Management of Bronchiolitis in Infants

Introduction

Bronchiolitis is an acute inflammatory disease of the lower respiratory tract, resulting from obstruction of small airways. It is initiated by infection of the upper respiratory tract by any one of a number of seasonal viruses, the most common of which is respiratory syncytial virus (RSV).

Previous confusion around the clinical management of infants with bronchiolitis has improved with the creation and integration of clinical practice guidelines. Typical bronchiolitis in infants is a self-limited disease, usually due to an acute viral infection whose clinical course is not generally altered by aggressive evaluations/interventions, use of antibiotics, or other therapies. Most infants who contract bronchiolitis recover without sequelae; however, rates of admissions have increased from 1% to 3% of all infants.

Several studies on the use of clinical guidelines for the management of infant bronchiolitis have shown a reduction in unnecessary resource utilization with a streamlining of medical care for these infants.

Objectives

In the target population, the objectives of this guideline are to:

- decrease the use of unnecessary diagnostic studies;
- decrease the use of medications;
- provide guidance on the use of appropriate respiratory therapy;
- improve the rate of appropriate admission;
- improve the use of appropriate monitoring activities; and
- decrease length of stay.

Target Users

Include, but are not limited to:

- Emergency Medicine physicians, nurses, nurse practitioners, and trainees
- Inpatient physicians, nurses, nurse practitioners, and trainees
- Respiratory Therapists
- Pharmacists
- Patients and families

Clinical recommendations summary table
ED Management Recommendations

Inpatient Management Recommendations

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Implementation and Evaluation Plan

Implementation Plan

- Education and awareness building by Paediatric Medicine and ED Divisions’ practice champions during resident/fellow orientation, resident educational rounds, and nursing orientation/staff meetings.
- ED and Inpatient Medical Director to communicate any updates in practice to ED and Paediatric Medicine Divisions respectively.

Evaluation Plan

- Ongoing monitoring of bronchiolitis pathway adherence.

Guideline Group and Reviewers

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References


Attachments:

Clinical Reccomendations_Aug 2021.pdf
Discharge Checklist Bronchiolitis_June 29.docx
ED pathway_Aug 2021.pdf
inpatient pathway_Aug 2021.pdf