for concern. Our goal is to help you understand what they are and when you need to get help.

Understanding seizures

Febrile seizures: Most common in children ages 6 months to 5 years, febrile seizures are triggered by a rapid rise in body temperature, often due to an infection. These seizures are usually harmless, lasting only a few minutes.

Other types of seizures (generalized or focal): Affect one or both sides of the brain. They involve a sudden, uncontrolled electrical disturbance in the brain that can cause changes in behavior, movements, feelings, and levels of consciousness. Seizures vary widely in severity and type.

When to get immediate help:

- The seizure lasts longer than five minutes.
- Another seizure follows immediately.
- Your child has difficulty breathing or does not regain consciousness after the seizure.
- The seizure occurs in water.
- Your child is injured during the seizure.
- This is your child's first seizure.

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Seizures Continued

How to handle seizures

During the seizure	After the seizure
<ul style="list-style-type: none"> • Stay calm. It can help your child feel safer. • Move objects away from your child to prevent injury. Place something soft under their head. • Do not hold your child down or try to stop their movements. • Contrary to popular belief, do not place any objects in your child’s mouth. This can cause injury or obstruct their airway. • Note the duration of the seizure. If it lasts longer than five minutes, seek emergency medical help. • Ensure your child is breathing. If they are not breathing after the seizure stops, begin CPR and call emergency services immediately. 	<ul style="list-style-type: none"> • Look for any injuries that may have occurred during the seizure. • Place your child in the recovery position (lying on their side with their head slightly tilted back) to keep their airway clear. • Once your child regains consciousness, comfort and reassure them. They may be confused, scared, or tired. • Remain with your child until they are fully alert and responsive.

Visit [Inspire Health Pediatrics](#) for more information or to schedule an appointment.

**Scan me to learn
more about
managing seizures
at home**



This document was developed to help better guide parents in making a decision on how to help their child, not as a substitute for the medical care and advice of a medical professional.

First Aid: Bites and Stings

Most insect bites and stings are mild and can be treated at home. They may cause itching, swelling, or stinging that go away in a couple days. Stings from bees, yellow jackets, wasps, hornets, and fire ants may cause a severe allergic reaction (anaphylaxis).

Anaphylaxis is a medical emergency. Use an epinephrine auto injector if available and call 911 immediately.

To treat a mild reaction to an insect bite or sting:

- Move to a safe area to avoid more bites or stings.
- Remove any stingers.
- Gently wash the area with soap and water.
- Apply to the affected skin a cloth dampened with cold water or filled with ice. Keep it on for 10 to 20 minutes. This helps reduce pain and swelling.
- If the injury is on an arm or leg, raise it.
- Apply to the affected skin calamine lotion, baking soda paste, or 0.5% or 1% hydrocortisone cream. Do this several times a day until your symptoms go away.
- Take an anti-itch medicine by mouth to reduce itching. Options include nonprescription cetirizine, fexofenadine (Allegra Allergy, Children's Allegra Allergy), loratadine (Claritin). These types of medicines are also called antihistamines.
- Take a nonprescription pain reliever as needed.

Scan me to learn more about managing
bites & stings at home



First Aid: Bites and Stings

Most insect bites and stings are mild and can be treated at home. They may cause itching, swelling, or stinging that go away in a couple days. Stings from bees, yellow jackets, wasps, hornets, and fire ants may cause a severe allergic reaction (anaphylaxis).

Anaphylaxis is a medical emergency. Use an epinephrine auto injector if available and call 911 immediately.

Seek medical help when (even if its just 2 of the following:	At-Home Treatment
<ul style="list-style-type: none"> • Trouble breathing • Swelling of the lips, face, eyelids or throat • Dizziness, fainting or unconsciousness • A weak and rapid pulse • Hives • Nausea, vomiting or diarrhea 	<ul style="list-style-type: none"> • Remove any stingers (see how below) • Carefully wash the area with soap and water • Ice the affected area for 10-20 minutes to help reduce swelling • Apply calamine lotion, baking soda paste, or 0.5% or 1% hydrocortisone cream to the affected area multiple times a day until symptoms go away • Take an antihistamine (like Children’s Benadryl or Children’s Zyrtec) to help with any mild reaction like itching • Use ibuprofen or acetaminophen as needed for any pain

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First Aid: Cuts and Scrapes

Cuts and scrapes are a common part of childhood. Knowing how to properly care for these minor injuries can prevent infections and promote faster healing. This guide provides simple instructions for parents on how to handle cuts and scrapes effectively. You got this!

1. **Stay calm and assess the situation:** Stay calm to help keep your child calm. A soothing voice can go a long way. Determine how bad the cut or scrape is. If it's a deep cut, involves heavy bleeding, or is near the eyes, hands, or joints, seek medical attention immediately.
2. **Clean your hands:** Before touching the wound, wash your hands with soap and water to prevent introducing bacteria into the injury.
3. **Stop the bleeding:** Use a clean cloth or sterile gauze to apply gentle pressure to the wound. Elevate the injured area if possible. Hold the pressure for a few minutes until the bleeding stops. If bleeding persists after 10 minutes, seek medical help.
4. **Clean the wound:** Hold the wound under cool running water to rinse away dirt and debris. This can be done for several minutes. Gently clean around the wound with mild soap but avoid getting soap directly in the cut as it can irritate the tissue. Do not use hydrogen peroxide or iodine, as these can damage healthy tissue and delay healing.
5. **Apply an antibiotic ointment:** After cleaning, apply a thin layer of antibiotic ointment (like Neosporin) to help prevent infection.
6. **Cover the wound:** Cover the cut or scrape with a sterile adhesive bandage or gauze pad. Change the bandage daily or whenever it becomes wet or dirty. Some children may be allergic to adhesive bandages. If a rash develops, switch to a non-adhesive dressing.
7. **Monitor for signs of infection:** Look for signs of infection such as redness, swelling, warmth, pus, or increased pain. If any signs of infection appear, contact your healthcare provider.
8. **Promote healing:** Ensure the wound remains clean and dry. Avoid soaking it in water, such as in bathtubs or swimming pools. Encourage a healthy diet rich in vitamins and minerals to support the body's healing process.
9. **Pain management:** If your child is in pain, you can give them acetaminophen (Tylenol) or ibuprofen (Advil), following the dosage instructions on the packaging.

After the wound forms a scab, a bandage isn't needed. You can try aloe, calendula, marshmallow, or tea tree oil

First Aid: Cuts and Scrapes Continued

When to seek medical help

- **Location:** If the cut is near the eyes, hands, or joints.
- **Deep cuts:** If the cut is deep or long, has jagged edges, or is gaping, stitches may be required.
- **Heavy bleeding:** If bleeding cannot be controlled after 10 minutes of pressure.
- **Signs of infection:** Redness, swelling, warmth, pus, or fever.
- **Embedded objects:** If there is something embedded in the wound.
- **Animal or human bites:** These wounds carry a high risk of infection and need medical attention.

Proper care of cuts and scrapes can prevent complications and ensure quick healing. By following these steps, parents can effectively manage minor injuries and know when to seek professional help. Always consult a healthcare provider if you have any concerns about your child's injury.

Remember, staying calm and informed is key to handling minor injuries with confidence and care.

Visit [Inspire Health Pediatrics](#) for more information or to schedule an appointment.

Scan me to learn more about managing
cuts & scrapes at home



First Aid: Burns

Most burns aren't cause for concern, but our guide will help you determine what to do in any burn related situation and when it's time to get help.

Types of burns and what to do

First or second degree burns

Generally, these types of burns cause redness, blistering, and will have some pain associated.

To treat this type of burn:

- Remove clothing from the burned areas, but not any clothing stuck to the skin.
- Place under room temperature (cool) water until the pain eases for about 5 minutes. You can also soak a clean towel in cool water and put it on the burn for no more than 30 minutes.
- Carefully apply a gauze bandage or a clean, soft cloth or towel.
- Use ibuprofen or acetaminophen for pain if your child is awake and alert.
- **Never** put any butter, grease, powder, or other home remedies on the burn. These can make it worse.
- **Never** break any blisters that have formed.

Scan me to learn more about managing burns at home



First Aid: Burns Continued

Most burns aren't cause for concern, but our guide will help you determine what to do in any burn related situation and when it's time to get help.

Third degree burns

These are medical emergencies. These burns cause dry black or white patches. Go to the emergency room or call 911.

Call 911 or go to the nearest emergency room when:	Burn prevention at-home
<ul style="list-style-type: none"> • Covers the face, feet, hands, genitals, joint, or encircle an arm or a leg • Covers an area 3 inches in diameter or larger • Is due to a fire, electrical wire, or chemical • Has large blisters • Is white, black, brown, leathery, or charred • Difficulty breathing 	<ul style="list-style-type: none"> • Keep all electrical outlets covered • Use safe covering for any fireplaces • Keep candles, hair styling products, and hot coffee well out of reach of children and on a safe, sturdy surface • Boil hot water on the back burners of the stove • Add child safety to stoves and do not let children play in the kitchen while someone is cooking • Test bathwater temperature before putting your child into the tub

Visit [Inspire Health Pediatrics](#) for more information or to schedule an appointment.

Scan me to learn more about managing burns at home





How to Save a Life: CPR and Rescue Breathing for Children under 1 year



Inspire Health Pediatrics



WHAT IS CPR?

Cardiopulmonary resuscitation (CPR) is a lifesaving technique that is crucial in emergencies where a child's breathing or heartbeat has stopped. Being prepared to perform CPR can make all the difference in such critical situations. This guide provides step-by-step instructions for performing CPR on babies (under 1 year old) and children (1 year old to puberty).

Understanding CPR

CPR combines chest compressions and rescue breaths to manually support the heart and lungs, helping to circulate blood and oxygen in the body. Immediate CPR can significantly increase the chances of survival and recovery.

Preparing for CPR

- Stay calm and assess the situation
- Check the surroundings to ensure it is safe to approach the child.
- Gently tap the child and shout, “Are you okay?” to check if they respond.
- If there is no response, shout for help. If you are alone, perform CPR for two minutes before calling emergency services.

No Breathing or Signs of Life: Begin Infant CPR

1. **Check for breathing:** Place your ear near the baby's mouth and nose. Look for chest movement, listen for breath sounds, and feel for breath on your cheek. If the baby is not breathing or only gasping, begin CPR.
2. **Open the airway:** Gently tilt the baby's head back and lift the chin to open the airway.
3. **Give rescue breaths:** Cover the baby's mouth and nose with your mouth, forming a seal. Give two gentle breaths, each lasting about one second, watching for chest rise.
4. **Perform chest compressions:** Use two fingers to press on the center of the baby's chest, just below the nipple line. Press down about 1.5 inches (4 cm). Give 30 compressions at a rate of 100-120 compressions per minute (think of the song “Stayin’ Alive”). Alternate between 30 chest compressions and two rescue breaths.

Continue this pattern until help arrives or the infant starts breathing.





How to Save a Life: CPR and Rescue Breathing for Children older than 1 year



Inspire Health Pediatrics



WHAT IS CPR?

Cardiopulmonary resuscitation (CPR) is a lifesaving technique that is crucial in emergencies where a child's breathing or heartbeat has stopped. Being prepared to perform CPR can make all the difference in such critical situations. This guide provides step-by-step instructions for performing CPR on babies (under 1 year old) and children (1 year old to puberty).

Understanding CPR

CPR combines chest compressions and rescue breaths to manually support the heart and lungs, helping to circulate blood and oxygen in the body. Immediate CPR can significantly increase the chances of survival and recovery.

Preparing for CPR

- Stay calm and assess the situation
- Check the surroundings to ensure it is safe to approach the child.
- Gently tap the child and shout, “Are you okay?” to check if they respond.
- If there is no response, shout for help. If you are alone, perform CPR for two minutes before calling emergency services.

No Breathing or Signs of Life: Begin Child CPR

1. **Check for breathing:** Place your ear near the child's mouth and nose. Look for chest movement, listen for breath sounds, and feel for breath on your cheek. If the child is not breathing or only gasping, begin CPR.
2. **Open the airway:** Tilt the child's head back and lift the chin to open the airway.
3. **Give rescue breaths:** Pinch the child's nose shut, cover their mouth with yours, and form a seal. Give two breaths, each lasting about one second, watching for chest rise.
4. **Perform chest compressions:** Place the heel of one hand on the center of the child's chest. If necessary, use both hands for larger children. Press down about 2 inches (5 cm). Deliver 30 compressions at a rate of 100-120 compressions per minute (think of the song “Stayin’ Alive”). Alternate between 30 chest compressions and two rescue breaths until help arrives or the child starts breathing.

Continue this pattern until help arrives or the child starts breathing.





How to Save a Life: Using an AED Machine



Inspire Health Pediatrics



WHAT IS AED?

Automated External Defibrillator (AED) is a medical device used in emergency situations that can analyze the heart's rhythm and, if necessary, deliver an electrical shock, or defibrillation, to help the heart re-establish an effective rhythm.

The device is designed to be user-friendly, with clear instructions on how to use it in case of an emergency. It's important for everyone to be aware of what an AED is and how to use it, as it could make a difference in saving someone's life.

If an AED is available, use it as soon as possible. Follow these steps:

1. Turn on the AED and follow the device's voice prompts.
2. Place the AED pads on the child's bare chest as indicated.
3. Allow the AED to analyze the heart rhythm.
4. If the AED advises a shock, ensure no one is touching the child and press the shock button.
5. Continue CPR until emergency services take over.

Knowing how to perform CPR on babies and children is a crucial skill that can save lives. By following these steps and staying calm during an emergency, you can provide vital assistance until professional help arrives.

**Scan me to watch our
Infant CPR Video**



**Scan me to watch our
Child CPR Video**



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How to Save a Life: Choking and Heimlich for Infants & Children



Inspire Health Pediatrics

Choking is a scary experience that can happen to children at any age. Knowing how to prevent and respond to choking can save a life. This guide provides parents with essential information on preventing choking hazards and steps to take if choking occurs.

Mild Choking: The child can still cough, speak, or make sounds. Encourage them to keep coughing to dislodge the object.

Severe Choking: The child cannot cough, speak, cry, or breathe. They may make high-pitched noises or no sound at all, and their face might turn blue. Immediate action is needed.

COMMON CHOKING HAZARDS

Children, especially those under the age of five, are at higher risk of choking due to their smaller airways and tendency to put objects in their mouths.

Common choking hazards include:

- Foods: Hot dogs, nuts, seeds, chunks of meat or cheese, whole grapes, hard or sticky candies, popcorn, chunks of peanut butter, raw vegetables, and fruits like apples.
- Small Objects: Coins, buttons, small toy parts, batteries, marbles, beads, and pen caps.
- Household Items: Balloons, plastic bags, and rubber bands.

PREVENTING CHOKING

FOOD SAFETY

- Cut food into small, manageable pieces, especially for young children. Slice hot dogs and grapes lengthwise into quarters.
- Cook vegetables until they are soft enough for children to chew easily.
- Always supervise young children while they are eating and ensure they are sitting down. Encourage them to eat slowly and chew thoroughly.
- Avoid giving children under four years old foods that pose a high choking risk.

TOY AND OBJECT SAFETY

- Choose toys appropriate for your child's age and developmental level. Follow age recommendations on toy packaging.
- Regularly inspect toys for small parts that could pose a choking hazard. Discard broken toys immediately.
- Store small items, such as batteries, coins, and jewelry, out of reach of young children.
- Teach older children the importance of keeping small objects away from younger siblings.



How to Save a Life: Choking and Heimlich for Infants & Children



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A CHILD MAY BE CHOKING AND NEED HELP RIGHT AWAY IF THEY:

- Can't breathe, talk, cry, or make noise
- Are gasping or wheezing
- Turn blue
- Grab at their throat or wave their arms
- Appear panicked
- Become limp or unconscious

In these cases, if you've been trained, immediately start abdominal thrusts (also known as the Heimlich maneuver), the standard rescue procedure for choking.

WHAT SHOULD I DO IF A CHILD MIGHT BE CHOKING?

Call 911 for any serious choking situation.

Here are several possible situations you might face and tips on how to handle them:

If a child is choking and coughing but can breathe and talk:

- This means the airway is not completely blocked. It's best to do nothing. Watch the child carefully and make sure they recover completely. The child will likely be fine after a good coughing spell.
- Don't reach into the child's mouth to grab the object or even pat their back. Either of these steps could push the object farther down the airway and make the situation worse.
- Stay with the child and remain calm until the episode passes.

If a child is conscious but can't breathe, talk, or make noise, or is turning blue:

- The situation calls for abdominal thrusts.
- Call 911 or tell someone nearby to call 911 right away.
- Begin the thrusts if you've been trained to do so.
- If you haven't been trained, and no one else is available who has been, wait until help arrives.

If the child was choking and is now unconscious and no longer breathing:

- Shout for help and call 911, or tell someone nearby to call 911 right away.
- Start CPR right away, if you've been trained in it.
- If you have not been trained, and no one else is available who has been, wait until help arrives.

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Infant Heimlich Video





How to Save a Life: Choking and Heimlich for Children under 1 year



Inspire Health Pediatrics

A CHILD MAY BE CHOKING AND NEED HELP RIGHT AWAY IF THEY:

- Can't breathe, talk, cry, or make noise
- Are gasping or wheezing
- Turn blue
- Grab at their throat or wave their arms
- Appear panicked
- Become limp or unconscious

In these cases, if you've been trained, immediately start abdominal thrusts (also known as the Heimlich maneuver), the standard rescue procedure for choking.

Step One: Call 911. Lay the infant face down, along your forearm. Use your thigh or lap for support. Hold the infant's chest in your hand and the jaw with your fingers, ensure the infant's head is pointed downward, lower than the body.

Step Two: Using the palm of your free hand, give up to 5 quick, forceful blows between the infant's shoulder blades.

If the object does not come out of the airway after 5 blows:

Step Three: Turn the infant face-up, using your thigh or lap for support. Supporting the head, place 2 fingers on the middle of the breastbone just below the nipples.

Step Four: Give up to 5 quick thrusts down, compressing the chest one third to one half the depth of the chest.

Step Five: Continue 5 back blows followed by 5 chest thrusts until the object is dislodged or the infant loses alertness (becomes unconscious).

If the child loses consciousness, begin CPR until help arrives.

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Infant Choking Video





How to Save a Life: Choking and Heimlich for Children



Inspire Health Pediatrics

THE HEIMLICH MANEUVER

This is a life saving skill everyone should know. It works by quickly forcing bursts of air (using abdominal thrusts) from the lungs to the airway to dislodge the object.

Abdominal thrusts are done for children over the age of 1 years old

Before starting the Heimlich, please read the following:

- **DO NOT** perform choking first aid if the infant or child is coughing forcefully, has a strong cry, or is breathing enough. However, be ready to act fast if the symptoms get worse.
- **DO NOT** try to grasp and pull out the object if the infant or child is alert (conscious).
- **DO NOT** do back blows and chest thrusts if the infant stops breathing for other reasons, such as asthma, infection, swelling, or a blow to the head. **DO** give the infant CPR in these cases.

Step One: Call 911. Kneel or stand behind the child, making sure their back is supported by your torso.

Step Two: Reach your arms around them and place the flat part of your fist between the lower part of their ribs and their belly button.

Step Three: Cup your other hand around your fist and pull the child close to you.

Step Four: Give quick thrusts (in and upright motion) and continue until the object is dislodged or the child loses consciousness.

If the child loses consciousness, begin CPR until help arrives.

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Child Heimlich Video

