

Bronchiolitis

Diagnosis based on H&P

URI prodrome

Rhinorrhea, cough, tachypnea

Wheezing

Increased respiratory effort

Grunting, nasal flaring, and intercostal and/or subcostal retractions

< 2
yrs
old

Risk factors for severe disease

- <12 wks old
- History of prematurity
- Underlying cardiac dz
- Immunodeficiency

Tests & Monitoring

- **Pulse Ox:** Spot check

AAP RECOMMENDS AGAINST:

- Continuous pulse ox
- CXR
- Chest PT

Treatment

- **NC or HFNC:** ↑ WOB
- **Oxygen:** O₂ sats <90%
- **IVF:** if not tolerating PO
- **Nasal suctioning**

AAP RECOMMENDS AGAINST:

- Albuterol
We say consider if fam hx of asthma, atopy
- Hypertonic saline
Not if discharging from the ED, ok if admitting
- Racemic Epi
- Steroids
- Antibiotics

Admit

- Needs supplemental O₂
- Not tolerating PO
- Apnea
- Underlying heart/lung dz

Strongly consider if

- <8 weeks
- <4 kg
- RR >60-70/min
- HR >180/min
- h/o prematurity

Discharge

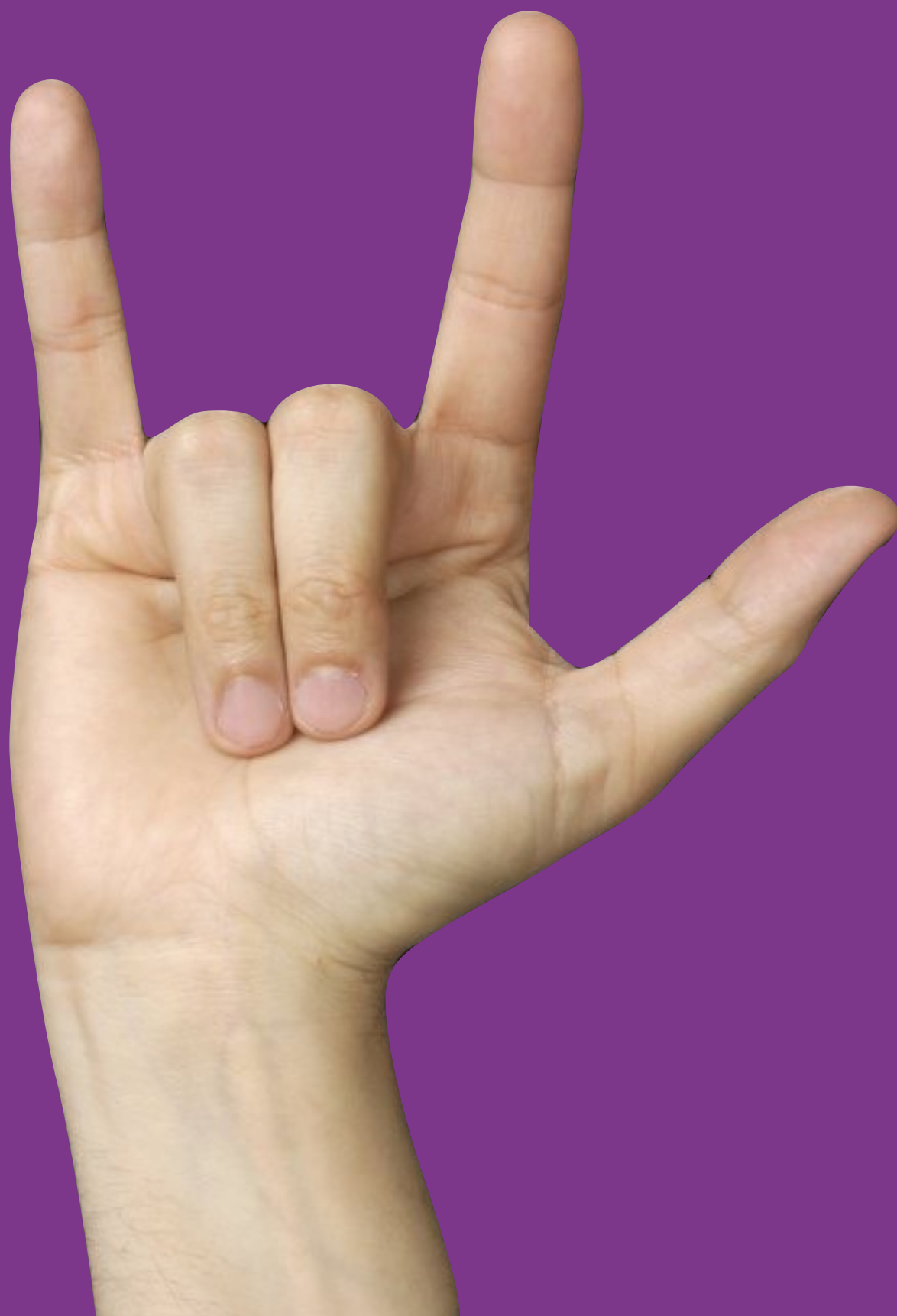
- **Euvolemic**
tolerating PO
- **Not hypoxic**
awake, asleep & feeding
- **Well appearing**
minimal work of breathing

Follow up



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LP hold technique



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