
When Your Child Has a Cold or Flu

Updated for the 2023-2024 flu season

Colds and influenza (flu) infect the upper respiratory tract. This includes the mouth, nose, nasal passages, and throat. Both illnesses are caused by germs called viruses, and both share some of the same symptoms. But colds and the flu differ in a few key ways. Knowing more about these infections may make it easier to prevent them. And if your child does get sick, you can help keep symptoms from becoming worse.

What is a cold?

- Symptoms include runny nose, cough, sneezing, sore throat, and lower grade fevers. Cold symptoms tend to be milder than flu symptoms.
- Cold symptoms come on slowly.
- Children with a cold may be able to do many of their usual activities.

What is the flu?

- Influenza is a respiratory infection. (It's not the same as the stomach flu.)
- Symptoms include fever, headache, tiredness, cough, sore throat, runny nose, and muscle aches. Children may also have an upset stomach and vomiting.
- Flu symptoms tend to come on quickly.
- Children with the flu may feel too worn out to do their normal activities.

How do colds and the flu spread?

The viruses that cause colds and the flu spread in droplets when someone who is sick coughs or sneezes. Children can breathe in the germs directly. But they can also pick up the virus by touching a surface where droplets have landed. Germs then enter a child's body when they touch their eyes, nose, or mouth.

Why do children get colds and the flu?

Children get colds and the flu more often than adults do. Here are some reasons why:

- **Less resistance.** A child's immune system is not as strong as an adult's when it comes to fighting cold and flu germs.
- **Winter season.** Most respiratory illnesses occur in fall and winter when children are indoors and exposed to more germs.
- **School or daycare.** Colds and the flu spread easily when children are in close contact.
- **Hand-to-mouth contact.** Children are likely to touch their eyes, nose, or mouth without washing their hands. This is the most common way germs spread.

How are colds and the flu diagnosed?

Most often, healthcare providers diagnose a cold or the flu based on the child's symptoms and a physical exam. Children may also have throat or nasal swabs to check for bacteria and viruses. Your child's provider may do other tests, depending on your child's symptoms and overall health. These tests may include:

- **Complete blood count (CBC).** This blood test looks for signs of infection.
- **Chest X-ray.** This is done to make sure your child does not have pneumonia.

How are colds and the flu treated?

Most children recover from colds and the flu on their own. Antibiotics don't work against cold viruses, so they are not prescribed for them. Antiviral medicines can help shorten the symptoms of the flu. This is particularly important if the child is at risk of or is developing complications of the flu. These medicines work best if they are started soon after your child shows symptoms.

For both illnesses, other treatments can help ease your child's symptoms until your child recovers. To help your child feel better:

- Give your child lots of fluids, such as water, electrolyte solutions, apple juice, and warm soup, to prevent fluid loss (dehydration).
- Make sure your child gets plenty of rest.
- Have older children gargle with warm saltwater if they have a sore throat.
- To ease nasal congestion, try saline nasal sprays. You can buy them without a prescription, and they're safe for children. These are not the same as nasal decongestant sprays. Those sprays may make symptoms worse if overused.
- Use children's-strength medicine for symptoms. Discuss all over-the-counter (OTC) products with your child's provider before using them. Note: Don't give OTC cough and cold medicines to a child younger than 6 years old unless the provider tells you to do so.
- Never give aspirin to a child or teen who has a cold or the flu. It could cause a rare but serious condition called Reye syndrome.
- Never give ibuprofen to an infant age 6 months or younger.
- Keep your child home until they have been fever-free for 24 hours.

Preventing colds and the flu



To help children stay healthy:

- Get a flu vaccine for your child. A flu vaccine is recommended for all children ages 6 months and older with few exceptions. The vaccine is often given as a shot. A nasal spray made of live but weakened flu virus may also be given. This is for healthy children 2 years and older who don't get the flu shot. Because of COVID-19 and RSV, experts strongly advise getting a flu vaccine to protect yourself, your family, and others. Flu, COVID-19, and RSV viruses are all likely to spread during flu season. People at high risk for complications from the flu are also likely to be at high risk for serious problems, so it's important to get a flu vaccine.
- Teach children to wash their hands often—before eating and after using the bathroom, playing with animals, or coughing or sneezing. Carry an alcohol-based hand gel (containing at least 60% alcohol) for times when soap and water aren't available.
- Remind children not to touch their eyes, nose, or mouth.
- Consider having your child wear a medical mask when around others with colds or the flu. Medical mask use reduces the chance of coming down with these illnesses (in addition to reducing the risk of COVID-19).

Tips for correct handwashing

Use clean, running water and plenty of soap. Work up a good lather.

- Clean the whole hand, under the nails, between the fingers, and up the wrists.
- Wash for at least 20 seconds (as long as it takes to say the alphabet or sing the Happy Birthday song). Don't just wipe—scrub well.
- Rinse well. Let the water run down the fingers, not up the wrists.
- In a public restroom, use a paper towel to turn off the faucet and open the door.

When to call your child's healthcare provider

Call your child's provider if your child doesn't get better or has:

- Shortness of breath or fast breathing
- Thick yellow or green mucus that comes up with coughing
- Worsening symptoms, especially after a period of improvement
- Fever (see Fever and children, below)
- Severe or continued vomiting
- Signs of dehydration. These include a dry mouth, dark or strong-smelling urine or no urine output in 6 to 8 hours, and refusal to drink fluids.
- Trouble waking up
- Ear pain (in toddlers or teens)
- Sinus pain or pressure

Fever and children

Use a digital thermometer to check your child's temperature. Don't use a mercury thermometer. There are different kinds and uses of digital thermometers. They include:

- **Rectal.** For children younger than 3 years, a rectal temperature is the most accurate.
- **Forehead (temporal).** This works for children age 3 months and older. If a child under 3 months old has signs of illness, this can be used for a first pass. The provider may want to confirm with a rectal temperature.
- **Ear (tympanic).** Ear temperatures are accurate after 6 months of age, but not before.
- **Armpit (axillary).** This is the least reliable but may be used for a first pass to check a child of any age with signs of illness. The provider may want to confirm with a rectal temperature.
- **Mouth (oral).** Don't use a thermometer in your child's mouth until they are at least 4 years old.

Use a rectal thermometer with care. Follow the product maker's directions for correct use. Insert it gently. Label it and make sure it's not used in the mouth. It may pass on germs from the stool. If you don't feel OK using a rectal thermometer, ask the healthcare provider what type to use instead. When you talk with any healthcare provider about your child's fever, tell them which type you used.

Below is when to call the healthcare provider if your child has a fever. Your child's healthcare provider may give you different numbers. Follow their instructions.

When to call a healthcare provider about your child's fever

For a baby under 3 months old:

- First, ask your child's healthcare provider how you should take the temperature.
- Rectal or forehead: 100.4°F (38°C) or higher

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- Armpit: 99°F (37.2°C) or higher
 - A fever of _____ as advised by the provider

For a child age 3 months to 36 months (3 years):

- Rectal or forehead: 102°F (38.9°C) or higher
- Ear (only for use over age 6 months): 102°F (38.9°C) or higher
- A fever of _____ as advised by the provider

In these cases:

- Armpit temperature of 103°F (39.4°C) or higher in a child of any age
- Temperature of 104°F (40°C) or higher in a child of any age
- A fever of _____ as advised by the provider