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Bronchiolitis

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Diagnosis

Your child's health care provider can usually diagnose bronchiolitis by the symptoms and listening to your child's lungs with a stethoscope.

Tests and X-rays are not usually needed to diagnose bronchiolitis. But your child's provider may recommend tests if your child is at risk of severe bronchiolitis, if symptoms are getting worse or if the provider thinks there may be another problem.

Tests may include:

- **Chest X-ray.** A chest X-ray can show if there are signs of pneumonia.
- **Viral testing.** A sample of mucus from your child's nose can be used to test for the virus causing bronchiolitis. This is done using a swab that's gently inserted into the nose.
- **Blood tests.** Occasionally, blood tests might be used to check your child's white blood cell count. An increase in white blood cells is usually a sign that

the body is fighting an infection. A blood test also can show if the level of oxygen in your child's bloodstream is low.

Your child's provider may look for symptoms of dehydration, especially if your child has been refusing to drink or eat or has been vomiting. Signs of dehydration include dry mouth and skin, extreme tiredness, and making little or no urine.

More Information

[Chest X-rays](#)

Treatment

Bronchiolitis usually lasts for 1 to 2 weeks but symptoms occasionally last longer. Most children with bronchiolitis can be cared for at home with comfort measures. It's important to be alert for problems with breathing that are getting worse. For example, struggling for each breath, not being able to speak or cry because of struggling to breathe, or making grunting noises with each breath.

Because viruses cause bronchiolitis, antibiotics — which are used to treat infections caused by bacteria — don't work against viruses. Bacterial infections such as pneumonia or an ear infection can happen along with bronchiolitis. In this case, your child's health care provider may give an antibiotic for the bacterial infection.

Medicines called bronchodilators that open the airways don't seem to help bronchiolitis, so they usually aren't given. In severe cases, your child's health care provider may try a nebulized albuterol treatment to see if it helps. During this treatment, a machine creates a fine mist of medicine that your child breathes into the lungs.

Oral corticosteroid medicines and pounding on the chest to loosen mucus, a treatment called chest physiotherapy, have not been shown to be effective for

bronchiolitis and are not recommended.

Hospital care

A small number of children may need a stay in the hospital. Your child may receive oxygen through a face mask to get enough oxygen into the blood. Your child also may get fluids through a vein to prevent dehydration. In severe cases, a tube may be guided into the windpipe to help breathing.

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Lifestyle and home remedies

Though it may not be possible to shorten the length of your child's illness, you may be able to make your child more comfortable. Here are some tips:

- **Humidify the air.** If the air in your child's room is dry, a cool-mist humidifier or vaporizer can moisten the air. This may help loosen mucus and lessen coughing. Be sure to keep the humidifier clean so that bacteria and molds don't grow in the machine.
- **Give your child liquids to stay hydrated.** Infants should have formula or breast milk only. Your child's health care provider may add oral rehydration therapy. Older kids can drink whatever they want, such as water, juice or milk, as long as they're drinking. Your child may drink more slowly than usual because of swelling and mucus in the nose. Offer small amounts of liquid often.
- **Try saline nose drops to ease stuffiness.** You can buy these drops without a prescription. They are effective, safe and won't irritate the nose, even for children. Put several drops into the opening on one side of the nose, called the nostril, then bulb suction that nostril right away. Be careful not to push the bulb too far into the nose. Repeat the same steps in the other nostril.

- **Consider pain relievers that you can buy without a prescription.** For treatment of fever or pain, ask your child's health care provider about giving your child infants' or children's over-the-counter fever and pain medicines such as acetaminophen (Tylenol, others) or ibuprofen (Advil, Motrin, others). Those are safer than aspirin. Aspirin is not recommended in children due to the risk of Reye's syndrome, a rare but potentially life-threatening condition. Children and teenagers recovering from chickenpox or flu-like symptoms should never take aspirin, as they have a higher risk of Reye's syndrome.
- **Avoid secondhand smoke.** Smoke can worsen symptoms of respiratory infections. If a family member smokes, ask them to smoke outside of the house and outside of the car.

Don't use other over-the-counter medicines, except for fever reducers and pain relievers, to treat coughs and colds in children under 6 years old. Also, consider avoiding the use of these medicines for children younger than 12 years old. The risks to children outweigh the benefits.

Preparing for your appointment

You're likely to start by seeing your child's primary care provider or pediatrician. Here's some information to help you get ready for the appointment.

What you can do

Before your appointment, make a list of:

- **Any symptoms your child has**, including any that may not seem related to a cold or flu, and when they started.
- **Key personal information**, such as if your child was born prematurely or has a heart or lung problem or a weakened immune system.
- **Questions to ask** your provider.

Questions to ask your provider may include:

- What is likely causing my child's symptoms? Are there other possible causes?
- Does my child need any tests?
- How long do symptoms usually last?
- Can my child spread this infection to others?
- What treatment do you recommend?
- What are other options to the treatment you're recommending?
- Does my child need medicine? If so, is there a generic option to the medicine you're recommending?
- What can I do to make my child feel better?
- Are there any brochures or other printed material that I can have? What websites do you suggest?

Feel free to ask other questions during your appointment.

What to expect from your doctor

Your child's health care provider may ask questions, such as:

- When did your child first begin having symptoms?
- Does your child have symptoms all the time, or do they come and go?
- How severe are your child's symptoms?
- What, if anything, seems to make your child's symptoms better?
- What, if anything, seems to make your child's symptoms worse?

Preparing for questions will help you make the most of your time with your child's health care provider.