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Taking care of a child with Covid-19

This guidance is for people caring for children who have symptoms consistent with COVID-19. Your child may or may not have been tested for the virus and if they were tested, you may or may not yet have the results. Even so, given the number of people who are infected, a child with symptoms like those of COVID-19 should be cared for just like a confirmed case.

That means your household has to follow basic guidelines to avoid spread of COVID-19:

- The infected child must be “isolated” in the house for at least 10 days from when their symptoms first appeared AND at least 3 days (72 hours) after the fever has gone without the use of medications AND respiratory symptoms (such as cough and shortness of breath) have improved.
- If the child has no symptoms but has had a positive test for COVID-19, the minimum 10 day isolation period starts from the day of the test.

If symptoms appear during the isolation period of a child who started out asymptomatic, isolation must last for at least the 10 minimum required days plus 3 days following the point at which symptoms have abated and fever is gone without use of fever-reducing medication.

- Others in the household who have had close contact with the child while the child was infectious must self-quarantine at home for 14 days from the last close contact. The infectious period lasts from 2 days (48 hours) before symptoms appeared (or before a positive test if the child is asymptomatic) until the end of the child’s isolation period, as defined above.

If a household member (e.g. caregiver) continues to have unprotected contact with the child throughout the child's isolation period, the last day of quarantine for that person will be 14 days after the child is clear to stop their isolation.

- See these guidance documents for details about [isolation](#) and [quarantine](#).

1. STEPS TO PROTECT YOURSELF AND OTHERS IN THE HOUSEHOLD FROM INFECTION.

The risk to children from COVID-19 appears to be much less than the risk to adults. Adults seem more likely to catch the virus and more likely to get very ill when they have it. This means that an important part of taking care of a child with COVID-19 is protecting others in your household from getting sick. Be especially careful to avoid spread if your household includes anyone over age 65, anyone with a chronic condition or disability that affects heart, lungs, or immune function or anyone who is pregnant.

Key steps to protect your family are:

- Have the child who is sick stay in their own room. If the child doesn't have their own room, choose a part of the house where they can be separated from other people.
 - You may have to use a screen or hang a sheet but find a way to put a barrier between the child and other household members.
- Have the child use a separate bathroom. If that is not possible, make sure the bathroom is wiped down after each use by the child.
- If the child is over two and does not have any chronic breathing problems, help them use a surgical mask any time other household members (including you) are around.
 - Children under 2 should never be masked.
 - Children 2-8 may wear a mask with adult assistance as long as the child does not have a condition that impairs breathing.
- Teach the child to use a tissue to cover a sneeze or cough and then throw it in the trash. Teach them to sneeze or cough into an elbow in case they don't have a tissue when they need it.
- Try to limit the child's direct care to a single care giver. Other household members can help in other ways, but it is best if only one person is regularly exposed to the child.
 - Ideally, the caregiver should have a protective mask and wear gloves while touching the child or handling their toys, bedding, dishes, and so on.
 - Even if the caregiver has used gloves, frequent handwashing is critical for a caregiver who is in and out of the child's room. The caregiver should avoid

- touching their own face, eyes, nose, or mouth unless their hands were just washed.
- Consider using disposable plates and utensils for the child's meals. If the child does use the same plates and utensils as the rest of the household, these items need to be washed in a dishwasher or with dish soap and hot water after each use (although they don't have to be washed separately).

These steps are absolutely critical regardless of how sick your child is. Remember that even a child with no symptoms who has tested positive for the virus can spread it to others and that your child needs you to be healthy to provide the care they need. You help your child when you protect yourself from the virus.

2. HOW TO PROVIDE CARE FOR A CHILD WITH MILD OR MODERATE SYMPTOMS

- Symptoms of COVID-19 may include the following: fever, chills, cough, shortness of breath or difficulty breathing, fatigue, muscle or body aches, headache, sore throat, nausea or vomiting, diarrhea, congestion or runny nose, or new loss of taste or smell. This list of symptoms is not all inclusive.
- Please consult your medical provider about the need for testing and isolation for any other symptoms that are severe or concerning to you.
- Pay attention to a fever even if you don't see other symptoms.
 - **If your child is under 3 months** and has a fever, call your doctor right away. If it's nighttime, call the emergency number for your provider or clinic. Any fever can be serious in a newborn.
 - **If your child is between 3 months and 3 years** and has a fever over 102.2°F, call your child's health provider.
 - **If your child is over 3** and has a fever over 102.2°F, use your judgment. If the child seems sick in other ways – they look sick and they are less active than usual – you may want to call their provider.
 - If you don't have a thermometer appropriate for use with a child, you can judge temperature just by feeling a young child's forehead. That won't give you a number, but you can often tell if the child is feverish.
 - Contact your child's medical provider when you observe (or when your child reports) any of the symptoms of COVID-19.
 - Ideally, the provider knows your child and can help you judge whether these symptoms sound like COVID-19.
 - Keep the child comfortable. Make sure the room they are in is not too hot or too cold.
 - Do make sure the child is not overdressed and in overly warm bedding. A young child can get overheated easily.
 - Make sure the child gets plenty of rest.

- The child does not have to be in bed all the time, but they should not be overly active. Do try to keep them away from other family members even if they are not in bed.
- If the child is experiencing pain or feeling feverish, you can use an age-appropriate dose of acetaminophen (Tylenol or a generic brand) to help with symptoms and fever.
- Do not use other over-the-counter medications unless your provider suggests them. ○ Provide lots of fluids for the child to drink. Staying hydrated is key.
- Don't use sports drinks or other sugary beverages for younger children – the sugar in those drinks can make dehydration worse by causing diarrhea.

■ If the child has had diarrhea, which does sometimes occur with COVID-19, their provider may recommend a special rehydration drink (with electrolytes) made specifically for kids.

- ■ Good choices to keep your child hydrated are water, soup, popsicles and flavored gelatin. Avoid caffeine drinks with children of any age.
- Enlist other friends and neighbors to help you get through the isolation and quarantine period. They cannot visit, but they can drop off food, diapers, toys, books or games for the child and other things you need.
- Your child can't play with other children during this period but do encourage other families to have their children "visit" over the phone or on a tablet or laptop if your child is old enough to miss contact with other children.

3. WHAT TO DO IF YOUR CHILD DEVELOPS MORE SERIOUS SYMPTOMS

Although a very small percentage of children have required hospital care for COVID-19 (compared to 20% of adults who become ill) the illness can take a serious turn in children. It's important to know what this might look like and to have a plan of action should it happen to your child. Your child's provider can help you work out specifics about who to call and where to go; what follows are general guidelines.

- The children at greatest risk of serious illness due to COVID-19 are children with special health care needs, discussed below, and children under age 1. It makes good sense, therefore, to be in touch with your child's provider and have a plan in place if symptoms show up in an infant.
- You will probably be a good judge of serious illness in your child – any big change in the child's appearance or behavior should be a warning.

- Specific symptoms to look out for are high fever, worsening shortness of breath (you may see the child's chest go up and down), confusion or sudden drowsiness. Call your provider right away if any of these symptoms appear.
 - It will probably be possible to continue caring for your child at home, but it's best to review the situation with your provider and make sure hospital care is not needed.
- If your child has to struggle to breathe, stops being able to walk or talk or begins to turn blue, call 911. Tell the dispatcher how old your child is so they can send an ambulance with the right equipment. Also tell them that your child has had symptoms of COVID-19 so the EMTs that come can wear appropriate personal protective equipment.

4. WHAT TO DO IF YOUR CHILD HAS SPECIAL HEALTH CARE NEEDS

Children with significant medical needs

Children with special health care needs may be especially vulnerable to serious illness if they become infected with COVID-19 if their condition involves impaired lung function or reduced immune function. Even if a condition does not affect breathing or immunity, medications and other factors related to care of a child's special health need may make COVID-19 care more complex.

- These factors make prevention particularly important
 - If someone in your household must go outside the home to work each day, it may make sense for that person to stay elsewhere during the COVID-19 outbreak. If that is feasible for your family, it can reduce the chance of that household member bringing COVID-19 into the home.
 - If that is not feasible, the household member should take heightened precautions to avoid contagion.
 - Anyone who comes to the home to care for your child, including private duty nurses, should take heightened precautions, particularly handwashing before providing care to your child and using appropriate infection prevention measures as indicated by type of care provided.
 - If there are people who enter and exit the home, try to isolate the child in a separate area that can be protected from contamination.

- Try to limit your child's care to one primary household caregiver, who should avoid going out of the home at any time if at all possible. That person should be very careful to wash hands every time they enter the child's area.
- Advance preparation is also important. Try to identify an alternative caregiver who will be able and is trained to care for your child should you become ill. Planning will also help you and others care for your child should the child become infected.
- Make sure you have an updated emergency plan for your child, outlining the child's conditions and medical history and detailing medications taken, allergies and other contraindications, durable medical equipment used by the child and all medical providers. Make sure the plan includes contact information for the child's primary care provider and most important specialists.
- If your child does show symptoms of COVID-19, contact the child's primary care provider and key specialists right away.
- While waiting to hear back from your child's physicians, you should presume that your child has COVID-19 and follow guidance outlined in section 1.
- Because your child's health conditions are unique, you should follow the advice of your child's specialists concerning next steps.
- If you are advised to go to the office or hospital, they will tell you how to travel safely to minimize the risk of exposing other people to this virus.

Children with emotional, behavioral or developmental needs

If your child's primary special need is emotional, behavioral or developmental, your major challenges will probably have less to do with medical management and more to do with the behavioral changes required for effective isolation of a child with COVID-19.

- Your first challenge may be finding out that your child is ill. Some children have a hard time recognizing their own physical sensations. Others are unable to describe what they feel or even articulate that they are not well. If this is true of your child, you are probably used to watching for signs of sickness.
- Symptoms of COVID-19 are listed on Page 2 of this document, but also watch for fast breathing, and listlessness or less activity than is usual for your child.
- You may see clues in your child's behavior. For example, refusing a food your child usually likes may indicate a sore throat.

- Your judgment, based on past experience with your child, will be key to figuring out that your child is ill and how it is affecting them.
- Once you have spotted the symptoms of COVID-19 and talked to your child's provider, the next challenge will be organizing your home to protect other family members while you keep your child resting and hydrating.
 - You may have difficulty persuading your child to wear a mask, wash their hands and keep a safe 6-foot distance from other people.
 - ■ Offer a developmentally appropriate explanation of what COVID-19 is and why all these changes are needed. There are a number of social stories available online that may be helpful (see, for example: <https://www.autism.org/wp-content/uploads/2020/04/Feeling-Sick-COVID-19.pdf>).
 - ■ Offer clear, concrete guidance about each of the behavioral changes needed to protect household members. Here too, online resources can help, or you can make up your own social story about handwashing, wearing a mask and so on.
- Follow the medical management guidelines in Section 2, above, but modify as appropriate to accommodate your child's behavioral or developmental needs.
- No-contact thermometers may not be as precise as other thermometers, but if they are less likely to upset your child, they are okay to use. Even a kiss on the forehead or a hand on the back of the neck to judge if your child has a fever is adequate if that is all your child will tolerate.
- Find a way to give medicine that works for your child if they won't tolerate pills or liquids. Mashing medicines in food may work. Some parents find suppositories are easier to manage than medicine taken orally in any form.
- Develop a schedule for daily activities so your child has some sense of structure and predictability as they recover. It may help your child adjust to both preventive measures and elements of their own care if they know these activities fit into a day that will include things they enjoy as well.

For all parents caring for children with COVID-19, part of the message is TAKE CARE OF YOURSELF. This means taking precautions by wearing a mask, using gloves as needed, maintaining social distancing whenever that is feasible as you care for your child. But it also means recruiting other household members to take over household chores, asking friends or neighbors to pick up groceries for you and leave them outside your door, and staying in touch with your own network of friends by phone or Internet.