

Giving Medicine to your Child

Oral Administration (by mouth)

To encourage the child's acceptance of oral medication:

Offer the child over age four a Popsicle or ice cube to numb the tongue prior to giving medication.

Mix the medication with a small amount of flavored syrup, jam, fruit puree, or ice cream. Avoid essential foods since the child may later refuse to eat them.

Give a food or beverage with a strong flavor after the medication to overwhelm the taste of the medication.

When the medication has an unpleasant taste, have the child pinch the nose and drink the medicine through a straw. (what we taste is influenced by smell).

Fill a dropper or syringe with the medication and place the syringe along the side of the infant's tongue and wait for the child to swallow between squirting the medication in the mouth.

Blowing a small puff of air in the face frequently elicits a swallow reflex.

Hold the child across your lap with the child's right arm behind you, the left hand firmly grasped by your left hand and the head securely restrained between your arm and body, the medication can be slowly poured into the mouth.

Medication should not be added to the infant's formula feeding; the baby may not finish the bottle, or may reject formula after the taste is changed by the medicine.

The young child who refuses to cooperate or resists consistently despite explanation and encouragement may require mild physical coercion. Carry this act out quickly and carefully.

- Place the child on his or her back on flat surface (bed, couch, floor).
- Sit facing child so child's head is between the mother's thighs and the child's arms are under the mother's legs.
- Place lower legs over the child's legs to restrain lower body, if necessary.
- To administer oral medication, place a pillow under child's head to reduce risk of choking.
- To administer nasal medication, place pillow under child's shoulders.

Rectal Administration

- Lubricate the suppository prior to insertion with Vaseline or KY jelly.
- After insertion, the buttocks are then held together firmly to prevent expulsion of the suppository.

Nasal Administration

- Infants can be positioned in a football hold. Older children can extend the head over the bed or a pillow.
- The child should remain in that position for 1 minute after the drops are given.

Eyedrop Administration

Place the child in a lying or sitting position with head tipped back and ask him or her to look up:

Use one hand to pull the lower lid downward; the hand that holds the dropper rests on the head.

As the lower lid is pulled down, a sac is formed and the solution or ointment is placed in this area. It is not necessary to apply medication directly to the eyeball.

If possible, the child is then asked to look in all directions to distribute the medication evenly. Excess tears may be wiped away.

For the infant or difficult child: place the drops in the inner corner of the eyes, where the lids meet, with the eyes closed. The medication pools in this area. When the lids open, the medication flows into the eye.

Ointment can be applied when the infant is sleeping.

You can play a game: have the child close his eyes until a count of 3, then have them open them, and quickly administer the drops.

Eardrop Administration

Eardrops are given with the child lying down and the head turned to the appropriate side, with the sore ear facing up.

For children younger than 3 years of age, gently pulling the ear down and back will straighten the ear canal. This allows drops to flow into the ear canal. The ear is pulled upward and back in children older than 3 years of age.

The child should remain lying down with the head turned for a few minutes.

Gently massage the area immediately in front of the ear to aid in the entry of the drops into the canal.

You may use a cotton ball to prevent the medication from flowing out of the ear canal. This may absorb some of the medication, however, so be sure to wait five minutes first.

Allow medication stored in the refrigerator to warm to room temperature before placing drops in ear.