

Fever in children: *when to seek care.*

Fever isn't an illness — it's a sign your child's body is fighting an infection. This guide helps you know what to do at home and, most importantly, when to call your pediatrician.

FIRST, THE ESSENTIALS

Fever means a temperature of **38 °C (100.4 °F) or higher**. The number alone doesn't measure how sick a child is: a child at 38.5 °C who is playing and drinking is usually better off than one at 38 °C who is listless. Watch your child, not just the thermometer.

Fever **does not damage the brain** and is not dangerous in itself in most cases. The goal of treating it isn't to “lower the number” but to keep your child comfortable — resting, drinking, and feeling better.

WHEN TO SEEK CARE — A TRAFFIC-LIGHT GUIDE

Call or seek care NOW

- Baby **under 3 months**
with any fever (38 °C / 100.4 °F or higher): this is urgent and needs same-day evaluation.
- Trouble breathing, blue lips or skin, very fast breathing.
- Skin spots that don't fade when pressed, stiff neck, a seizure.
- Very drowsy, hard to wake, inconsolable crying or constant moaning.
- Signs of dehydration: no urine for 8 h, dry mouth, crying without tears.

Seek care soon (same or next day)

- Fever lasting **more than 72 hours**.
- Fever reaching **40 °C (104 °F)** or higher at any age.
- Ear pain, pain on urinating, or refusing all fluids.
- Fever that comes and goes for days, or a child getting worse instead of better.

You can care at home

- Child over 3 months, good color, drinking, passing urine and responding well between fever peaks.
- A few days of fever with mild cold symptoms.

HOW TO CARE AT HOME

Offer fluids often

Breast, formula, water or oral rehydration by age. Hydration matters more than the thermometer number.

Light clothing, cool room

Don't over-bundle. No alcohol rubs or cold baths — they cause shivering and distress.

Rest

The body recovers through sleep. No need to wake a child just to give medicine.

MEDICATION: DOSE BY WEIGHT, NOT AGE

Always dose by **weight**, not age, and measure with a syringe or dosing cup — never a kitchen spoon. Always check the concentration on the package.

MEDICINE	DOSE	FREQUENCY	AGE
Acetaminophen (paracetamol)	10–15 mg/kg per dose	every 4–6 h · max 5 doses/day	From 3 months (younger only if your pediatrician says so)
Ibuprofen	5–10 mg/kg per dose	every 6–8 h · max 4 doses/day	From 6 months only

Never give aspirin to anyone under 18 (risk of Reye syndrome). Don't combine or alternate acetaminophen and ibuprofen on a fixed schedule on your own: it's the most common cause of home dosing errors. The safe move: if after **3–4 hours** your child is still uncomfortable on one correctly-dosed medicine, you may **switch to the other** (acetaminophen to ibuprofen or vice versa). If that still doesn't help, the next step is to **call your pediatrician**.

Educational material — not a substitute for medical care. When in doubt, or if your child is unwell, contact your pediatrician.

Sources: American Academy of Pediatrics (HealthyChildren.org, dosing charts 2021/2024); AAP Pediatrics network meta-analysis 2024. Verified 2026.

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