

2025 SUMMER NEWSLETTER

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Having a Safe Summer

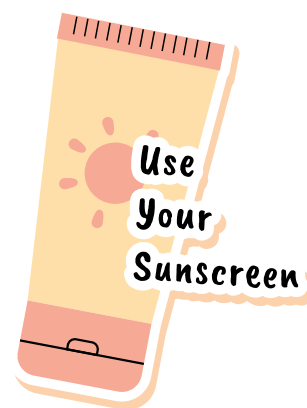
Summer can be a great time for you and your family to travel abroad, take a road trip, or maybe take a quick trip to the beach. Blue Fish would like to remind you of some quick helpful tips that will go a long way in reducing stress and ensuring your family stays healthy while you enjoy your summer.

HELLO
SUMMER

SUNSCREEN & MOSQUITO REPELLENT

Sunscreen

- Use products with broad UVR (UVA + UVB) protection 20 minutes before exposure.
- We recommend you use at least SPF 30 for all children 6 months and older.
- Titanium dioxide and zinc oxide provide the broadest UVR protection.
- Apply appropriate amount and reapply often (at least every 2 hours).
- Babies under 6 months should be kept out of the direct sun. Use wide-brimmed hats and loose fit clothing to shield them. We recommend the use of sunblock only on face, hands, and feet as needed.



Mosquito Repellent

- **Do not** apply mosquito repellent to infants under 2 months of age.
- **Do not** apply over cuts or wounds.
- **Do not** apply to young children's hands or near eyes or mouth.
- **Do not** apply under clothing.
- Whenever possible, dress children in light colored clothing that covers both arms and legs.
- Avoid over application. Use just enough to cover exposed skin and clothing.
- For application to child's face, apply to adult hand and then rub on face.
- Repellent containing DEET (10-30% concentration) is safe for use on infants greater than 2 months old.
- 10% DEET is effective for up to 2 hours of protection.
- 30% DEET is effective for up to 6 hours of protection.
- Picaridin is an effective synthetic alternative that provides protection for up to 2 hours.
- Oil of Lemon & Eucalyptus is an effective plant-based insect repellent that provides protection for up to 90 minutes. Do not use on children less than 3 years old.
- Mosquito netting which can be treated with permethrin or deltamethrin over bedding, strollers, and car seats also provides protection.
- After returning indoors, wash treated skin with soap and water.



INSECT BITE & RASH CARE

Management of Insect Bites/Rash

- For comfort, give a SHORT daily lukewarm bath of 5-10 minutes with mild soap. Aveeno Oatmeal bath treatment is a good choice.
- Apply medicine to the following bites:
 - For the face: Hydrocortisone 1/2 % - 1%** (over the counter) 2x/day. Use this no longer than 2 weeks.
 - For the body: Hydrocortisone 1%** (over the counter) 2x/day. Use this no longer than 2 weeks.
- To keep the bites/rash from becoming infected, apply an **antibiotic cream (OTC)** (such as Neosporin) to the bites 2x/day. The antibiotic cream can be used at the same time as the hydrocortisone cream.
- Keep the fingernails as short as possible. This will reduce injury to the skin from scratching, as well as keep unwanted germs/dirt/debris from being harbored under long nails.
- When the child is itchy/scratching take **Loratadine (Claritin OTC)** or **Cetirizine (Zyrtec OTC)** or **Fexofenadine (Allegra)** as needed.
- **Use of Diphenhydramine (Benadryl) is generally discouraged, unless otherwise directed by a physician.** Newer allergy medications such as Cetirizine (Zyrtec), Loratadine (Claritin), and Fexofenadine (Allegra) are just as effective, work just as quickly, last longer with less frequent dosing, and are safer with far fewer side effects.
- If there are signs of an infected skin lesion, please bring the child in ASAP. Tenderness, whitish discharge or pustule formation, fever (temp. > 100.4F), redness (increasing over time, initially all bites will have some redness), swelling (increasing over time, initially all bites will have some swelling).

Children's Loratadine (Claritin OTC) or Cetirizine (Zyrtec OTC)

Age	Dose
Children 1 year to under 2 years	2.5 mL or 2.5 mg daily, do not take more than 5 mL or 5 mg in 24 hours.
Children 2 years to under 6 years	2.5-5 mL or 2.5-5 mg daily, do not take more than 5 mL or 5 mg in 24 hours
Children 6 years and older	5-10 mL or 5-10 mg daily, do not take more than 10 mL or 10mg in 24 hours

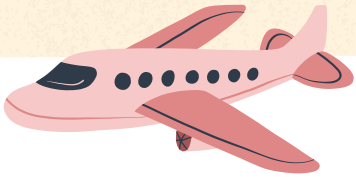
Children's Fexofenadine (Allegra) Dosing

Age	Dose
Children 6 months to under 2 years	2.5 mL once or twice daily, do not take more than 5 mL in 24 hours
Children 2 years to under 11 years	5 mL once or twice daily, do not take more than 10 mL in 24 hours
Children 12 years and older	10 mL once or twice daily, do not take more than 20 mL in 24 hours

AIR TRAVEL & TRAVEL RECOMMENDATIONS

Travel Recommendations

Please note that guidelines are changing regularly. Visit [cdc.gov/travel](https://www.cdc.gov/travel) for the most up-to-date information. Follow all state and local recommendations or requirements after travel.



General Medical Advice

- Prevent fungal and parasitic infections by keeping feet clean and dry. Do not go barefoot.
- Do not handle animals.
- Use sunscreen with an adequate SPF rating (please refer to page 2).
- Use mosquito repellent appropriate for age with either DEET, Picaridin, or oil of lemon eucalyptus. (please refer to page 2).
- Wear proper clothing and headwear to prevent sunburn and insect bites.
- Use bed netting treated with Permethrin or Deltamethrin.

Air Travel

- If possible, use a car seat. Check with your airline since they may require you to pay for an extra seat.
- We do not advise using Benadryl or other OTC medications to help your child fall asleep. Your children should be allowed to fall asleep naturally.
- Parents who use sleep medication themselves should make sure that one adult, who is not under the influence of medication, is always available to attend to the children.
- During takeoffs and landings, try to breast/bottle feed or allow your children to chew on gum. This helps to equilibrate the middle ear pressure and prevents unwanted ear pain.
- Infants should not be fed more than usual because higher altitudes might cause gases to expand and infants may experience distension during air travel.
- Children should have sufficient quiet entertainment for the length of the journey. (taking new toys they haven't seen before always helps.)
- In case your child gets separated during the journey, personal information, including the child's name, address where the family is staying, and contact phone numbers should be put in the child's pocket. This information should not be displayed in plain view.

TRAVEL VACCINES

Vaccines

Ideally, medical preparation for travel should begin 2 months before departure to allow enough time for vaccinations that may require several doses and for initiation of necessary prophylaxis. Infants are at higher risk of becoming ill during travel because of their immature immune system and incomplete immunization status. If the destination poses a high risk of vaccine-preventable diseases and the timing of the trip is flexible, parents should postpone travel with children until they can complete the primary vaccine series and receive one early dose of measles-mumps-rubella (MMR) vaccine (if not already given).



Different areas of the world have health risks that are specific to their region. Please visit the Centers for Disease Control website (www.cdc.gov/travel) to obtain information about these health risks.

If you are traveling to a developing country, please be aware that insects may carry life-threatening diseases (malaria, dengue, filariasis, Japanese encephalitis, Chagas disease, etc.). Barriers including clothing, netting, and insecticides are essential for preventing exposure to insects that can lead to infection. (Please refer to Mosquito Repellent on page 2).

Available vaccines/ prophylaxis (at travel clinics)

- Typhoid
- Rabies
- Yellow Fever
- Japanese Encephalitis
- Measles-Mumps-Rubella (available at Blue Fish)
- Malaria (we write this prescription)

TRAVEL VACCINES

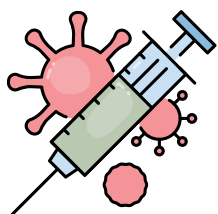
What vaccines or medicines should I get before traveling to my destination?

It depends on where you are going and what you will be doing. Use the destination tool on cdc.gov/travel to find the vaccines and medications you need for your next trip, and schedule an appointment with your doctor or travel medicine specialist at least 2 months before traveling to get recommended or required vaccines and medicines.

What is the difference between routine, required, and recommended vaccines?

- **Routine vaccines** are those that are recommended for everyone in the United States based on their age, health condition, or other risk factors. You may think of these as the childhood vaccines you got before starting school, but some are routinely recommended for adults, like the adult pertussis booster Tdap, and some every year (like the flu vaccine) or every 10 years (like the tetanus booster for adults).
- **A required vaccine** is one that travelers must have in order to enter a country, based on that country's regulations. Yellow fever, meningococcal, and polio vaccines may be required by certain countries.
- **Recommended vaccines** are those that the CDC recommends travelers get to protect their health, even if they aren't required for entry by the government of the country you are visiting. They protect travelers from illnesses that are usually travel-related. For example, a typhoid vaccine can prevent typhoid, a serious disease spread by contaminated food and water, which is not usually found in the United States. The vaccines recommended for a traveler depend on several things including age, health, and itinerary.

Where to get vaccinated:



Passport Health
9601 Katy Freeway, Ste 315
Houston, TX 77024
713-467-6575

International Medicine
Center
Memorial Hermann
Memorial City
9230 Katy Freeway, Ste 400
Houston, TX 77024
713-550-2000

Texas Children's Hospital
Travel Medicine Clinic
Texas Children's Clinical
Care Center
6701 Fannin Street, Floor 17
Houston, TX 77030
832-822-1038

FOOD & DRINK

Food

The most common causes of gastrointestinal infection to travelers are transmitted by fecal-oral route. Although encounters with these pathogens are inevitable, careful attention to hand washing and avoiding unsafe foods can prevent exposure and decrease the intensity of the exposure, which may avert clinical illness.

Hand hygiene is critical and special care must be taken to wash hands with soap and water before meals. Alcohol-based hand sanitizers are effective but should be used in only small amounts, and no more than necessary to avoid ingestion.

Avoid:

- Uncooked foods or vegetables from which the outer skin has not been removed
- Undercooked meat and seafood
- Milk (unless you know it's pasteurized)
- Sandwiches and other dishes topped with lettuce, tomatoes, and onions
- Fruits that have been peeled at outdoor stands because they are often dipped in water to keep them appearing moist
- Sauces placed on hot food because they are often made with raw vegetables

Drink

Travelers must be extra vigilant when it comes to what they drink. Safe water can be bought in sealed bottles. Check that the seal is not broken because local vendors sometimes "recycle" old water bottles and fill them with tap water. If sealed bottles are unavailable, purchase carbonated water.

Water that has come to a rolling boil for at least one minute (longer than three minutes at high altitude) is considered safe. Treating water with iodine kills bacteria and viruses but may not kill all parasites. Water filters remove bacteria and filters with an absolute pore size from 0.1 to 1 micrometer, and those labeled as reverse osmosis remove most parasites such as *Giardia* and *Cryptosporidium* but cannot filter out viruses. Iodine must be added to filtered water to kill viruses. Pregnant women should not consume iodinated water.

Avoid:

- Drinking tap water (not even for brushing teeth)
- Juice and drinks mixed with tap water
- Ice made from tap water



SAFETY TIPS

Water Safety

Water is one of the most ominous hazards your child will encounter. Young children can drown in only a few inches of water, even if they've had swimming instruction. Swimming lessons are not a fool proof way to prevent drowning in young children.

Some observational studies suggest that children ages 1 to 4 may be less likely to drown if they have had formal swimming instruction. The studies are small, and they don't define what type of lessons work best, so the AAP is not recommending mandatory swim lessons for all children ages 1 to 4 at this time. Instead, the new guidance recommends that parents should decide whether to enroll an individual in swim lessons based on the child's frequency of exposure to water, emotional development, physical abilities, and certain health conditions related to pool water infections and pool chemicals.

<https://www.healthychildren.org/english/safety-prevention/at-play/pages/water-safety-and-young-children.aspx>

Bike Safety

A helmet protects your child from serious injury, and should always be worn; and remember, a helmet at all times helps children develop the helmet habit.

When purchasing a helmet, look for a label or sticker that says the helmet meets CPSC safety standards.

Sample First Aid Traveling Kit

Child's health records

- Immunization records
- Chronic medical conditions
- Names and dosages of medications
- Blood type (if already known)
- All allergies

Prescription medications

- Medication for unexpected exacerbation of chronic condition
- Epinephrine pens (if indicated)
- Malaria medication (not for young children, speak with your child's physician if you have questions or concerns)
- Extra pair of prescription glasses

Basic first aid supplies

- Bandages
- Moleskin for blisters
- Water-resistant tape
- Gauze
- Steristrips (for closing wounds)

Over the counter medications

- Acetaminophen or ibuprofen
- Antihistamine
- Antibiotic ointment
- Topical anti-fungal preparation
- Cortisone cream

Skin barrier protection for children in diapers

- Petroleum jelly
- Zinc oxide

Insect repellent

Sunscreen

Thermometer

Oral rehydration packets

Flashlight

SUMMER CHECK UPS & PHYSICALS

Summer check ups & physicals

For well child visits this summer, we encourage you to make your appointment sooner than later. Please do not delay calling to schedule this appointment until the week before school starts; otherwise it is highly likely you will not be seen until after school starts. Here is a reminder of our office policy regarding school and camp forms:

1. You must be up to date on your check ups:

In order for our doctors to fill out a school/camp form, your child must be up to date on his/her checkups. For example, children over two years old must have been seen for a well check within the last 12 months.

2. Forms can be sent to our office: Patients can hand forms to our office staff in person. Forms can also be emailed, faxed, or sent to us by mail. We prefer email when possible.

3. Allow at least one week: Please allow our office at least one week (5 business days) to process and return your form. Forms allowed this lead time will be processed free of charge.

4. Express processing: Forms requiring same-day express processing will be subject to a \$30 per form fee. Please call your office for more information.

If you have any questions or concerns, feel free to contact your respective office.

Health Forms

In the summer, Blue Fish Pediatrics experiences an influx of requests for health forms to be filled out for summer camps and the following school year. So that we can provide the best service to you and the rest of our patients, please plan ahead and try to schedule your well child check-up at least six weeks in advance.

Please allow at least five business days for any school/camp forms you may need. Our office does provide an express service if the form is needed more immediately for a \$30 charge per form.

You can request your child's well check up appointment on Bluefishmd.com

