



North Austin Pediatrics, PA

Austin (512) 491-5125 Cedar Park (512) 259-0900 Leander (512) 260-0101

Travel Recommendations

Information: Pull up your destination on www.cdc.gov and check on Travelers Health for specific information on your destination.

Diarrhea:

Diarrhea-associated gastrointestinal illness is among the most common travel-related problems affecting children. Young children and infants are at high risk for diarrhea and other food and waterborne illnesses because of limited pre-existing immunity and behavioral factors such as frequent hand-to-mouth contact. Infants and children with diarrhea can become dehydrated more quickly than adults. For young infants, breastfeeding is the best way to prevent food borne and waterborne illness. Travelers should use **only purified water** for drinking, brushing teeth, mixing infant formula, foods, hand washing, cleaning pacifiers, and toys that fall to the floor or are handled by others. **DO NOT** allow your child to drink unpasteurized milk or eat unpasteurized cheeses.

Probiotics: There is some evidence that taking probiotics may prevent diarrhea.

	Culturelle (Lactobacillus GG)	Florastor Kids (S.bouardii lyo)
6-12 mo.	½ capsule per day, sprinkled on food	1 packet twice a day
> 1 year	1 capsule per day, sprinkled on food	2 packets twice a day

****Double the dose if your child has diarrhea****

Dehydration:

The greatest risk to the infant with diarrhea and vomiting is dehydration. Adults traveling with children should be counseled about the signs and symptoms of dehydration and the proper use of World Health Organization oral rehydration solutions ("ORS"). Immediate medical attention is required for an infant or young child with diarrhea who has signs of moderate to severe dehydration, bloody diarrhea, fever >101.5°F (>38.5°C) or persistent vomiting. ORS should be provided to the infant by bottle or spoon. Rice and other cereal-based ORS, in which complex carbohydrates are substituted for glucose, are also available and may be more acceptable to young children. You can carry packets of Pedialyte® oral electrolyte maintenance powder and mix with 8oz (240mL) of purified water.

Acetaminophen (Tylenol®) Dosage Chart

Choose the dose closest to your child's weight and give every 4-6 hours as needed.

Weight		Dose 15 mg/kg	Oral Suspension 160 mg/5ml	
pounds	kilograms	mg	ml	teaspoons
6-11	2.7 - 5.3	40 mg	1.25 ml	$\frac{1}{4}$ tsp
12 - 17	5.4 - 8.1	80 mg	2.5 ml	$\frac{1}{2}$ tsp
18 - 23	8.2 - 10.8	120 mg	3.75 ml	$\frac{3}{4}$ tsp
24 - 35	10.9 - 16.3	160 mg	5 ml	1 tsp
36 - 47	16.4 - 21.7	240 mg	7.5 ml	1 $\frac{1}{2}$ tsp
48 - 59	21.8 - 27.2	320 mg	10 ml	2 tsp
60 - 71	27.3 - 32.6	400 mg	12.5 ml	2 $\frac{1}{2}$ tsp
72 - 95	32.7 - 43.2	480 mg	15 ml	3 tsp

Ibuprofen (Motrin® or Advil®) Dosage Chart

Important: Do not give to infants under 6 months of age.

Choose the dose closest to your child's weight and give every 6-8 hours as needed.

Weight		Dose 10 mg/kg	Concentrated Drops 50 mg/1.25 ml	Oral Suspension 100 mg/5 ml	
pounds	kilograms	mg	ml	ml	teaspoons
12 - 17	5.4 - 8.1	50 mg	1.25 ml	2.5 ml	$\frac{1}{2}$ tsp
18 - 23	8.2 - 10.8	75 mg	1.875 ml	3.75 ml	$\frac{3}{4}$ tsp
24 - 35	10.9 - 16.3	100 mg	2.5 ml	5 ml	1 tsp
36 - 47	16.4 - 21.7	150 mg		7.5 ml	1 $\frac{1}{2}$ tsp
48 - 59	21.8 - 27.2	200 mg		10 ml	2 tsp
60 - 71	27.3 - 32.6	250 mg		12.5 ml	2 $\frac{3}{4}$ tsp
72 - 95	32.7 - 43.2	300 mg		15 ml	3 $\frac{1}{4}$ tsp

Diphenhydramine (Benadryl®) Dosage Chart

Choose the dose closest to your child's weight and give every 4-6 hours as needed.

Weight	Children's Allergy Liquid 12.5 mg = 5 ml		Chewable Tablets 12.5 mg each	Tablets 25 mg each
	ml	teaspoons	Chewable tablets	tablets
11 - 16	2.5 ml	$\frac{1}{2}$	Use liquid	Use liquid
17 - 21	3.75 ml	$\frac{3}{4}$	Use liquid	Use liquid
22 - 32	5 ml	1	1	Use liquid or chewables
33 - 42	7.5 ml	1 $\frac{1}{2}$	1 $\frac{1}{2}$	1
43 - 53	10 ml	2	2	1
54 - 64	12.5 ml	2 $\frac{1}{2}$	2 $\frac{1}{2}$	1
65 - 75	15 ml	3	3	1
76 - 86	17.5 ml	3 $\frac{1}{2}$	3 $\frac{1}{2}$	1
> 86	20 ml	4	4	2