
This guide — developed by Indiana Emergency Medical Services for Children, the Indiana Department of Health and information from the Centers for Disease Control and Prevention (CDC) — shares what we know today to help keep you, your family and our communities healthy.

COVID-19

Q: What is COVID-19 and coronavirus?

A: Coronavirus disease 2019 (COVID-19) is a respiratory illness that can spread from person to person. Patients with COVID-19 have experienced mild to severe respiratory illness, including fever, cough, shortness of breath, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, and diarrhea. The virus that causes COVID-19 is new and can be deadly. It is not the same as other types of coronaviruses that commonly circulate among people and cause mild illness, such as the common cold.

Q: How does the coronavirus spread?

A: We are still learning about COVID-19, but it's spread mainly from person to person through infected viral respiratory droplets. That can happen either when people are physically near someone with COVID-19 (within 6 feet for a total of 15 minutes or more over a 24-hour period) or have direct contact with such a person (hugging or kissing). When an infected person exhales by breathing, coughing, exercising, shouting, singing, sneezing or talking, these droplets can land in the mouths or noses of nearby people or possibly be inhaled into their lungs.

Wearing a face mask that covers your mouth and nose, plus physical distancing, are important to help avoid that, and more importantly, prevents you from spreading the infection to others.

It may be possible that people can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouths, noses or possibly their eyes, but this is not thought to be the main way the virus spreads.

Q: Why can't I just give my child medicine to cure COVID-19?

A: Because COVID-19 is a viral infection, like the common cold, rather than a bacterial infection, it cannot be cured with an antibiotic, such as penicillin. Right now, we do not have a way to cure COVID-19, and there is no vaccine yet to prevent it. Vaccine is under development, but will not initially be available for children.

Q: What are the symptoms of COVID-19 for children?

A: People with COVID-19 have reported a wide range of symptoms — from mild symptoms to severe illness. Symptoms may appear 2-14 days after exposure to the virus. Children with these symptoms may have COVID-19:

- Fever or chills
- Cough
- Nasal congestion or runny nose
- New loss of taste or smell
- Sore throat
- Shortness of breath or difficulty breathing
- Diarrhea
- Nausea or vomiting
- Stomachache
- Tiredness

- Headache
- Muscle or body aches
- Poor appetite or poor feeding, especially in babies under 1 year old

Symptoms of COVID-19 are very similar to those for other, more common respiratory viruses seen frequently from fall to early spring. This means that, in most cases, we can't use symptoms or a simple examination to tell COVID-19 apart from the flu, a cold or other respiratory infections.

Emergency COVID-19 warning signs include bluish lips or face, breathing trouble, inability to awaken or stay awake, new confusion and persistent chest pain or pressure. Please get medical attention right away if you notice any of these symptoms.

Q: What should I do if I believe my child has been exposed to COVID-19?

A: [Most children with COVID-19](#) experience no symptoms or mild ones, which tend to appear 2- 14 days after exposure. Some, though, can get severely ill. The most common symptoms are fever and cough. Children without symptoms (asymptomatic) can spread the virus, as can such adults.

If you believe your child or teen may have been exposed, check for COVID-19 symptoms daily, with particular attention to diarrhea; fever (temperature of 100.4 degrees or above; the threshold for your child's school may be lower); new severe headache, especially with fever; new uncontrolled cough that causes difficulty breathing (or a change in a child's chronic allergic or asthmatic cough); sore throat; stomachache; or vomiting. Also, keep track of whom your child comes in close contact with to help any contact tracing.

If your child or teen becomes sick and may have been exposed to the virus or has been in an area where the virus is spreading:

- [Keep your child home](#) (this page also discusses children who might be at more risk to get severely ill and protecting your child if you're sick)
- Contact your child's health care provider and discuss whether your child needs to be evaluated or tested for COVID-19

If you suspect your child or someone your child knows has COVID-19 or has come in close contact with someone with COVID-19, [visit Coronavirus self-checker](#). This online tool will help you decide when to seek testing or medical care for your child.

Q: Are my kids at risk for developing severe symptoms from COVID-19?

A: It is important to know that all evidence from around the world indicates that children usually ARE NOT seriously affected.

Most children with COVID-19 have mild or no symptoms. However, some children can get severely ill from COVID-19. They might require hospitalization, intensive care or a ventilator to help them breathe. In rare cases, they might die.

Children younger than 18 make up about 22% of the U.S. population, yet they accounted for less than 9% of [COVID-19 cases reported](#) to the CDC through mid-October. Of more than 154,000 deaths in the same period, 94 came from the same age group.

Q: How can my child be tested for COVID-19?

A: Free tests for children 1 year and older are available at any Indiana Department of Health/OptumServe test site. Find a [map of Indiana test sites and more test information](#) on the department's website.

Q: Why is COVID-19 such a big deal? Flu is here every year, and my kids do just fine.

A: There are three unique things about COVID-19 that make it a big deal:

- 1) Because it is a new virus, more people are likely to become infected.
- 2) COVID-19 is easy to spread from person to person. It's believed to be mainly spread by infected droplets when someone with COVID-19 is in close contact with an uninfected person (6 feet or less for more than 15 minutes) or direct contact (hugging, kissing). When someone with COVID-19 coughs, talks or breathes out in other ways, infected droplets can land in the mouths or noses of nearby people or possibly be inhaled into their lungs. That's why it's very important to wear a mask covering your nose and mouth and socially distance. This is also why you should be cautious about attending large gatherings or visiting anyone over age 65 for the time being because they are particularly at risk because chances of severe illness increase with age. Nearly 80% of [COVID-19 deaths reported](#) to the CDC through mid-October have been people 65 and older.
- 3) In most people, COVID-19 causes mild illness, which means that people are more likely to continue their usual activities, such as going to work, school and the gym. While most infected children become only mildly ill, they can easily spread the infection to [other people who are at higher risk](#). This wouldn't be as big a deal if everybody only got mildly ill, but some people can get very sick. Unfortunately, there have also been people, almost all of them older adults, who have died from COVID-19.

Q: What should I say when explaining COVID-19 to my kids?

A: Remain calm and reassuring. Remember that children will react to both what you say and how you say it. They will pick up cues from the conversations you have with them and with others. You also can:

- Make time to listen and talk. Be sure children know they can come to you when they have questions. Let them know it's OK if they're upset or scared, and share with them how you deal with your own stress.
- Avoid language that might blame others and lead to stigma.
- Remember that viruses can make anyone sick, regardless of a person's race or ethnicity. Avoid making assumptions about who might have COVID-19. Pay attention to what children see or hear on television, radio or online.
- Consider reducing the amount of screen time focused on COVID-19. Too much information on one topic can lead to anxiety. Provide information that is accurate and appropriate for the child's age and developmental level.
- Talk to children about how some stories about COVID-19 on the Internet and social media may be based on rumors and inaccurate information.
- Teach children everyday actions to reduce the spread of germs:
 - Remind children to stay away from people who are coughing, sneezing or sick.
 - Remind them to cough or sneeze into a tissue or their elbow, then throw the tissue into the trash.

- Get children into a hand hygiene habit. Teach them to wash their hands with soap and water for at least 20 seconds, especially after blowing their nose, coughing or sneezing, going to the bathroom and before eating or preparing food.
- If soap and water are not available, teach them to use hand sanitizer. Hand sanitizer should contain at least 60% alcohol. Supervise young children when they use hand sanitizer to prevent swallowing alcohol, especially in schools and child care facilities.

Learn more from [“Talking to Children About COVID-19 \(Coronavirus\): A Parent Resource”](#) in English and [“Hable con sus hijos sobre el COVID-19 \(Coronavirus\) Un recurso para padres”](#) in Spanish/Español from the National Association of School Psychologists.

Q: When should I take my child to the emergency room?

A: According to the CDC, you should not delay seeking emergency care for your child because you are worried about the spread of COVID-19. Emergency departments have infection prevention plans to protect you and your child from getting sick with COVID-19 if your child needs emergency care.

If your child is showing any of these emergency warning signs, seek emergency medical care immediately.

- Trouble breathing
- Pain or pressure in the chest that doesn’t go away
- New confusion
- Can’t wake up or stay awake when not tired
- Bluish lips or face
- This list does not include all possible symptoms.

Call your child’s healthcare provider for any other symptoms that are severe or concerning to you.

Q: Don’t go to the emergency department if you don’t need to.

A: You will expose your child to illnesses your child may not have and will expose others as well. In addition, we want to keep our emergency rooms available to care for children with the kinds of emergencies we see every day. If you do go to the emergency room, please call ahead if possible so precautions can be taken to limit the spread to others.

Q: If my child is tested at the emergency department and sent home, does that mean my child doesn’t have COVID-19?

A: No. COVID-19 looks just like lots of other illnesses we see, and we can’t tell just by symptoms. Before you get your child’s test result, you can learn about [“3 Key Steps to Take While Waiting for Your COVID-19 Test Result”](#) (English) and [“Tres medidas clave que debe tomar mientras espera el resultado de la prueba del COVID-19”](#) (Spanish/Español).

When you get your child’s result, you can use the [“Interpreting COVID-19 Test Results”](#) chart to better understand what the result means and what actions are recommended.

There’s also a helpful [“COVID-19 School Attendance Quick Reference”](#) guide in English and [“Una Rápida Referencia Sobre la Asistencia a Clase y el COVID-19”](#) guide in Spanish/Español. It helps you



see what to do, depending on your child's test status, symptoms and if your child's been in close contact with someone who has COVID-19 (within 6 feet for more than 15 minutes) or has had direct contact with such a person (hugging or kissing). Depending on its guidance and the particular situation, your child may need to [quarantine at home](#) or [isolate at home](#).

If your child is sick, you need to be especially careful about handwashing and staying home and away from others. While COVID-19 is a big deal, and we need to take it seriously, keep in mind that kids seem to be recovering very well from this virus.

Q: How can I help prevent COVID-19 from spreading in my child’s school?

A: Checking for the signs of COVID-19 every day before sending your child to school can help prevent the spread in your child’s building. The Indiana Department of Health has created a daily checklist to make this easier for parents: “[COVID-19 Screening for Parents](#)” in English and “[Monitoreo del COVID-19 para padres](#)” in Spanish/Español.

Q: What’s the best way to decontaminate an area that has been exposed to COVID-19? What cleaning agents should be used?

A: Click for [detailed disinfection guidance](#); learn [six steps for safe, effective disinfectant use](#); and see a [searchable list of disinfectants](#) that meet the Environmental Protection Agency (EPA) criteria for use on surfaces against the COVID-19 virus. Follow the manufacturer’s instructions for all cleaning and disinfecting products (e.g., application method, concentration, contact time, etc.).

MIS-C

Q: What is Multisystem Inflammatory Syndrome in Children (MIS-C), which is associated with COVID-19?

A: Multisystem Inflammatory Syndrome in Children (MIS-C) is a condition where different body parts can become inflamed, including the brain, eyes, gastrointestinal organs, heart, kidneys, lungs and skin. It’s not yet known what causes it or who’s at increased risk to develop it. Many children with MIS-C had the virus that causes COVID-19 or had been around someone with COVID-19. MIS-C can be serious, even deadly, but most children diagnosed with this condition get better with medical care. [Learn more about MIS-C.](#)

Q: What are the symptoms of MIS-C?

A: If your child shows symptoms of MIS-C, contact your child’s health care provider right away. Be aware that not all children will have the same symptoms:

- Abdominal pain
- Bloodshot eyes
- Diarrhea
- Feeling extra tired
- Fever
- Neck pain
- Rash
- Vomiting

Immediately seek emergency care if your child shows any of these emergency warning signs of MIS-C or other concerning signs:

- Bluish lips or face
- Breathing trouble
- Chest pain or pressure that doesn’t go away
- Inability to awaken or stay awake
- New confusion
- Severe abdominal pain

[Learn more about MIS-C](#) on the CDC’s website.

Q: What should I do if my child is sick with cold or flu symptoms?



A: In general, mild cough and cold symptoms can be managed at home. For most children, you can use Tylenol to treat fever or achiness.¹ It is also important to make sure that your child stays hydrated. Gatorade, water, juice and ice pops are great choices for children 1 and older. For children younger than 1, try Pedialyte. Let your child get plenty of rest. It's OK if your child isn't very hungry as long as he or she is drinking lots of fluids. Most children with viral respiratory illnesses recover well without any additional treatment or intervention.

¹ Ibuprofen should not be given to children younger than 6 months. Also, some children with chronic medical conditions should not take Ibuprofen. Please check with your health care provider(s).