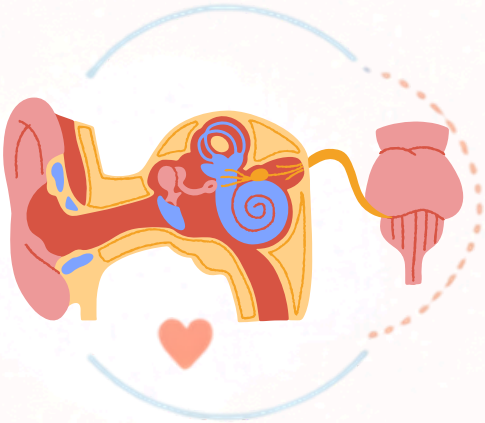
EAR INFECTIONS AND TONSILLITIS IN CHILDREN

A practical guide for parents

Symptoms · When to see a doctor · Home care







Dr. Fuentes

Otolaryngology (ENT) Resident

CONTENTS

1 **Chapter 1:** Decoding the signs: What is hurting my child?

2 **Chapter 2:** Acute otitis media: Recognition and first steps

3 **Chapter 3:** Tonsillitis and pharyngitis: Viruses versus bacteria

4 **Chapter 4:** The emergency traffic light: When should you go straight to the ER?

5 **Chapter 5:** Criteria for seeing the pediatrician or the ENT specialist

6 **Chapter 6:** Waiting kit: Safe symptom relief at home

7 **Chapter 7:** Common mistakes and dangerous remedies: What you should NEVER do

8 **Chapter 8:** The diagnosis: What to expect at the doctor's visit

9 **Chapter 9:** Active prevention and strengthening the immune system

10 **Chapter 10:** Frequently asked questions in the ENT clinic

INTRODUCTION

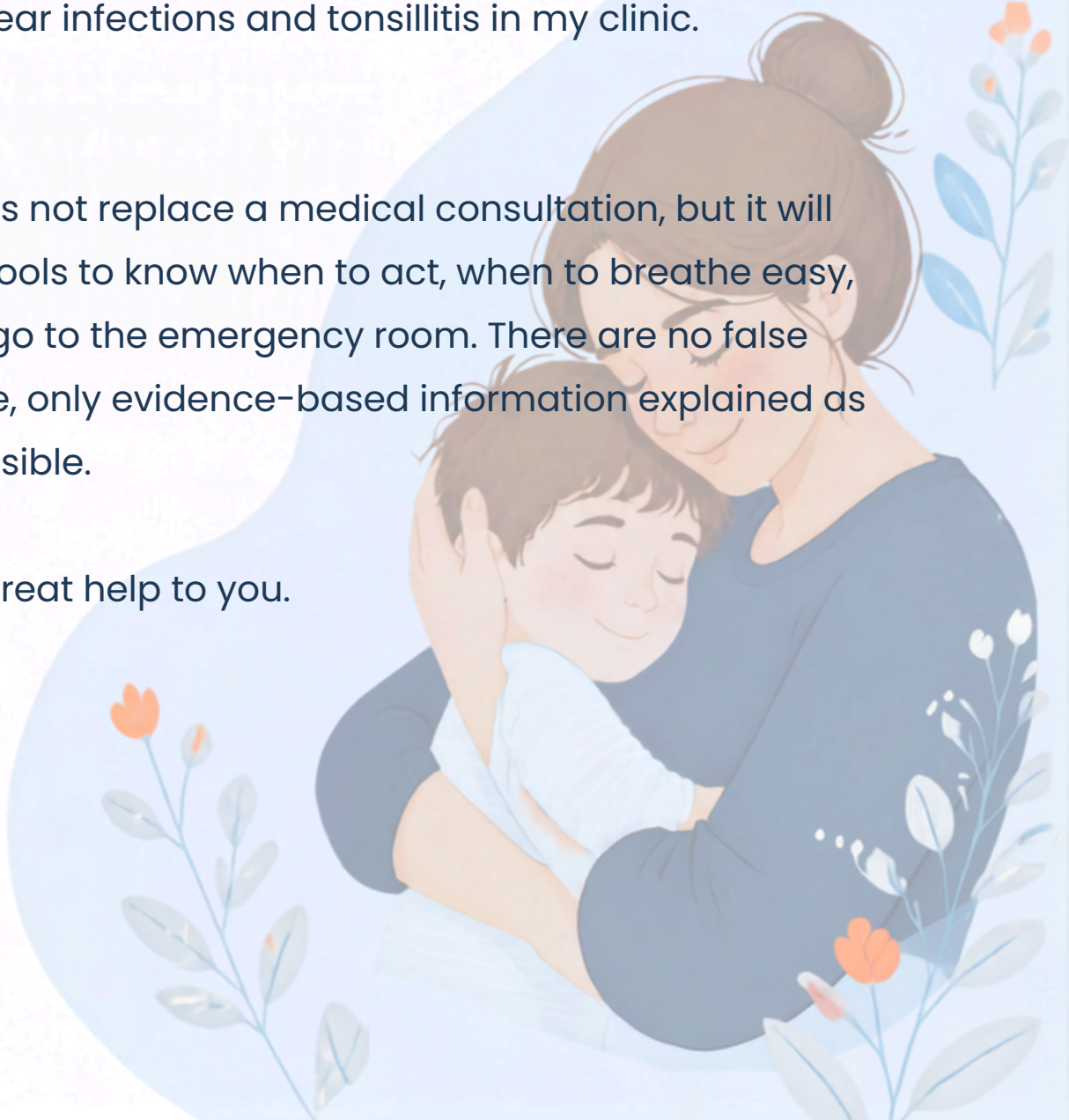
Dear parent:

I know how distressing it is to watch your child cry without knowing what hurts. That uncertainty that keeps you up at night and fills you with questions. That is why I wrote this ebook. I am not a blogger or a seller of miracle remedies. I am a resident physician in Otolaryngology (ENT), and every day I see dozens of children with ear infections and tonsillitis in my clinic.

This book does not replace a medical consultation, but it will give you the tools to know when to act, when to breathe easy, and when to go to the emergency room. There are no false promises here, only evidence-based information explained as clearly as possible.

I hope it is a great help to you.

Dr. Fuentes



CHAPTER 4

The emergency traffic light: When should you go straight to the ER?

One of the hardest decisions is whether to go to the emergency room at midnight or wait for the pediatrician. The great majority of ear and throat infections resolve without problems, but there are warning signs that should not wait.

Go to the ER immediately if you see...

- **High-pitched noise when breathing (stridor):** a whistling sound when taking in air, like a whistle. It means the airway is narrowed.
- **Constant drooling:** your child can't even swallow their saliva, or keeps the mouth open and the head tilted forward in order to breathe.
- **Difficulty breathing:** the ribs show with each breath, the nostrils flare in and out forcefully, or breathing is very fast.

Signs that the ear infection has become complicated

- **Swelling behind the ear:** the bony area behind the ear is red, warm, or bulging, and the ear sticks out away from the head.
- **Crooked face:** one side of the mouth doesn't move when crying or smiling, or an eye won't close.

> **THE EAR TEST**
> Look at your child from the front. If one ear sticks out more than the other, gently touch the bone behind it. If it hurts a lot or feels soft and swollen, go to the ER.

Mood and fever

Behavior says more than the thermometer. See a doctor soon if your child:

- is very sleepy, disoriented, or not responding as usual;
- cries inconsolably for hours, even when held and after pain medication;
- has a high fever that won't come down with the correct dose of fever reducer and looks worse.

Fever by age

- **Under 3 months:** 38.0 °C (100.4 °F) or higher is an emergency, even without other symptoms.
- **3 to 6 months:** above 39.0 °C (102.2 °F), or fever lasting more than 24 to 48 hours: see the pediatrician soon.

FREE PREVIEW

Want the full guide?

WHAT YOU GET IN THE FULL EBOOK

- 10 chapters and 22 pages, written by an ENT resident
- Emergency warning signs: when to go to the ER right away
- Safe home care and the remedies you should never use
- What to expect at the doctor's visit
- Prevention tips and answers to the most common questions

Get the full ebook on Getly.
Educational content only. It does not replace medical consultation.