

Bronchiolitis

Weight (Kg):

What is bronchiolitis?

It is a viral infection of the small airways in the lungs of children under 2 years old. The lining of these airways become swollen and irritated with mucous. This causes breathing difficulties.

There are many different viruses that can cause bronchiolitis (eg. RSV).

It is usually a mild infection that resolves on its own. However, in some it can become more severe and require admission to hospital for oxygen and IV fluids.

Signs & Symptoms:

- Cough
- Fever
- Congestion, runny nose
- Faster breathing
- Retractions (pulling in of the skin around the ribs or neck)
- Wheeze (whistling noise when breathing out)

How is bronchiolitis diagnosed?

Bronchiolitis is a clinical diagnosis. It is not diagnosed by a blood test or CXR.

Sometimes a nose swab is taken to specify a virus but it does not change the diagnosis or management.

In some children who are more severely affected with bronchiolitis or have a prolonged course will receive a CXR to look for a secondary infection such as bacterial pneumonia.

How is bronchiolitis spread?

It is spread from person to person by coughing, sneezing, hand to nose, and hand to hand contact. Older children and adults will simply get a cold. Hand washing is the best way to prevent the spread of the virus.

How long will it last?

On average it can last 10-14 days. Symptoms are often worse in the first 3-5 days.

Royal University Hospital
Children's Emergency Department

Affix patient label here

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What should I do?

1. Keep up with fluids. You may need to have smaller more frequent feeds.
2. Clear the nose with saline drops or spray before feeds and bedtime.
3. May use acetaminophen or ibuprofen for comfort. Avoid cold medications.

How is bronchiolitis treated?

There is no specific treatment for bronchiolitis.

Comfort measures such as nasal saline spray, ibuprofen, and acetaminophen can be given.

Antibiotics and cold medications are not helpful and can be harmful.

Avoid cigarette smoke.

Some children may benefit from asthma type medications such as ventolin which may be tried in the ER.

Some children may require admission to hospital for oxygen and IV fluids.

Call 911 Immediately if:

1. Your child has blue lips or fingernails.
2. Your child appears exhausted.
3. Your child has passed out (unconscious).
4. Your child stops breathing.

Go to the Emergency Department if:

1. Your child's breathing becomes difficult or labored (sucking in at the ribs, stomach, neck).
2. Your child becomes dehydrated, and/or refusing to drink.
3. Your child has rapid breathing.
4. Your child has increased wheeze (noisier breathing).

You can also call the HealthLine if you are ever worried or have any questions about your child.

Saskatchewan Health Line: 811