agent acyclovir (Zovirax) or valacyclovir may be used to treat varicella infections in susceptible immunocompromised persons. It is effective in decreasing the number of lesions; shortening the duration of fever; and decreasing itching, lethargy, and anorexia. Consider oral acyclovir or valacyclovir for immunocompromised children without a history of varicella disease, newborns whose mother had varicella within 5 days before delivery or within 48 hours after delivery, and hospitalized preterm infants with significant varicella exposure (American Academy of Pediatrics, 2015).

Children with hemolytic disease, such as sickle cell disease, are at risk for aplastic anemia from erythema infectiosum. Human **parvovirus** B19 infects and lyses red blood cell precursors, thus interrupting the production of red blood cells. Therefore, the virus may precipitate a severe aplastic crisis in patients who need increased red blood cell production to maintain normal red blood cell volumes. Thrombocytopenia and neutropenia may also occur as a result of human **parvovirus** B19 infection. The fetus has a relatively high rate of red blood cell production and an immature immune system; it may develop severe anemia and hydrops as a result of maternal human **parvovirus** infection. Fetal death rates as a result of human **parvovirus** B19 have been estimated to be between 2% and 6%, with the greatest risk appearing to be in the first 20 weeks (Koch, 2016; American Academy of Pediatrics, 2015).