

## INSECT STINGS

Insect stings are a common problem during warm weather. Stinging insects include bumblebees, honeybees, yellow jackets, hornets, and wasps.

Prevention is best for insect stings. Have your child wear shoes to avoid stepping on a stinging insect. Do not use perfumes that attract stinging insects. Avoid rapid movements near insects, and have your child stay still if one lands on him.

If your child is stung, remove the stinger by scraping across the skin. A credit card works well for this. Do not squeeze the stinger, as this will release venom. Apply ice or cold compresses. Benadryl may be given for itch, and acetaminophen (Tylenol) may be given for pain. Local reactions may last 1 to 7 days.

Fortunately, serious reactions are uncommon, especially in children. Signs of a more severe reaction include:

- HIVES, ANYWHERE ON THE BODY, OR SWELLING OF THE EYES OR LIPS.
- WHEEZING OR RESPIRATORY DISTRESS, DIFFICULTY SWALLOWING, HOARSE VOICE.
- FAINTING, COLLAPSE, DISORIENTATION (VERY RARE)

First Aid: Call 911 immediately

Children who experience respiratory or collapse reactions should carry a “bee sting kit” which contains epinephrine (Epi-pen). This medicine is given immediately after a sting and lasts for up to 20 minutes to allow time for transportation to the emergency room. We will create a written allergy emergency plan for handling reactions. Children with severe reactions may also be referred to an allergist for shots.