

Flare *Management*

What to watch for, what to do in the first 48 hours, and how to keep home as calm as possible while your child is flaring.



1 What a flare can look like

Flares often come on suddenly or worsen quickly. Your child may show a few of these, or many:

- OCD thoughts or rituals
- Intense anxiety / separation fear
- Rage or aggression
- Tics, new or worse
- Restricted eating
- Sleep problems
- Bedwetting / urinary urgency
- Handwriting or math decline
- Sensory sensitivity
- Baby-talk or regression
- Mood swings, tearfulness
- Trouble focusing

2 The first 48 hours

- Write it down.** Date, symptoms, severity (1–10) and any recent illness or sick contacts at home, school or camp.
- Call your child's PANS/PANDAS provider** (or pediatrician). Ask whether to test for infection and what to adjust.
- Follow the plan you already have.** Don't start, stop or change medications without your care team.
- Lower demands.** Simplify the day; contact school about accommodations or a lighter load.
- Protect the basics:** sleep, fluids and whatever food your child can manage.
- Rally your team.** Tell your partner, school and anyone who helps with siblings.

3 At home during a flare

HELPS

- A calm, low voice and fewer words
- Name the feeling: "This is really scary for you."
- Two simple choices instead of open questions
- A predictable routine and a quiet "reset" space
- Remembering: it's the illness, not your child

TRY TO AVOID

- Arguing or reasoning in the heat of the moment
- Punishing symptoms your child can't control
- Changing how you respond to rituals without your therapist's guidance

4 Flare log — bring this to every appointment

Date	Symptoms	Severity 1–10	Possible trigger / exposure	What we did

Crisis Survival

How to keep everyone safe in the moment, and what to have ready before you need it.



Get help now if...

- Your child may hurt themselves or someone else
- They talk about wanting to die or have a plan
- They can't keep down or refuse food and fluids
- Confusion, unresponsiveness, a seizure or other sudden neurological change

911

Immediate danger or a medical emergency. Or go to the nearest ER.

988

Suicide & Crisis Lifeline. Call or text, 24/7, for your child or for you.

1 During a rage or meltdown

1. **Safety first.** Move siblings and pets out; clear away objects that could be thrown.
2. **One adult leads.** Others step back so there's one calm voice.
3. **Give space.** Stay nearby and visible but out of arm's reach.
4. **Say less.** Short, steady phrases: "You're safe. I'm right here."
5. **Wait it out.** Don't negotiate or teach until the storm passes.
6. **Afterward,** reconnect without a lecture, then log what happened.

2 Pack a crisis go-bag

- Current medication list with doses
- Allergies and diagnosis summary
- Insurance card and ID
- Recent labs and any provider letters
- Your flare log
- Comfort item, safe snacks, phone charger

AT THE ER

- Say "PANS/PANDAS" up front and name the treating provider
- Ask staff to call that provider
- Arrange care for siblings so one parent can focus

3 Our crisis plan — fill in, keep on the fridge and in the go-bag

Child's name / diagnosis

Medications & doses

PANS/PANDAS provider & phone

After-hours line

Pediatrician & phone

Pharmacy

Preferred hospital / ER

Emergency contact

What calms my child

What escalates my child

Care for the caregiver. Tag-team so each adult gets a break. Lower your own expectations for the week. This is not your fault, and you are not alone. Come to HELP Circle, Mondays 7:30 PM PT on Zoom.

Pediatric H.E.L.P. Organization

General information for families, not medical advice. Always follow your child's own care team.

pediatrichelp.org · info@pediatrichelp.org
Every Child Deserves HELP