

Discharge Instructions for Croup



Your child has been diagnosed with croup. This is usually caused by a viral infection of the upper airways and voice box (larynx). You may have noticed that your child had a rough, barking cough. This is one of the most common signs of croup. You may also have noticed a wheezing and rattling sound (stridor) when your child took a breath. It can be scary for parents and children. Your child may be given a medicine that eases swollen airways. Here are instructions for caring for your child at home.

Home care

- Keep your child as calm as possible. This may help them breathe better. Offer their favorite toy or book, sing their favorite song, or reassure them with words.
- Make sure your child is drinking enough fluids. This helps prevent dehydration.
- Cool or moist air can help your child breathe easier:
 - Use a cool-air humidifier or vaporizer. Turn it on next to your child's bed during and after an attack.
 - During an attack, have your child sit up and breathe in the humidified air.
 - Take your child into the bathroom, close the door, and steam up the room by running hot water through the shower. Sit with your child in the bathroom, not in the shower. Hold your child to reduce the chance that they may get too close to the hot water and get burned.
 - Take your child outside to breathe in the cool night air. Wrap your child in warm clothing or blankets if the weather is chilly.
- Don't let people smoke in your home. Smoke can make your child's cough worse.
- Sleep in the same room as your child so you are quickly available if the croup gets worse during the night.
- A fever of 100°F (37.7°C) to 101°F (38.3°C) is common in a child with croup:
 - Follow your healthcare provider's advice on treating your child's fever.
 - Before giving your child any medicine, read the label. Make sure you are giving the right dose for their age and weight. Never give a child adult medicines.
 - Use over-the-counter (OTC) medicines such as ibuprofen or acetaminophen to reduce your child's fever, if advised by the provider. But never give ibuprofen to children younger than 6 months old.
 - Don't give OTC cough and cold medicines to a child younger than 6 years old unless directed by the provider.
 - Don't give aspirin to a child or teen unless directed by the provider. Taking aspirin can put your child at risk for Reye syndrome. This is a rare but very serious disorder. It most often affects the brain and the liver.

Follow-up care

- Make a follow-up appointment as directed.

- Talk with your child's healthcare provider about vaccinations. Babies should have their first dose of the Hib vaccine at 2 months old.
- Be sure your child takes all medicines as instructed by the provider.

Call 911

Call 911 right away if your child:

- Makes a whistling sound (stridor) that gets louder with each breath
- Has stridor when resting
- Has a hard time swallowing, or is drooling
- Sucking in of skin around ribs and sternum when breathing (retractions)
- Has trouble breathing
- Has a severe cough
- Has pale or blue-colored skin around the fingernails, mouth, or nose
- Struggles to catch their breath
- Can't speak, cry, or make sounds
- Has trouble waking up or loses consciousness

When to call your child's healthcare provider

Call your child's healthcare provider right away if any of these occur:

- Fever (see "Fever and children" below)
- Feeling tired or lack of energy (fatigue)
- Can't handle fluids
- Cough or other symptoms that don't get better or symptoms get worse
- Trouble relaxing or sleeping after 20 minutes of steam or cool, outdoor air
- Sluggishness
- Vomiting
- Your child doesn't get better within a week

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
- 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

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