

Respiratory Syncytial Virus (RSV)

This *Health Facts for You* talks about the symptoms and treatment of Respiratory Syncytial Virus (RSV). If you have more questions, please contact your child's clinic.

RSV is one of the main causes of lung infection in infants and young children. It affects small airways in the lung. It is a very common lung infection. By the age of three, most children will have had RSV. RSV occurs most often in the winter and spring months.

Symptoms

Symptoms range from mild to severe. Most children will have mild cold symptoms.

Mild symptoms include:

- Clear runny nose
- Fever
- Cough
- Ear infection
- Mild fever (less than 101° F)

Some children can get a serious infection. They will have fast breathing and may be struggling to breathe.

Treatment

Most children will get better in a few weeks on their own. A loose cough may last up to six weeks. If your child has a fever, the doctor may suggest Tylenol®. Give small amounts of fluids (water, juice or popsicles) often if your child has a fever.

Children with a serious case, may need to stay in the hospital for treatment. Treatment may include oxygen, intravenous (I.V.) fluids, an aerosol cool mist medicine, and other therapies or medicines.

A child may get RSV again in the future, but future infections may not be as bad. Adults can also get RSV, although symptoms are mostly like a cold.

Preventing the Spread

RSV spreads by coming in close contact with an infected person and the droplets they produce when they cough or sneeze. The best way to prevent the spread is with careful hand washing using soap and warm water.

If your child is in a clinic or hospital with possible RSV, they will be placed in a room with the door closed. This will lessen the chance of another child being exposed. You may be asked to wear a mask, gown or gloves while in your child's room. Leave these items in your child's room and do careful hand washing followed by hand gel before leaving the room.

When to Call

Call the doctor if your child has cold and has any of these problems:

- Breathing fast-more than 40-60 times a minute for an infant; more than 30-40 times a minute for a young child.
- Struggling to breathe.
 - Chest is pulling in between ribs or above breastbone with breathing.
 - Nostrils are flaring out with breathing.
 - Child is making a grunting noise with breathing.
- Bluish color around nose and mouth or fingertips.
- Fever over 101°F.
- Wheezes with breathing or coughing.
- Look very tired.
- Not eating or drinking.

- Has other serious medical problems, such as heart, lung or immune system disease, or was premature with lung disease that developed after birth.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright ©3/2021. University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#4319.