

Your child was diagnosed with ITP (Immune Thrombocytopenia). This blood disorder causes your child's immune system to destroy the platelet cells in the blood. Platelets are blood cells that help stop bleeding. As a result, your child may have a higher risk for bleeding. Your child was treated with a medicine called IVIG, which helps to increase the number of platelets and decrease the risk of bleeding, however your child is still at increased risk for bleeding until they have recovered completely. Most children recover from ITP within a few months. It will be important for your child to have a follow-up appointment with the Hematologist after discharge from the hospital. Children who receive IVIG should not receive the Varicella, MMR, or MMRV for at least 10 months.

Here are some recommendations for home:

ACTIVITY: Restricted.

- Talk to your child about ways to prevent bruising/bumping the skin
- No contact or collision sports (ex: football, hockey, boxing, lacrosse, etc)
- No activities that may lead to a traumatic injury (baseball, soccer, gymnastics, etc)
- No activities that may carry a risk of bleeding from injury, especially any head trauma
- Continue restricted activity until cleared by your Doctor (hematologist)

MEDICINES:

- DO NOT give your child any ASPIRIN, IBUPROFEN, OR NSAIDS (nonsteroidal anti-inflammatory drugs)
- It is okay to give Acetaminophen/Tylenol as needed
- Don't give your child any other medications without checking with your child's healthcare provider first, this includes over-the-counter medicines and any herbal remedies/supplements

FOLLOW-UP:

- 2-4 weeks as directed with your hematologist
- Primary Care Provider (PCP) within a week of hospital discharge, or as directed

RETURN PRECAUTIONS:

- Seek medical attention immediately if your child develops any bleeding for no apparent reason, blood in the urine or stool, nose bleed that lasts longer than usual, bleeding from the gums, headache, confusion/altered consciousness, head trauma/injury or vision changes.