

This guide was developed by Indiana Emergency Medical Services for Children and the Indiana State Department of Health to share what we know today to help keep you, your family, and our communities healthy.

What is COVID-19 and coronavirus?

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 and shortness of breath. The virus that causes COVID-19 is new. It is not the same as other types of coronaviruses that commonly circulate among people and cause mild illness, like the common cold.

What is Multisystem Inflammatory Syndrome in Children (MIS-C) associated with COVID-19

Multisystem Inflammatory Syndrome in Children (MIS-C) is a condition where different body parts can become inflamed, including the heart, lungs, kidneys, brain, skin, eyes or gastrointestinal organs. It is not yet known what causes MIS-C. However, 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 who were diagnosed with this condition have gotten better with medical care.

Where did this coronavirus virus come from?

This particular virus was first identified in China this winter and has caused an outbreak of illness around the world. There is a lot that we are still learning about COVID-19, but it is thought to spread mainly from person-to-person, between people who are in close contact with one another (within about 6 feet) through respiratory droplets when an infected person coughs or sneezes. It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose or possibly their eyes, but this is not thought to be the main way the virus spreads.

Why can't I just take medicine to cure COVID-19?

Because COVID-19 is a viral infection, like the common cold, rather than a bacterial infection, it cannot be cured with an antibiotic like penicillin. Right now, we do not have a way to cure COVID-19 and there is no vaccine to prevent it.

What are the symptoms of COVID-19?

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

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose

- Nausea or vomiting
- Diarrhea

Symptoms of COVID-19 are very similar to other, more common respiratory viruses we see frequently this time of the year. 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 warning signs include trouble breathing, persistent pain or pressure in the chest, new confusion or inability to arouse, bluish lips or face. Please get medical attention if you notice any of these symptoms.

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

It is important to know that all evidence from around the world indicates that children usually DO NOT develop severe disease.

High-risk groups include smokers, older adults (particularly those over 65 years of age), and people with underlying health issues such as lung disease, heart disease, obesity, and diabetes.

What are the symptoms of MIS-C?

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

Be aware that not all children will have all the same symptoms. For more information on MIS-C, visit the [CDC website](#).

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

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 popsicles are great choices for children older than the age of 1. For children younger than 1 year old, 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.

Can't we just test to be sure my child isn't sick with COVID-19?

Not necessarily. At this time, state departments are limiting testing to people who are most at risk. As private labs grow their ability to test, there may be more opportunities for testing. At this point, in almost all cases, children with mild or even moderate illness will not receive testing so the tests can be given to those most at risk.

¹ Ibuprofen should not be used in children younger than 6 months of age. Also some children with chronic medical conditions should not take ibuprofen. Please check with your pediatrician and specialists

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

There are three unique things about COVID-19 that make it a bigger deal for our communities.

- 1) Because it is a brand-new virus, more people are likely to become infected.
- 2) COVID-19 is easy to spread from person-to-person. It can be spread by droplets, like when someone coughs or sneezes near you or on surfaces you touch. This is why it is SO important to wash your hands frequently, clean surfaces and try and avoid touching your face. This is how the virus is shared with other people. 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.
- 3) In most people, COVID-19 causes mild illness, which means that people are more likely to continue doing usual activities, like going to work, school and to the gym. While most infected children become only mildly ill, but they can easily spread the infection to other people who are more at risk. This wouldn't be as big a deal if everybody only got mild illness, but some people can get very sick. Unfortunately, there have been people, almost all of them older adults, who have died from COVID-19.

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

- 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.
- Make time to talk. Be sure children know they can come to you when they have questions.
- 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 honest and accurate. Give children information that is truthful and appropriate for the age and developmental level of the child.
- Talk to children about how some stories on 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 or 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 handwashing 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 childcare facilities.

When should I go to the emergency room?

Go to the emergency room if your child is having an emergency. Here are some examples:

- 1) **Your child has stopped drinking and urinating.** If your child is drinking and urinating a little bit less than usual that is OK. However, if it is a LOT less than usual, then call your doctor or come to the emergency room.
- 2) **Your child is having difficulty breathing in their lungs.** Children with colds frequently may have trouble breathing through their noses. This is okay, as long as they are not having difficulty breathing in their lungs. Come to the emergency room if your child is:
 - Breathing a lot faster than normal
 - Using extra muscles to breathe, If this happens you may see them pulling in on their ribcage each time they take a breath or using extra muscles in their necks
 - Flaring their nostrils with each breath
 - Making grunting noises with each breath
 - Having trouble speaking
 - Having trouble drinking
- 3) **Your child is acting “weird.”** Children who are sick with a cough, cold and flu are typically less active than normal. For example, they may be crankier, want to sleep more or be held. This is normal. Bring your child to the emergency room if they seem newly confused or unresponsive.
- 4) **What about fever?** Children frequently get a fever with viral illnesses. This is the body’s normal response to help fight infection. Fever itself is not dangerous, but children with fevers generally feel worse and are not as excited about doing things such as drinking, which is very important. We treat their fevers to help them feel better. In some illnesses, the fever will not come all the way down to normal even with fever medicine, and that is OK. Also, as the medicine wears off, the fever may return. If the fevers persist for more than several days and don’t respond to medicines, you should talk to your doctor, sometimes you will need to be seen in the emergency department.
- 5) **Your child has a fever AND is immunosuppressed** (either because of medication they take or because of underlying illness). This includes children being treated for cancer, autoimmune diseases and sickle cell disease. You should call your doctor immediately anytime an immunosuppressed child has a fever.

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

You will expose your children to illnesses they may not currently 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 decide to go to the emergency room, please call ahead if possible so precautions can be taken to limit the spread to others.

If I go to the emergency department, and they send my child home, does that mean my child doesn’t have COVID-19?

No. COVID-19 looks just like lots of other illnesses we see, and we can’t tell just by symptoms. We also can’t test most patients. In most cases we also can’t write a note saying your child does

NOT have COVID-19. (Or that you haven't been exposed.) If your child is sick, you need to be especially careful about handwashing and staying home and away from others.

So, what should we do?

- 1) Don't panic. COVID-19 is a big deal, and we need to take it seriously, but keep in mind that kids seem to be recovering very well from this virus.
- 2) WASH YOUR HANDS (and your children's) often. Hand sanitizer is good if you are on the go.
- 3) STAY HOME if your child or you are sick, even just a little bit sick. People who are a little bit sick share it with a lot of people, making a lot of people a little bit sick and a few people very sick.
- 4) Wear a FACE COVER when around others. **Because of the danger of suffocation, do NOT put cloth face coverings on babies or children younger than 2 years.**
- 5) Protect those in your community at greatest risk – older adults and those with chronic illnesses – by doing steps 1 through 3.

Why are schools closed?

- All K-12 public schools will remain closed until June 30. Non-public schools are also ordered closed. This date may be revised to extend through the end of the 2019-2020 school year if circumstances warrant.
- All-state mandated assessments will be canceled for the current academic year. The governor has contacted U.S. Secretary of Education Betsy DeVos to share the state's plan and also has asked the Superintendent of Public Instruction Dr. Jennifer McCormick to pursue any federal waivers needed to cancel the requirements for accountability, chronic absenteeism and state-mandated assessments. See the Indiana Department of Education's [FAQs](#) for more information.
- Consult your school district's website for more schedule and other information about your child's school and e-learning guidance.

You can find more information about talking to your kids [here](#) and [here](#) (Spanish).