

# Sickle Cell Disease in Children

## Tips to Remember:

- ☑ **New!** Make sure your child has his/her Meningococcal and Pneumococcal vaccines and is up to date on all other regular childhood vaccines.
- ☑ **New!** Hydroxyurea is recommended for most infants and children starting at 9 months old. Be sure to talk to your specialist if this is right for your child.
- ☑ Regular visits with your Pediatrician/Family Physician AND Sickle Cell specialist 2 times per year.
- ☑ It is important for your young child to take Penicillin as prescribed by your doctor.
- ☑ Birth control is very important for teenagers if they are taking hydroxyurea.
- ☑ Make sure to tell a new doctor and Emergency Department provider that your child has sickle cell disease.
- ☑ Dental cavities can lead to swelling and worsen pain-make sure to have regular visits with your dentist.
- ☑ Fever is very serious, please seek medical attention right away.
- ☑ Asthma flare-ups can lead to sickle cell crisis. Make sure your child's asthma is in control. If your child has breathing problems, please seek medical attention right away.



# Sickle Cell Disease in Children

## Primary Care Provider:

Name: \_\_\_\_\_

Contact: \_\_\_\_\_

\_\_\_\_\_

## Sickle Cell Specialist:

Name: \_\_\_\_\_

Contact: \_\_\_\_\_

\_\_\_\_\_

## Care Manager:

Name: \_\_\_\_\_

Contact: \_\_\_\_\_

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## Sickle Cell Educator Counselor:

Name: \_\_\_\_\_

Contact: \_\_\_\_\_

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*Developed by Community Care of North Carolina, the NC Division of Public Health; the comprehensive sickle cell centers at Carolinas Health Care, Duke University, East Carolina University, University of North Carolina at Chapel Hill, Mission, and Wake Forest University; and primary care physicians from across NC. Adapted from the 2014 NIH/NIHBI guidelines for Evidence-Based Management of Sickle Cell Disease.*