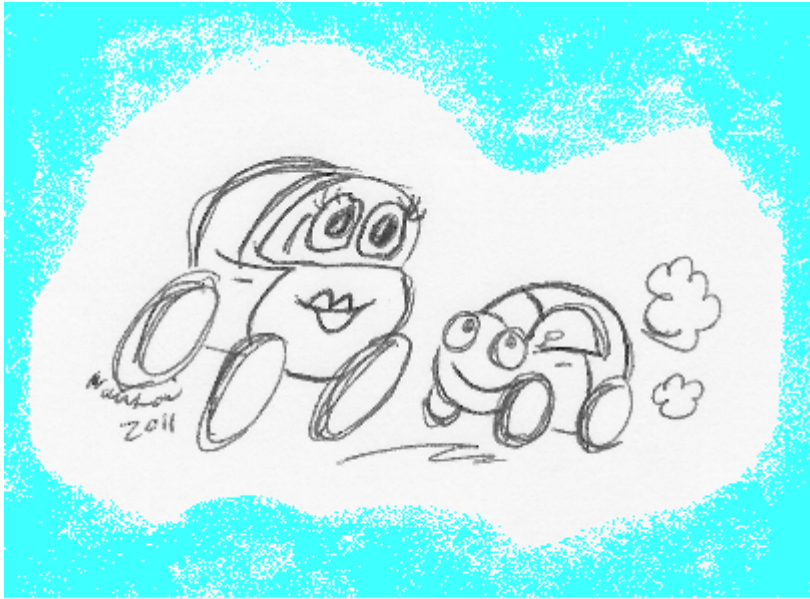


# How to help your gassy baby



*"My, my you are a little gassy today"*

Do you have a gassy newborn? Please read our tips on how to help your gassy baby in the Children's Hospital of Philadelphia's Health Tip of the Week.

Trust us, it's a gas!

Julie Kardos, MD and Naline Lai, MD

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## Is your college kid homesick?



Now that the excitement of the first weeks of college have gone by, your first year college student may be homesick. What can a parent do? We point you to last year's timeless post which is still relevant today.

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## PLAN AND PREPARE: TIPS FOR A POSITIVE SCHOOL YEAR



change your mindset (attribution unknown)

As the lazy, hazy days of summer wound down in August, the “Back to School” commercials began in full force. TV and print advertisements from major retailers showed smiling students and adults buying colorful backpacks and school supplies . This is in contrast to the past two years when TV brought no shortage of bad news about the global pandemic, its impact on education, and news about horrific school shootings. It’s not just a commercial, we do have the ability to help our kids move through this school year with a positive mindset.

Now that we are into September and the school year is underway, one of the most important things we can do with our students is **talk with them**. Engage in dialogue about what they are excited about, what concerns they have, and their overall thoughts and feelings about the upcoming year. Nervousness, excitement, anxiety, and anticipation can make up a child’s emotional mix at the start of the year. Open conversations

will help identify and address any negative thoughts or feelings that our kids may harbor. Conversations will help our students **focus on strengths and internal and external resources** .

Remind them of times when they showed grit, recovered from a poor grade, navigated a tricky peer situation, or made a new friend. Revisiting the past will reinforce that those skills are still present inside of them and ready to be used when needed. For teens, often you will help them by simply lending an ear and listening to their concerns.

I also believe in teaching children the two P's: **plan and prepare**. This can apply to different parts of school – the practical and concrete, such as establishing new routines, using a new planner for time management, or designating a space to complete homework; or the conceptual, such as sitting with a different group at lunch or knowing and talking about the importance of the junior year of high school. When we feel prepared, we feel more confident.

*We constantly communicate with our children, both verbally and non-verbally*

As parents, it is also important to have an awareness of how our own feelings affect our children. We constantly communicate with our children, both verbally and non-verbally. Called emotional contagion, we transfer not only words, but feelings to our children. If we feel anxious about the school year, our children will pick up on that; conversely, if we **portray confidence**, our students will feel confident.

Recognize that kids are by nature resilient, although some more than others. Thanks to neuroplasticity – our brain's fascinating ability to reorganize itself – we can continue to

dust off the residue of COVID, navigate through all of the negativity, and keep things optimistic, constructive, and encouraging over the next nine months.

Here's to a positive school year!

Dina Ricciardi, LCSW, ACSW

*—We thank guest blogger Dina Ricciardi for her continued contributions to Two Peds in a Pod on the mental health aspects of parenting. Drs. Kardos and Lai*

Ricciardi, LCSW, ACSW is a psychotherapist in private practice in Doylestown, PA who works with children, teens, and adults. Her areas of expertise include anxiety, depression, disordered eating, and ADHD. She has studied at the Family and Play Therapy Center in Mt. Airy and is a graduate of the Philadelphia Psychotherapy Study Center. Her full profile is available on the Psychology Today Therapist Finder and on LinkedIn.

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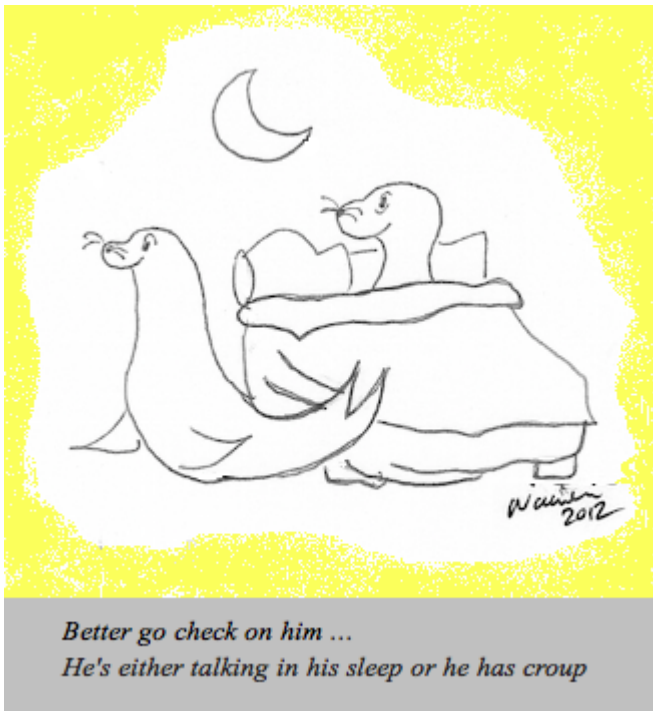
## All about lice





Lice- unpleasant guests at the sleepover party  
Itching to learn about lice? Check out our recent contribution  
to The Children's Hospital of Philadelphia's Health Tip of the  
Week!

# Croup



Croup is an often-surprising middle-of-the-night malady that produces a barky seal-like cough in children who seemed just fine at bedtime.

Any virus that causes cold-like symptoms of runny nose, cough, runny eyes, and sometimes fever, can also cause croup. Think parainfluenza, influenza (flu), RSV, adenovirus, rhinovirus, and now Covid-19. Any of these viruses can land in a child's larynx, or voice box, and cause hoarseness, barky cough, and a weird guttural sound on breathing inward, called "stridor." Croup is the name we give the constellation of symptoms, not the name of the virus that causes it.

An adult with the same exact illness would sound hoarse, but

would likely not have the strange barky cough or noisy breathing.

We have a great podcast on this subject, but for those who prefer to read medical advice, please read on.

## **Ways to help your child when they wake up with croup**

**Stay calm.** Children are frightened when they wake up coughing and find it hard to take in a deep breath. Parents are often frightened too. Even if you are worried, exude calmness in order to help your child settle down.

**Create a rain-forest like environment.** Go into the bathroom, run a hot shower, and hunker down with a book to read to your child. The steam helps shrink the uncomfortable swelling in the voice box. Wait for about 15 minutes for the barky cough and the harsh guttural breathing to subside.

You can also recreate a misty environment by cranking a humidifier in your child's bedroom. To avoid the risk of burns, we recommend a cool mist humidifier, not a hot water vaporizer. The temperature of the mist does not matter; it is the mist itself that children with croup find soothing.

**Go outside with your child.** Wrap them in a blanket and head into the cool night air. This trick works as well as the steamy environment trick. Each winter we hear of our patients with croup who's parents put them into the car to drive to the nearest Emergency Department, only to find that by the time they arrive, their child's croupy cough and noisy breathing have resolved.

**Treat any sore throat pain.** Offer your child acetaminophen



(brand name Tylenol) or ibuprofen (brand names Motrin, Advil) because easing the pain calms your child with croup and helps them to breathe easier.

## When to take your child with croup to the emergency department

Most children with croup can be managed at home, but some need extra medical care. Head to the nearest emergency department or call 911 if your child has these symptoms:

- **Turns blue or pale with coughing.** Turning red is ok, but turning blue or pale means your child needs oxygen therapy.
- **Is unable to swallow, drools uncontrollably, refuses to drink.**
- **Has labored breathing.** See this link for example of what this can look like. If you see your child's chest or belly moving in and out with every breath, you see your child's ribs with breathing, you see their nostrils flare with every breath, or you hear that guttural noise (stridor) with every breath inward even if your child is calm, then your child needs emergent medical care
- **Shows a change in mental state.** If your child fails to recognize you, seems too lethargic to respond appropriately to your care, or your "parent instinct" tells you something is wrong with your child's thinking, they may need emergent care.

Strangely, a scary night of croup can be followed by a calmer day. Your markedly improved child may show merely some mild hoarseness or mild stuffy nose. Be aware that your child might have another night or two of croup symptoms, even after they barely cough during the day. So make sure your child and you take a nap in preparation for another possible rough night.

## When to expect improvement

Most children with croup improve after two or three nights. Then, they develop more classic “cold” symptoms of runny nose and more “normal” sounding cough. Because Covid-19 virus is becoming a more common cause of croup, have your child tested so you know how long they need to stay home from school or daycare.

Talk to your child’s pediatrician if your child’s seal-like barky cough or cold symptoms last more than a week without improvement. Call sooner if your child seems to worsen or you have further concerns about your child. Know that some children are “Croupers” and tend to get the same croup symptoms with almost any cold virus. But take heart, even the croupers will be less croupy over time. It’s fairly uncommon to see a grade-school aged child with croup. Until then, you never know when you’ll hear a little seal in the middle of the night.

Julie Kardos, MD and Naline Lai, MD

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## Children’s ibuprofen or acetaminophen (aka the great Motrin vs Tylenol debate)?



Photo courtesy of pixabay.com

Have you wondered, when your child gets a headache or suffers a sprained ankle, if you should give your child ibuprofen (e.g. brand names Motrin or Advil) or acetaminophen (e.g. brand name Tylenol)? What about for those middle-of-the-night fevers? Does it matter which one you give?

This post address these very questions.

Julie Kardos, MD and Naline Lai, MD

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## How to start baby food



Back by popular demand: how to start baby food! Enjoy our podcast and learn when to feed, how to feed, and what to feed your hungry baby when they join you at the family table.

You can also listen to our podcasts here, as well as on any major streaming service.

Julie Kardos, MD and Naline Lai, MD

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## **“Mom, I Want to Come Home”- Supporting your Homesick**



# College Student



Navigating the challenges of college

*"My daughter called me from the stairwell of her dorm crying."*

*"My son is texting me and wants to come home for the weekend. What would you do?"*

*"Does anyone else have a kid who is struggling?"*

These are quotes from actual parents, posted in online forums for the collegiate Class of 2025. After the stressful application process during the pandemic, the preparation, the

move-in process, and the emotional goodbyes, many adults are blindsided by the homesickness that their newly minted freshmen may experience. This issue is not just limited to freshmen. Students who spent last year doing college virtually may be away from home for the first time. Seeing our children unhappy after so much eager anticipation leads to worry, sadness, and a general uncertainty among us parents about what to do. This bodes the question: How do we best support homesick kids?

A recent article written by Amy Baldwin, founder of Higher Ed Parent, talks about what she describes as “the three pillars of a satisfying and successful college experience” – Emotional Support, Social Support, and Academic Support. Having worked with many teens and college students in my practice, I agree that these areas are all essential for a smooth transition to and overall positive experience of college life. While we want to foster independence in our young adults, we most likely will need to guide them through building each of these pillars.

If you have a struggling college student, ask the overarching question: *“Is she/he tethered to the school community?”* Are they having a positive enough experience with their roommate(s) and meeting other students in their living environment? Are they connecting with other kids in their classes? Are they comfortable reaching out to a peer, professor, or TA if they need academic support?

## **Involvement**

Involvement is also very important. The college years can provide so many opportunities to continue to pursue existing interests, or to try something new. My own college freshman decided out of the blue to try out for his University’s Club

Volleyball team. At the height of 5'8" and having never played organized volleyball in his entire life, I almost fell off of my chair. But I was also happy that he, encouraged by a friend who had also never played, was willing to put himself out there and just see what would happen. Whether it is sports, organized groups, community service, a campus job, or even the Chocolate Milk Club (yes, that is a real thing at many colleges and universities), it is essential that students find and explore things that they enjoy doing. Activities will connect them with peers who have similar interests.

## **Validate feelings**

While helping their student to establish these pillars, parents should validate their student's feelings. Sometimes this means just hearing them out without making a ton of suggestions. We all need to vent from time to time and simply be heard. When students are in a more receptive mindset, parents then can help set small goals and make sure that their child is familiar with on-campus resources. Daily check-ins may be essential; an AM "Good morning, I love you, you got this!" type of text can go a long way. An extra parental visit to campus or a student trip home may be helpful, but avoid too many visits home. This can feed into the problem and prevent the student from establishing a solid connection to their school. It is also important to be on the lookout for signs of major adjustment difficulties or depression, which can be serious and may require more structured, frequent, and higher-level interventions.

Sending a child away to college is an adjustment for everyone involved. If a student you care about is struggling, remind them that you believe in them and their ability to get through the challenge. In time, and with proper support, your student will not only survive but thrive. Concern about hearing from them too often can shift to a wish that you would hear from them more frequently –which would not be a bad problem to have.

What Do I Do If My College Student Is Homesick?

<https://vtfamilies.campusesp.com/posts/865>

Higher Ed Parent: Home

What Are the Warning Signs of Depression in College Students?

***Dina Ricciardi, LCSW, ACSW***

***Licensed Clinical Social Worker and Psychotherapist in Private Practice***

*—We thank guest blogger Dina Ricciardi for her continued contributions to Two Peds in a Pod on the mental health aspects of parenting. Drs. Kardos and Lai*

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# **My child has a fever: what to do**





Photo by Victoria Borodinova. Pixabay

Wondering what to do when your child has a fever? With schools and daycares now back in full swing, many more illnesses are circulating. Please read our fever advice in the Children's Hospital of Philadelphia Health Tip with updates on what to do when your child has a fever.

Be well, wash your hands, and wear your masks!

Julie Kardos, MD and Naline Lai, MD

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## How to remove tiny splinters



Photo credit: Dr Vijayvargiya



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 or 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

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