How to remove tiny splinters





Usually splinters end up in the hands of tiny tots as pictured on the left, and not next to the eye as pictured on the right.

More often than not, splinters are teensy-weensy and too small to grab with tweezers. Wondering how to remove tiny splinters? If the splinters in your child are near the skin surface and do not cause much discomfort, simply soak the affected area in warm soapy water several times a day for a few days. Fifteen minutes, two or three times a day for four days, works for most splinters.

Our bodies in general dislike foreign invaders and try to evict them. Water will help draw out tiny splinters by loosening up the skin holding the splinter. Soaking works well particularly for multiple hair-like splinters such as the ones obtained from sliding down an obstacle course rope. A helpful old home remedy is to put a paste of baking soda and water over the splinters for a few hours, which also softens the skin around a tiny splinter. Oil-based salves such as butter will not help pull out splinters. However, an over-the-counter

hydrocortisone cream will help calm irritation and a benzocaine-based cream (for kids over two years of age) can help with pain relief.

If a splinter seems easy to grab, then first gently wash the area with soap and water and pat dry. Don't soak an area with a "grab-able" wooden splinter for too long because the wood will soften and break apart. Next, wash your own hands and then clean a pair of tweezers with rubbing alcohol. Use the tweezers to grab hold of the splinter and with the tweezers pull smoothly. Take care to avoid breaking the splinter before it comes out.

If the splinter does break, or if you cannot easily grab the splinter's end because it does not protrude from the skin, here is another approach:

- Sterilize a sewing needle by first boiling it for one minute.
- Next, clean the needle with rubbing alcohol.
- Wash the area with the splinter well.
- Using the sterilized needle, pick away at the skin directly above the splinter. Use a magnifying glass if you have to, make sure you have good lighting, and for those middle-age parents like us, grab those reading glasses.
- Be careful not to go too deep- you will cause bleeding which makes visualization impossible.
- Continue to separate the skin with the needle gently until you can nudge the splinter out with the needle or grab it with your tweezers.

Since any break in the skin is a potential source of infection, after you remove the splinter, wash the wound well with soap and water. Flush the area with running water to remove any dirt that remains in the wound. See our post on wound care for further details on how to prevent infection. If the splinter is particularly dirty or deep, make sure your

child's tetanus shot is up to date. Also, watch for signs of infection over the next few days: redness, pain, or thick discharge from the wound are all reasons to take your child to his doctor for evaluation.

Some splinters are just too difficult for parents to remove. If you are not comfortable removing it yourself of if your child can't stay still for the extraction procedure, head over to your child's doctor for removal.

The splinter near the baby's eye pictured above did not bother her, but it certainly frustrated the child's mom and the Emergency Room doctors who finally plucked it out.

Julie Kardos, MD and Naline Lai, MD ©2021 Two Peds in a Pod®

College bound



celebrating transitions

Our social media feed is full of parents trading ideas on what to pack for college. In honor of all of those who are taking a leap into the collegiate world, including Dr. Kardos's own children, we share again the letter Dr. Lai wrote for her child the night before kindergarten. As Gretchen Rubin said, "the days are long but the years are short." As time moves forward, your child's transitions may differ, yet they still will feel the same.

My Child,

As we sit, the night before kindergarten, your toes peeking out from under the comforter, I notice that your toes are not so little anymore.

Tomorrow those toes will step up onto to the bus and carry you away from me. Another step towards independence. Another step to a place where I can protect you less. But I do notice that those toes have feet and legs which are getting

stronger. You're not as wobbly as you used to be. Each time you take a step you seem to go farther and farther.

I trust that you will remember what I've taught you. Look both ways before you cross the street, chose friends who are nice to you, and whatever happens don't eat yellow snow. I also trust that there are other eyes and hearts who will watch and guide you.

But that won't stop me from worrying about each step you take.

Won't stop me from holding my breath.

Just like when you first started to walk, I'll always worry when you falter.

I smile because I know you'll hop up onto the bus tomorrow, proud as punch, laughing and disappearing in a sea of waving hands. I just hope that at some point, those independent feet will proudly walk back and stand beside me.

Maybe it will be when you first gaze into your newborn's eyes, or maybe it will be when your child climbs onto the bus.

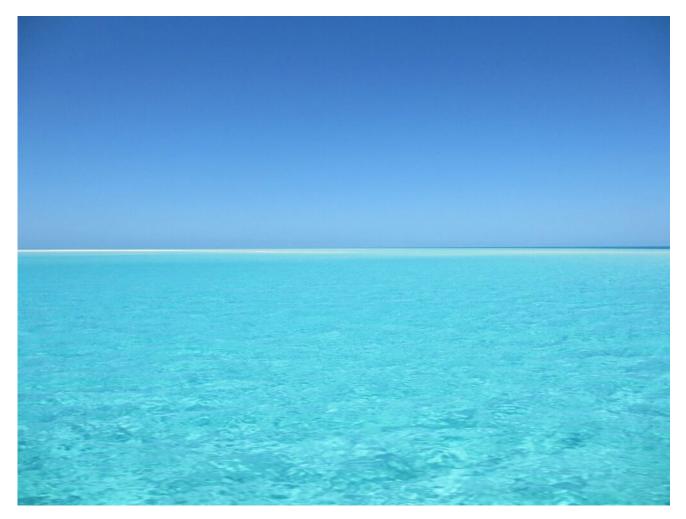
Until then,

I hold my breath each time you take a step.

Love, Mommy

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Ear pain after swimming? It might be Swimmer's ear



If your child experiences ear pain after swimming, possibly a couple of days after a pool party or vacation, they might have swimmer's ear. Read our post on swimmer's ear to learn more.

Julie Kardos, MD and Naline Lai, MD

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How to tell the difference between COVID and allergies in kids



This spring, kids with allergies are scratching their noses, and parents are scratching their heads. With the overlap of allergy symptoms and COVID symptoms, many parents wonder how to tell the difference between COVID and allergies. While there is an overlap in symptoms between allergies and viruses (COVID or otherwise), there are a few distinguishing features:

Allergies Itch

Itchy nose, itchy eyes, itchy throat. If your child is doing a lot of facial rubbing or throat clearing, you can more confidently blame allergies. If needed, treat these annoying itches with allergy medicine such as cetirizine (brand name Zyrtec), loratadine (brand name Claritin), or fexofenadine (Brand name Allegra). You can also read our prior post about spring allergies. Allergy medicine does not improve these symptoms if your child has a virus.

Fever: Viruses can cause fever. Allergies do not.

If your child has a fever along with their runny or stuffy nose, coughing, sore throat, and watery eyes, think VIRUS. Also, think "contagious." In contrast, allergies do not trigger fevers. So if your child has sudden onset of respiratory symptoms WITH FEVER, you can't blame it on allergies.

Age

If your child is younger than a year, it is unlikely that they will show signs of spring allergies because they have never been exposed to spring pollen. A person needs to be sensitized to something before they can be allergic to it. If it is your child's first spring, they will not usually show signs of allergies. Usually, cold symptoms in a child this young means that your child does, in fact, have a cold virus.

History

Sensitive noses, sensitive airways, sensitive skin, sensitive gut... they all tend to go together. If your child has ever had eczema, there is a good chance that they may have environmental allergies, asthma or food allergies.

If two parents have nasal allergies, there is about an 80 percent chance that their child has allergies.

A year ago, COVID -19 testing wasn't readily available. Now that we have more access to testing, with any uncertainty, go ahead and test. You can always call your pediatrician to guide you through figuring out whether your kid has COVID versus allergies.

In the meantime, at least take heart that masks not only protect against COVID from spreading, but scientists discovered that masks decrease allergies!

Julie Kardos, MD and Naline Lai, MD

What do ringworm, jock itch, and athlete's foot all have in common?



Ringworm can appear anywhere there is skin- even on the eyelid.

What do ringworm, jock itch, and athlete's foot all have in common? They are all names for the same type of fungal infection- just in different parts of the body.

These infections, caused by fungi called dermatophytes, fall into the mostly-harmless-but-annoying category of childhood skin rashes. Ringworm (tinea corpus), occurs on the body. Athlete's foot (tinea pedis) occurs on feet, and Jock itch (tinea cruris) occurs in the groin area.

The name "ringworm" comes from one of the typical appearances of a dermatophyte rash. Often, there is a pinkish, slightly raised ring around an oval patch of flesh or light-pink colored, slightly scaly skin. Sometimes the patch is slightly itchy, but not as itchy as allergic reactions like insect bites.

Diagnosis

Your child's doctor diagnoses the rash by examining your child's skin. To treat the rash, apply the recommended antifungal medication until the rash is gone for at least 48 hours (about two to three weeks duration). Clotrimazole (brand name Lotrimin -NOT Lotrimin Ultra) is over-the-counter and is applied twice daily. You will find it in the anti-athlete's foot section, but you can apply it to skin on any part of the body.

On the scalp, ringworm causes hair loss where the rash occurs and treatment is not so straightforward.

On the scalp (tinea capitis), ringworm causes hair loss where the rash occurs and treatment is not so straightforward. Often the area has tiny broken hairs and some scale. Ringworm on the scalp requires a prescription oral antifungal medication for several weeks. The fungus on the scalp lives not only on the skin, but also in hair follicles. So, topical antifungals fail to reach the infection. Your doctor will also suggest a shampoo which will not kill the fungus, but will temper any spread.

Sometimes a specimen is sent for lab testing- one part called a KOH stain comes back quickly, but is not definitive. The fungal culture is a better test but can take several weeks to return.

Spread

Dermatophytes generally spread through direct contact. Wrestling teams are often plagued with this infection. The furry friends your child sleeps with may also carry ringworm. If Fido, the dog, or Fi-fi, the cat has patches of hair loss, take them to the vet for diagnosis. Less often, dermatophytes are picked up through indirect contact such as walking barefoot on locker room floors.

If there is no improvement after a week or so of treatment, have your child's doctor reexamine the rash. Other diagnoses we keep in mind include eczema and granuloma annulare. And if the rash continues to enlarge and is flat, we consider Lyme.

Kids are allowed to attend school and daycare with ringworm once treatment is started, but wrestlers are advised to treat for 72 hours on skin and 14 days if on the scalp prior to returning and to cover any rash.

Luckily the fungus among us rarely gets humongous!

Naline Lai, MD and Julie Kardos, MD

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How to socialize your preschool



Emma's parents were hopeful that Emma could start preschool this winter, but with the slow COVID-19 vaccine roll out, Emma's parents chose to keep her home just a little longer. Grandparents come over every day, but three-year-old Emma does not have interaction with other children. Her parents are confident that they can teach Emma shapes and numbers, but are concerned about her social and emotional development. For those in the same shoes as Emma's parents, we share ways to socialize your preschooler without preschool.

Preschool has not changed much since you were three or four years old. There is still circle time, show-and-tell, and cubbies to hang little coats in. And games, lots of fun and games. But as early childhood educators will tell you, there is a method to their madness. In particular, the fun and games encourage social and emotional growth.

Fun and games

Unlike a two year old, three and four-year-old children are capable of turn-taking and rule-following. These skills help

preschoolers form friendships and learn to get along with others. At home, parents can teach their preschoolers simple games that involve turn-taking. Don't be tempted to bend the rules to allow your child to win every game of Candy Land®. Whether you lose or win, you will model "good winning" and "good losing." For instance, if you win, say "Good game!" If you lose, say "Oh, I lost, but I had fun playing!" Fast forward a few years and you can avoid having the kid who is a poor sport and can't move on from a loss.

Whenever you teach a new life skill, take turns. For example, as you teach them to set the table, say "I put the fork next to this plate, now you can put the fork next to THIS plate," Or, as you teach them to brush their teeth, take turns brushing. This will teach taking turns as well as also ensure shiny bright teeth.

Use manners

Children who say "Yes, please!" and "No, thank-you" endear themselves to others. When you teach your child manners, say "thank you" to your child. By saying "Thank you for putting your cup on the table and not the floor," and "Thank you for putting your clothes in the hamper" and "Thank you for helping me clean up this game," you build their confidence, and you model how to speak to others politely. Since children this age like to please their parents, your praise will motivate them to repeat the behavior.

Teach them to use their manners even with family members. When you teach that even family members deserve gratitude, fast forward to the teen years and you will have a teenager thanking you for waking up early to make them pancakes in the morning.

Preschoolers are learning how to temper their tantrums

To help them with emotional development, label their negative emotions as you see them arise. For example: "You are so frustrated that the toy is not working correctly," or "You are sad because I said we cannot play outside right now." This allows them to feel what they feel and legitimizes them by giving their feelings a name. In the example above, if they lose the game of Candy Land® and start to tantrum, you can say, "You are disappointed that you lost this game, but we had such fun together. You might win the next game! Thank you for playing with me."

Resist the temptation at home to soothe emotions with food or cups of liquid. In times of calm, be sure to read books about emotions, or talk about the emotions of characters in books. Talk about how to display anger and frustration in acceptable ways. Except for the binkie suggestion, this post applies to preschoolers as well as toddlers who find cooling down after a tantrum difficult.

Show and tell

Show and tell gives kids the confidence to express themselves in front of others. Virtually connect with a cousin or other relatives and have your child talk about what they brought. Have your child reciprocate by listening and asking one or two questions to the others in the group. The internet is full of themes and suggestions for items.

Fast forward to elementary school, middle school or high school and your kid will be breezing through their powerpoint slide deck in front of an entire classroom of kids.

Kids love structure to their day

The purpose of circle time, a hallmark of the young child classroom experience, is to give order to the day. Circle time organizes kids, and relieves anxiety. Just as teachers do, at the start of the day, review the day's plan. Keep in mind that

children who are 3 and 4 cannot keep more than 3 or 4 items in mind at one time.

Circle time organizes kids, and relieves anxiety

For example, say during breakfast, "After breakfast, you can play with your puzzles while daddy cleans up, then we will play out in the yard, and then we will read books." Then after you read books, say, "Now that we are done reading, you can have time for free play while daddy does (some other task they need to do), then we will do laundry together and then have lunch." Side note: young children can empty a hamper into a basket, they can sort and fold clothes, and they can turn on and off the washer and dryer under your guidance. They enjoy mimicking you and like to spend time with you. Take advantage of that!

Other useful tools are the color alarm clocks (google to find a large assortment) which use colors to mark the passage of time. Do-it-yourself felt boards have pictures of weather or activities. While your child will not understand a full calendar, they will be happy to populate a "today" felt board and "tomorrow" felt board with activities.

Continue to pause throughout the day to remind your child what they just did and then a couple of things that come next. You will find that your child's day runs smoother than days without a plan.

A word about same-age friends

If you can find one other family with a child the same age as your preschooler who is quarantining the same way your family is, consider setting up playdates for the two children. In the age of this pandemic, it is best for playdates to occur outside while wearing masks. Be sure to cancel if anyone has any illness symptoms or was exposed to anyone with COVID-19.

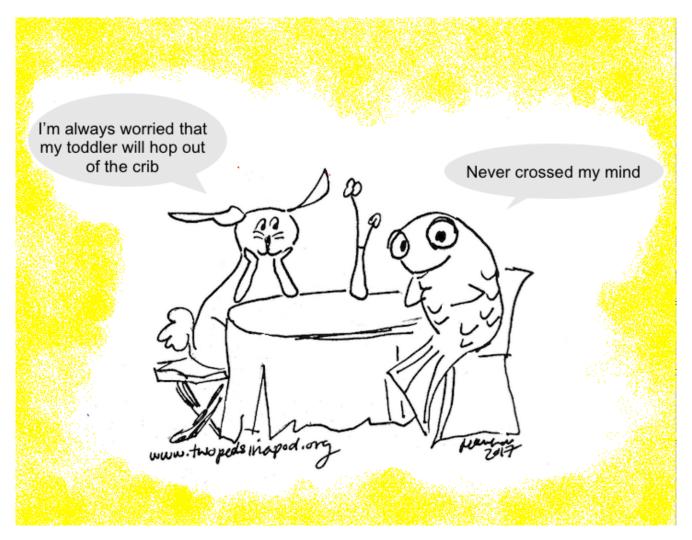
Unstructured play with one other child is just as valuable as

a classroom full of others for your child to practice and enjoy socializing. Eventually the pandemic will end and you will feel safer sending your child to school. In the meantime, use these tips to help socialize your preschooler even when they are not in the classroom.

For more on three year olds, check out our post "Three's the magic number" and this one that highlights four-year old development.

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How to move your child from crib to bed



A family asked, "My toddler figured out how to climb out of the crib! How do I transition him into a bed?"

Some kids never climb out of their cribs, but sometimes families need the crib for a new sibling. If this is the case, consider if you really need the crib right away. Using a bassinet for the new baby allows the big brother/sister to get used to having a baby around. Many older siblings regress after the birth of a sibling and it can be useful to keep the older one in a crib for just a little bit longer, then use the new bed as a reward for "helping" or as a token of increased status.

The scariest part of putting your

child into a bed is that your child now has access to his entire bedroom.

So if your child is NOT yet climbing out of the crib, do not rush to transition him out. You first need to childproof the bedroom. Crawl on your hands and knees to see what you can reach. For his safety, gate him into his room or keep the door closed. You may also need to gate the steps or gate a hallway to prevent him from wandering into more dangerous rooms, such as the kitchen, in the middle of the night. We know one family who found their child crawling around on the kitchen counters one morning. Know that open or closed bedroom doors likely do not impact potential fire safety. It is far more important make sure your smoke detectors work.

If you have no reason to break down the crib and your child goes to sleep easily in it, there is no harm in keeping him in his crib. However, once a child is able to climb out, a child is able to fall out. So....time to get out. For many toddlers, the ability to throw a leg over the side of the crib occurs around two years of age or when the toddler reaches three feet tall.

If your child is potty trained at this point, he will find it easier to get to the bathroom at night if he is in a bed rather than a crib. On the other hand, many kids who are fully potty trained during the day continue to wet the bed for years, so don't wait for dry overnight diapers to put your child into a bed. Just protect the bed mattress with a water-proof liner until your child masters night time dryness.

How to start the transition?

You can talk up sleeping in a big boy/big girl bed "just like Mommy and Daddy." Let your toddler pick out sheets or buy him ones you know he will love. For example, choose sheets in a favorite color, or with favorite characters. Supply a pillow and blanket. But if he is used to a crib without bedding, expect the blanket or pillow to end up off the bed. You might want to continue warm pajamas until a blanket stays on. Sometimes kids want a small "kid's sized" blanket, but sometimes a larger blanket is more apt to stay on the bed.

While kids are often excited by their new bed, remember that toddlers are creatures of habit.

Their excitement might lead them to nap enthusiastically in the bed but then they may want their crib at night. Or they might fight their naps now- remember that many children give up napping between the ages of 2-5 years. If space allows, consider leaving the crib set up for the first week of sleeping in the new bed, then break down the crib once you have several successful naps and overnights in the bed.

Some kids may invite a "friend" or two into his bed.

Some sleep with stuffed animals, a pacifier, or in the case of one of Dr. Kardos's kids, a soft Philadelphia Eagles football. Many kids fall asleep with toy cars clutched in their hands. If these friends help your child sleep better, then allow the slumber party.

Falling out of bed is common. For his first week in a bed, Dr Kardos's first son was always found sleeping peacefully in the

middle of his room on the carpet after they tucked him into his bed for the night. You can place a carpet or pillow next to the bed so when the inevitable falling overboard occurs, your child has a softer landing.

You could shorten the distance to the ground by placing a mattress, or a mattress plus the box spring, directly on the floor.

Then when your child has gone for a few weeks without falling off the mattress, "build up the bed" onto the standard bedframe.

Alternatively, your child can sleep in a bed with side rails. Note that portable side rails are made for use only on adult beds, NOT for toddler beds or bunk beds. You can find guidelines for preventing injury from side rails here. Rails are designed for children aged two to five years who are capable of getting in and out of an adult bed by themselves. According to safety guidelines published by Consumer Reports in 2010, "Be sure they (the rails) fit tightly with no gaps between the mattress and the rail, so that your child can't get stuck. Leave at least 9 inches between the bed rail and the footboard and headboard of the bed." The wall is not a bed rail substitute because a child can get trapped between the wall and the mattress.

Decide if you will teach your child to call out to you or to teach him to come into your bedroom if he

needs you in the middle of the night.

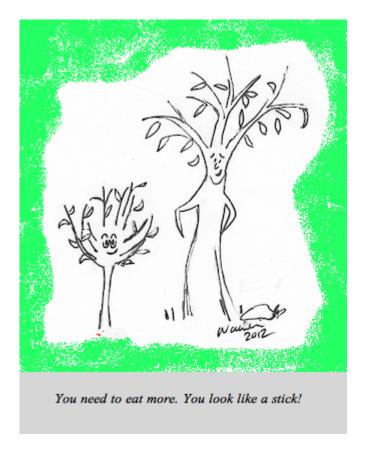
For everyone's safety, be sure no clothes or clutter between his bed and yours can cause tripping in the dark. A night light in the bathroom helps as well.

If your child pops out of bed immediately after tucking him in, teach him how to self-calm and fall asleep in his own bed. Continue to walk him back to bed in a caring manner with minimal conversation besides: "I love you, good night."

Now your child's bedtime story will really include a bed! (For instance click here)

Julie Kardos, MD and Naline Lai, MD □2021 Two Peds in a Pod□

High calorie foods for underweight children



Your child's pediatrician charts your child's height and weight in order to determine whether he is growing appropriately. Some kids are underweight. These kids use more calories than they take in.

Here are ways to increase calories. Remember, it's not as simple as demanding that your child eat more of her noodles. Instead of trying to stuff more food into your child, increase the caloric umph behind each meal.

Make every bite count:

- Mix baby cereal with breast milk or formula, not juice or water.
- After weaning from formula or breast milk at a year of age, give whole milk until two years, longer if your pediatrician recommends this. Cow's milk has more calories than rice, oat, or nut milks.

- Add Carnation Breakfast Essentials to milk.
- Add Smart Balance, butter, or olive oil to cooked vegetables, pasta, rice, and hot cereal.
- Dip fruit into whole milk yogurt
- Dip vegetables into cheese sauce or ranch dressing
- Offer avocado and banana over less caloric fruits such as grapes (which contain only one calorie per grape).
- Cream cheese is full of calories and flavor: smear some on raw veggies, whole wheat crackers, or add some to a jelly sandwich.
- Peanut butter and other nut-butters are great ways to add calories as well as protein to crackers, sandwiches, and cereal.
- If your child is old enough to eat nuts without choking (as least 3 years), a snack of nuts provides more calories and nutrition than crackers.
- For your older child, feed hardy "home style foods." Give mac 'n cheese instead of pasta with tomato sauce.
- In general, any form of meat (chicken, fish, or other meat) is more calorically dense than most other foods.
- Mix granola into yogurt.
- Give a hard boiled egg or pieces of cheese as a snack.
- For those who don't like plain egg, try French toast!
- Give milkshakes in place of milk (no raw eggs!).
- Choose a muffin over a piece of toast.
- Butter their waffles and pancakes before serving.

Have your child's pediatrician exclude medical reasons of poor weight gain with a thorough history and physical exam before you assume poor weight gain is from low caloric intake.

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When will kids get a COVID-19 vaccine?





As the year 2020 comes to a close, we are grateful, as pediatricians caring for your children, that we received our first doses of COVID-19 vaccine.

There is hope! COVID-19 vaccines have arrived and more than two million adults have safely received a vaccine. Now that vaccinations are reaching adults, many families wonder when COVID-19 vaccines will be available for their children.

The Centers for Disease Control and Prevention (CDC) has recommended a stepwise approach to vaccinating everyone, starting with healthcare workers and adults most vulnerable to contracting COVID-19, then eventually providing vaccinations to everyone. Children under the age of 16 years will likely be last to receive vaccines.

Children under 16 years

Of the two Food and Drug Administration approved COVID-19 vaccines in the United States, Pfizer-BioNtech's vaccine is authorized for ages 16 and up and Moderna's vaccine is authorized for those ages 18 and up. For kids 12 years old and up, trials are still ongoing. Pfizer-BioNtech began trials in October and Moderna began earlier this month. With this in mind, vaccines for tween and teens will probably not be available for months. Since trials have not started for younger children, expect vaccine availability to take even longer.

If you are interested in trial enrollments check here: Moderna's trial and Pfizer-BioNtech.

For now, the vaccination of adults may provide some protection to children until they too can receive the vaccine. Until then, we will continue to wear masks, distance, and wash hands often.

Please stay vigilant with your children. As some of our patients have learned all too painfully, best friends and close relatives can innocently carry the virus causing COVID-19. Remember, COVID-19 can look like a common cold. Although only one percent of children who contract Sars-Cov-2, require intensive care, the disease has caused 154 deaths and more than 7,500 hospitalizations as of Dec. 3 for those 19 years old and younger in the United States.

We are optimistic that in 2021, as more and more folks get vaccinated, we will move closer to containing COVID-19.

Wishing you all a Happy and HEALTHY New Year in 2021!

Dry, cracked hands: treatment and prevention



In addition to pocket-sized hand sanitizer, I recently got my kids pocket-sized moisturizer to help their dry, cracked hands.

Between diligent handwashing and falling temperatures in Pennsylvania, we are experiencing annoying, itchy skin changes. We've blogged about this before-Dr. Lai and I are used to washing our hands twice for every patient we see in the office-once before examining them and once again afterward. I have a jar of moisturizer on my desk that I frequently dip into between patients. Now I remind my kids to do the same between hand washings.

Here are some remedies to help treat dry, cracked hands:

Petroleum jelly, such as Vasoline or Aquaphor, works great to moisturize and heal cracks in the skin. Apply at bedtime. Ointments are greasy, so during the day your kids might prefer using a fragrance-free moisturizing cream such as CeraVe or Aveeno.

- If itchy, add hydrocortisone 1% ointment to your kids' daily or twice daily hand-care regime. Sometimes, for kids with underlying eczema, pediatricians prescribe a stronger type of hydrocortisone to help with more severe skin cracking and itching from dryness. Ointment tends to sting less than cream.
- Mix equal parts of moisturizing ointment and hydrocortisone ointment, smear, and put socks over hands to lock in moisture. This works best as a bedtime routine to help decrease the subconscious scratching and picking that occurs during sleep.
- Also stop the itch by giving your child an oral antihistamine such as cetirizine (Zyrtec).

Of course, an ounce of prevention is worth a pound of cure. Here are ways to prevent dry, cracked hands:

- Encourage your children to wear gloves or mittens when outside in cold weather. This shields skin from drying out.
- Apply moisturizer to hands before leaving the house every day.
- Keep moisturizer next to all sinks in the house to remind your kids to moisturize after handwashing. Their hands do not have to be completely dry before applying the moisturizer- in fact, moisturizing cream can better get into skin when skin is damp.
- In contrast, if using hand sanitizer, wait until the skin is dry before applying the moisturizer.
- Wash hands in cool or lukewarm water, not hot water. Just like hot water washes oil off a frying pan, hot water will wash off your skin's natural oils and leave

them drier.

Remember, lizard skin is for lizards, not for your children!

Julie Kardos, MD and Naline Lai, MD

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