

Pediatric Respiratory Distress (Bronchiolitis)

(Adapted from an evidence-based guideline created using the National Prehospital Evidence-Based Guideline Model Process)

Aliases

None noted

Patient Care Goals

1. Alleviate respiratory distress
2. Promptly identify respiratory distress, failure, and/or arrest, and intervene for patients who require escalation of therapy
3. Deliver appropriate therapy by differentiating other causes of pediatric respiratory distress

Patient Presentation

Inclusion Criteria

Child less than 2 years of age typically with diffuse rhonchi and/or wheezing with a viral or other undifferentiated illness characterized by rhinorrhea, cough, fever, tachypnea, and/or respiratory distress

Exclusion Criteria

1. Anaphylaxis
2. Croup
3. Epiglottitis
4. Foreign body aspiration
5. Submersion/drowning
6. Asthma

Patient Management

Assessment

1. History
 - a. Onset of symptoms
 - b. Concurrent symptoms (e.g., fever, cough, rhinorrhea, tongue/lip swelling, rash, labored breathing, foreign body aspiration)
 - c. Sick contacts
 - d. History of wheezing
 - e. Respiratory and other treatments given
 - f. Number of emergency department visits in the past year
 - g. Number of admissions in the past year
 - h. Number of intensive care unit (ICU) admissions ever (including pediatric ICU (PICU) and neonatal ICU (NICU))
 - i. History of prematurity
 - j. Family history of asthma, eczema, or allergies
 - k. Change in feeding patterns and/or number of wet diapers
2. Exam