APPENDIX A

BRONCHIOLITIS PATHWAY

TO BE USED IN ALL INFANTS: typically prodrome of coryza: <12 MONTHS. PRESENTING WITH COUGHING, TACHYPNOEA, CHEST RECESSION AND WHEEZES/CREPITATIONS.

ALWAYS LOOK FOR SEPSIS:
- Uncontrollable fever; severe tachycardia out of proportion of the degree of respiratory distress; infants < 2 months with fevers are septic until proven otherwise and need a septic workup and antibiotics.

SEVERE
Any one of:
- Marked tachypnoea
- Heart rate > 120/min
- Lethargy or irritable
- Marked work of breathing: head bobbing, grunting, intercostal recession
- Apnoea (frequent, prolonged)

YES □

NO

MODERATE
Any one of:
- Feeding < 50% of feeds despite smaller, more frequent feeds
- Irritability
- Moderate work of breathing: some intercostal recessions
- Risk factors for severe disease

YES □

NO

MILD
- Wait
- No risk factors for severe disease
- Pink on room air
- Well hydrated
- Tolerating ≥ 50% of feeds
- Mild work of breathing
- Pulse oximetry ≥ 94% even while asleep

YES □

DISCHARGE
- Can be managed at home:
- Patient info leaflet
- Antibiotics as needed

DATE: SIGNED: PATIENT LN:

*Risk factors for severe disease:
- Prematurity
- Chronic lung disease
- Heart disease
- Immunodeficiency
- Neuromuscular disease
- Age < 6 weeks

**Heated Humidified High flow nasal prong oxygen:
- Consider in presence of hypoxia (<92%) and a lack of response to nasal prong oxygen, or severe distress despite nasal prong oxygen

***Guide to NG rehydration:
- Nasogastric rehydration is the route of choice as an alternative to oral rehydration.

DISCHARGE CHECKLIST:
- At least 2 vital signs measurements 4 hours apart in moderate cases.
- Pulse oximetry > 94% even while sleeping.
- Able to feed ≥ 50% of feeds.
- No signs of dehydration.
- No risk factors for severe disease (see above).
- Excluded other differential diagnoses for acute wheeze: cardiac, foreign body, anaphylaxis.
- Provide information leaflet: parents have reviewed leaflet and understand the expected disease progression and red flags, and are able to return should the need arise.