

## The Initial Evaluation of Routine Childhood Illnesses

## Outline

- Review common childhood illnesses
- Discuss key questions to ask and findings to evaluate for each illness
- Know which cases can return to class and which need further care

## Common Childhood Illnesses

- Allergies
- Asthma
- Fever
- Gastroenteritis
- Lice
- Pink Eye
- Rashes
- Sore Throat

## Allergic Reactions

- 14 y/o young man in the cafeteria begins vomiting violently and is noted to have a red, swollen face, lips and tongue and his voice sounds raspy. He rapidly develops hives all over while walking to your clinic.



What is this?

**Anaphylaxis!**

## Allergic Reactions

What to ask?

- What just happened?
- Difficulty breathing/swallowing, itching?
- History of allergies?
  - What?
  - How bad?
  - EpiPen?
- New foods, meds, stings or "products?"

## Allergic Reactions

What to examine?

- ABCs
  - **Airway**
  - Breathing (wheeze, stridor)
  - Circulation (anaphylactic "SHOCK")
- Skin
  - Hives
  - Angioedema

## Hives (Urticaria)



## Angioedema



## Allergic Reactions

What to do?

- Anaphylaxis
  - Epipen, if available
  - EMS if not
- Hives
  - Antihistamine
  - Stop exposure, if possible



## Asthma

- A nine year old girl is rushed back to you complaining, "I can't breath!" She is a known asthmatic who is admitted to the hospital almost every year. You have given her treatments many times in the past.



## Asthma

What to ask?

- "Count to 20" or "Say ABCs"
- What was she doing right before?
- How long has she been sick?
- Medications (missed)?
- Other complaint/concerns
  - Chest pain
  - Anxiety
  - Drug use
  - Exposures

## Asthma

### What to examine?

- Look
  - General condition
  - Quality of breaths
  - Respiratory rate
- Listen
  - Air movement
  - Wheezing
  - Stridor
  - Crackles

## Asthma

### What to do?

- Depends on what you have
- Medications
  - Albuterol treatments
    - Nebulizer
    - Metered dose inhaler WITH spacer
  - Oxygen
  - Inhaled steroids of minimal benefit during acute attack
  - Preventative meds may be harmful

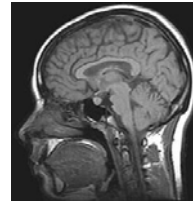
### Pediatric Respiratory Distress

- Nasal flaring
- Sternal retractions
- Tripoding
- Use of accessory muscles
- Tachypnea
- Cyanotic



## Fever

- A 5 y/o girl with a history of epilepsy is found shaking on the floor of the outside art room closet with a fever of 105.4.



## Fever

### What to ask?

- Recent illness?
- Heat exposure?
- Medications?
- Associated symptoms?
  - Stiff neck
  - Confusion
  - Rash



## Fever

### What to examine?

- Core temperature
- Vital signs
- HEENT
- Neck
- Chest
- Abdomen
- Skin



## Fever

### What to do?

- Don't panic = "Fever Phobia"
- Do:
  - Cool them
    - Remove excess clothing
    - Luke warm "sponge bath"
  - Antipyretics, if allowed
- Call home



## Fever

### Where to send them?

- Doctor
  - I'll appearing
  - Seizure
  - Overheated
- Home
  - Most
  - Parents can discuss with PCP



## Gastroenteritis

- Little Johnny Stinkith, an 11 y/o boy, "pooped his pants" during recess and has vomited twice since. He is escorted to your office moaning and groaning saying "my tummy hurts."



## Gastroenteritis

### What to ask?

- When started?
- Describe the pain?
- How much V/D? Blood/Bile?
- Food poisoning/ill exposure?
- Dehydration?
- PMHx/Associated symptoms?

## Gastroenteritis

### What to examine?

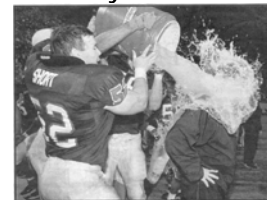
- General
- Abdomen
  - RLQ, CVA, SP or diffuse pain
  - Guarding/rigid
  - Bowel sounds
- Dehydration



## Gastroenteritis

### What to do?

- Hydrate- Slow and steady
  - Gatoraid
  - Sprite
  - Water
- Call home



## Gastroenteritis

Where to send them?

- Doctor
  - Localized pain
  - Moderate to severe dehydration
  - Underlying conditions
- Home
  - Most
  - Teach how to rehydrate

## Lice

- The Principal's 8 y/o daughter, Princess Purrfect, complains of her head "itching like crazy!" Your head starts to itch a bit too, come to think of it.



## Lice

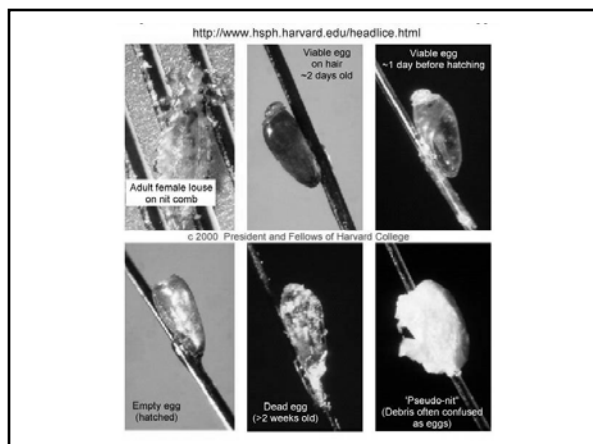
What to ask?

- Where does it itch?
- How long?
- Exposures to lice?
- Treatment started?
- Other medical conditions?

## Lice

What to examine?

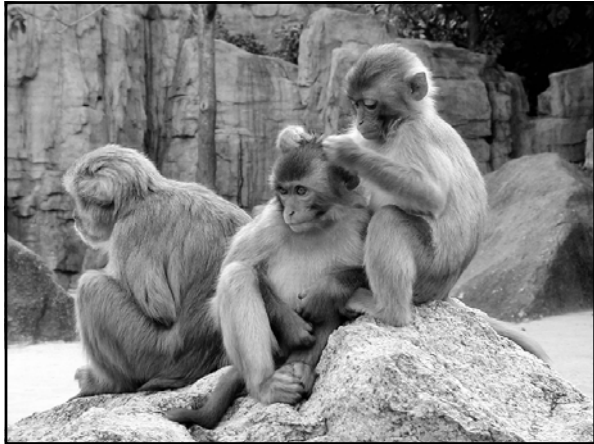
- Scalp
  - Live lice
- Hair shafts
  - Eggs ("Nits")
  - Just above the scalp
- Use magnifying glass, gloves



## Lice

What to do?

- Scratch your head, it's natural.
- Live lice
  - Need treatment
    - Rid (over the counter)
    - Malathion
    - "Home remedies"
  - "No nit policies" should be abolished
- Nits only do not need treatment



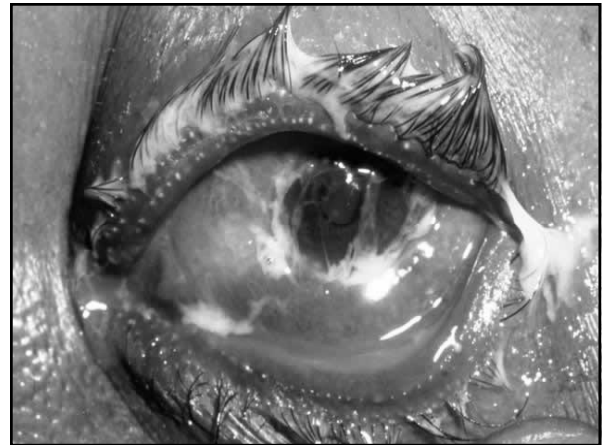
## Lice

Where to send them?

- Live lice
  - Home for treatment
  - Educate
    - How contacted: Head to head, shared hats/brushes
    - How to treat
    - Resistance exists, if failure see PCP
- No live lice → back to class
- Unsure → PCP

## Pink Eye

- Your two-time All-State Heavyweight Wrestling Champion, Penn Yufast, is seen wearing an eye-patch at practice and tries to hide when you approach him. The patch is stained with yellow-green goo. The big rivalry match is tomorrow, and his mom is your best friend. Oh yeah, and his dad is president of the school board. You pin him down, remove his patch and...



## Pink Eye

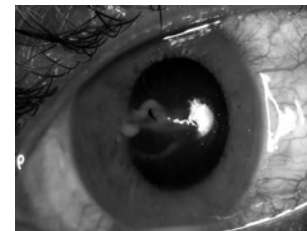
What to ask?

- How long?
- Injury?
- Itching vs. burning/pain?
- Visual changes?
- Associated symptoms?
  - Fever, sore throat, cough, both eyes = viral
  - One sided, pus, exposure history = bacterial

## Pink Eye

What to examine?

- Eye
  - Pus
  - Redness
  - Visual status
  - Foreign bodies
- Lymph nodes
- Nose and throat



## Pink Eye

### What to do?

- Cover if trauma
- Irrigate if chemical exposure
- Wash your hands, twice...
- Call home



## Pink Eye

### Where to send them?

- Back to class
  - Minor trauma/foreign body removed
  - No visual changes
- Home
  - Most
  - Viral pink eye, use artificial tears
- Doctor
  - Pus, significant pain, retained foreign body
  - Visual changes

## Rashes

- A 12 y/o recent immigrant from Maldivia, Eechy Scratchovich, is brought to you because an itchy rash has popped up all over his body. After he greets you in traditional fashion (big hug with kiss to each cheek), he lets you know, "no worry, this very common in my country..."

## Scabies!



## Rashes

### What to ask?

- Vaccine status?
- Ill exposures?
- Other's itching?
- Associated symptoms/history
  - Scabies = usually none
  - Viral = fever, cough, congestion, sore throat
  - Contact dermatitis = exposed areas, linear

## Rashes

### What to examine?

- Skin
  - Scabies = burrows around hands/feet
  - Viral = diffuse, symmetric
  - Exposure/heat = localized, patterns
- Eyes
  - Red with viruses
- Mouth (viral, strep)
- Lungs (viral pneumonia)

## Prickly Heat

