

Pneumonia/chest infection/ LRTI

Patient information leaflet

If you need this leaflet in a different language or accessible format please speak to a member of staff who can arrange it for you.

اگر به این بروشور به زبان دیگر یا در قالب دسترسپذیر نیاز دارید، لطفاً با یکی از کارکنان صحبت کنید تا آن را برای شما تهیه کند.

Jeśli niniejsza ulotka ma być dostępna w innym języku lub formacie, proszę skontaktować się z członkiem personelu, który ją dla Państwa przygotuje.

Dacă aveți nevoie de această broșură într-o altă limbă sau într-un format accesibil, vă rog să discutați cu un membru al personalului să se ocupe de acest lucru pentru dumneavoastră

如果您需要本传单的其他语言版本或无障碍格式,请联系工作人员为您安排。

إذا احتجت إلى هذه النشرة بلغة أُخرى، أو بتنسيق يسهل الوصول إليه، يرجى التحدث إلى أحد الموظفين لترتيب ذلك لك.

Whiston Hospital Warrington Road, Prescot, Merseyside, L35 5DR Telephone: 0151 426 1600

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Nature of and reasons for the condition:

Pneumonia (chest infection) or sometimes called Lower Respiratory Tract Infection (LRTI) is an illness that can be caused by an infection from a virus or bacteria.

The infection leads to swelling, redness and the production of a fluid in the small air sacks of a section in one or both of the lungs. Whole sections of the lung can be involved but it is more common to have one section affected. Due to the fluid, air cannot enter the lungs properly.

This is often called "consolidation and collapse of the lung". Pneumonia occurs in all ages but is more common in children under 4 years of age. Recovery usually takes seven to ten days. Symptoms may vary from child to child depending on age, and the organism that has caused the illness.

Symptoms may include:

- Fast breathing.
- Fever (high temperature).
- Cough/ wheeze/difficulty in breathing.
- Loss of appetite.
- Lack of energy and tiredness.
- Feeling generally unwell and miserable.

Notes

Page 1 Page 6

The discomforts of the treatment:

If intravenous fluids or antibiotics are required e.g. through a (drip), nursing staff will apply a special cream prior to the procedure in order to make it more comfortable for the child.

On occasion oral antibiotics may cause the child to experience a little stomach ache and may also make their stools (poo) a little loose/watery. If this occurs extra fluids should be encouraged but the course of antibiotic therapy should be completed if possible.

The consequences of not having the treatment:

If your child's chest infection is not treated appropriately they may deteriorate and become very ill. This would require specialist treatment at a specialist hospital.



Diagnosis is usually made following examination of your child by the doctor. A chest x-ray and some blood tests may be required to confirm the diagnosis.

Sometimes if the child can cough up some phlegm this may be sent to the laboratory for examination to identify the causative organism (bug). On other occasions swabs may be taken from your child's nose and throat.

Our usual form of treatment is:

If your child is having difficulty in breathing they will be given oxygen through a face mask, or nasal cannula (little oxygen tubes placed into the tip of the nostrils).

Optiflow may also be used to provide oxygen. Optiflow provides an adjustable flow of humidified (warm) oxygen via nasal cannula. The nursing staff looking after your child can explain any treatment your child is requiring.

Page 5 Page 2

Nursing staff will measure how much oxygen your child will need by attaching a small light probe to his/her finger or toe. It is important for your child to rest as much as possible and takes adequate fluids or he/she may become dehydrated. If your child is not tolerating oral fluids they will be given fluids through a (drip), directly into their blood stream.

An appropriate treatment regime will be prescribed according to the severity of your child's illness.

Antibiotics are commonly used for pneumonia and these can be given through the mouth as syrup or tablets, or for more severe cases, through a drip directly into your child's blood stream.

Paracetamol or Ibuprofen will be given at regular intervals to reduce temperature and aid comfort.

The length of stay in hospital varies, but once your child has sufficiently recovered, temperature has settled, is feeling better and taking usual diet and fluids; they may be allowed to go home to complete their treatment on the Hospital at Home Scheme.

Play specialists on the ward will ensure your child has some restful activities to do whilst in bed.

The benefits of the treatments:

Antibiotics, fluids and rest will help prevent any further deterioration in condition.

The risks of the treatment:

When intravenous antibiotics are used an allergic reaction may occur. However, this is very rare. If this should occur, your child will be given appropriate care and an alternative antibiotic will be found.

On occasion the intravenous cannula (drip) may move out of position and need to be replaced. The area of the drip can be uncomfortable at times and a slight stinging sensation may be experienced when antibiotics are being given; but this is not always the case. Distraction techniques will be implemented to ensure your child's treatment is as pain free as possible.

Page 3 Page 4