



Weill Cornell Medical College

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Patient Education:

Pneumonia, Child

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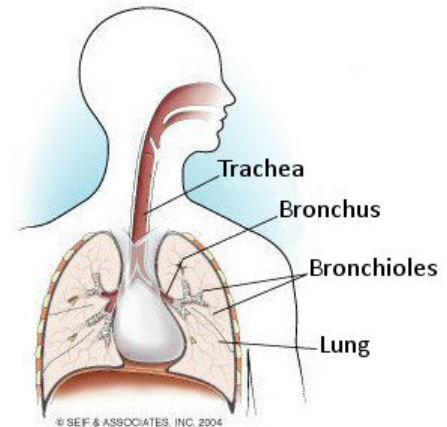
Pneumonia, Child

Pneumonia is an infection of the lungs.

CAUSES

Pneumonia may be caused by bacteria or a virus. Usually, these infections are caused by breathing infectious particles into the lungs (*respiratory tract*).

Most cases of pneumonia are reported during the fall, winter, and early spring when children are mostly indoors and in close contact with others. The risk of catching pneumonia is not affected by how warmly a child is dressed or the temperature.



SIGNS AND SYMPTOMS

Symptoms depend on the age of the child and the cause of the pneumonia. Common symptoms are:

- Cough.
- Fever.
- Chills.
- Chest pain.
- Abdominal pain.
- Feeling worn out when doing usual activities (*fatigue*).
- Loss of hunger (*appetite*).
- Lack of interest in play.
- Fast, shallow breathing.
- Shortness of breath.

A cough may continue for several weeks even after the child feels better. This is the normal way the body clears out the infection.

DIAGNOSIS

Pneumonia may be diagnosed by a physical exam. A chest X-ray examination may be done. Other tests of your child's blood, urine, or sputum may be done to find the specific cause of the pneumonia.

TREATMENT

Pneumonia that is caused by bacteria is treated with antibiotic medicine. Antibiotics do not treat viral infections. Most cases of pneumonia can be treated at home with medicine and rest. More severe cases need hospital treatment.

HOME CARE INSTRUCTIONS

- Cough suppressants may be used as directed by your child's health care provider. Keep in mind that coughing helps clear mucus and infection out of the respiratory tract. It is best to only use

cough suppressants to allow your child to rest. Cough suppressants are not recommended for children younger than 4 years old. For children between the age of 4 years and 6 years old, use cough suppressants only as directed by your child's health care provider.

- If your child's health care provider prescribed an antibiotic, be sure to give the medicine as directed until it is all gone.
- Give medicines only as directed by your child's health care provider. **Do not** give your child aspirin because of the association with Reye's syndrome.
- Put a cold steam vaporizer or humidifier in your child's room. This may help keep the mucus loose. Change the water daily.
- Offer your child fluids to loosen the mucus.
- Be sure your child gets rest. Coughing is often worse at night. Sleeping in a semi-upright position in a recliner or using a couple pillows under your child's head will help with this.
- Wash your hands after coming into contact with your child.

SEEK MEDICAL CARE IF:

- Your child's symptoms do not improve in 3–4 days or as directed.
- New symptoms develop.
- Your child's symptoms appear to be getting worse.
- Your child has a fever.

SEEK IMMEDIATE MEDICAL CARE IF:

- Your child is breathing fast.
- Your child is too out of breath to talk normally.
- The spaces between the ribs or under the ribs pull in when your child breathes in.
- Your child is short of breath and there is grunting when breathing out.
- You notice widening of your child's nostrils with each breath (*nasal flaring*).
- Your child has pain with breathing.
- Your child makes a high-pitched whistling noise when breathing out or in (*wheezing or stridor*).
- Your child who is younger than 3 months has a fever of 100°F (38°C) or higher.
- Your child coughs up blood.
- Your child throws up (*vomits*) often.
- Your child gets worse.
- You notice any bluish discoloration of the lips, face, or nails.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your child's condition.
- Will get help right away if your child is not doing well or gets worse.

This information is not intended to replace advice given to you by your health care provider. Make sure you discuss any questions you have with your health care provider.

Document Released: 06/23/2004 Document Revised: 05/03/2016 Document Reviewed: 06/09/2014

