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Infant Calls""

""4.1 Bottle (Formula)-Feeding Questions""""4.2 Breast-Feeding Questions""; ""4.3 Crying Baby Younger Than 3 Months""; ""4.4 Crying Child Older Than 3 Months""; ""4.5 Diaper Rash""; ""4.6 Jaundiced Newborn""; ""4.7 Newborn Appearance""; ""4.8 Newborn Rashes and Birthmarks""; ""4.9 Spitting Up (Reflux)""; ""4.10 Thrush""; ""4.11 Umbilical Cord Symptoms""; ""Part Five Symptom or Disease Calls""; ""5.1 Abdominal Pain""; ""5.2 Asthma Attack""; ""5.3 Athlete's Foot""; ""5.4 Bee or Wasp Sting""; ""5.5 Bite, Animal or Human""; ""5.6 Bite, Insect""; ""5.7 Bite, Spider""; ""5.8 Bite, Tick"" ""5.9 Breath-Holding Spell""""5.10 Burn""; ""5.11 Chest Pain""; ""5.12 Chickenpox (Varicella)""; ""5.13 Cold""; ""5.14 Constipation""; ""5.15 Cough""; ""5.16 Croup""; ""5.17 Diarrhea""; ""5.18 Earache""; ""5.19 Ear Congestion""; ""5.20 Ear Discharge""; ""5.21 Ear, Pulling at or Itchy""; ""5.22 Ear, Swimmer's (Otitis Externa)""; ""5.23 Eye Allergy""; ""5.24 Eye, Chemical In""; ""5.25 Eye, Foreign Body""; ""5.26 Eye, Red (Without Pus)""; ""5.27 Eye, With Pus""; ""5.28 Fever""; ""5.29 Fifth Disease (Erythema Infectiosum)""; ""5.30 Fluid Intake, Decreased"" ""5.31 Groin or Scrotum Swelling/PAIN""""5.32 Hand-Foot-And-Mouth Disease""; ""5.33 Hay Fever (Allergic Rhinitis)""; ""5.34 Headache""; ""5.35 Hives (Urticaria)""; ""5.36 Immunizations: Recommended Schedule""; ""5.37 Immunization Reactions""; ""5.38 Impetigo""; ""5.39 Infection Exposure""; ""5.40 Lice (Pediculosis)""; ""5.41 Limb Pain""; ""5.42 Lymph Nodes, Swollen""; ""5.43 Menstrual Cramps (Dysmenorrhea)""; ""5.44 Mouth Ulcers""; ""5.45 Nosebleed""; ""5.46 Pinworms""; ""5.47 Poison Ivy, Oak, or Sumac""; ""5.48 Rash, Localized and Cause Unknown""; ""5.49 Rash, Widespread and Cause Unknown"" ""5.50 Rash, Widespread While on Drugs""
