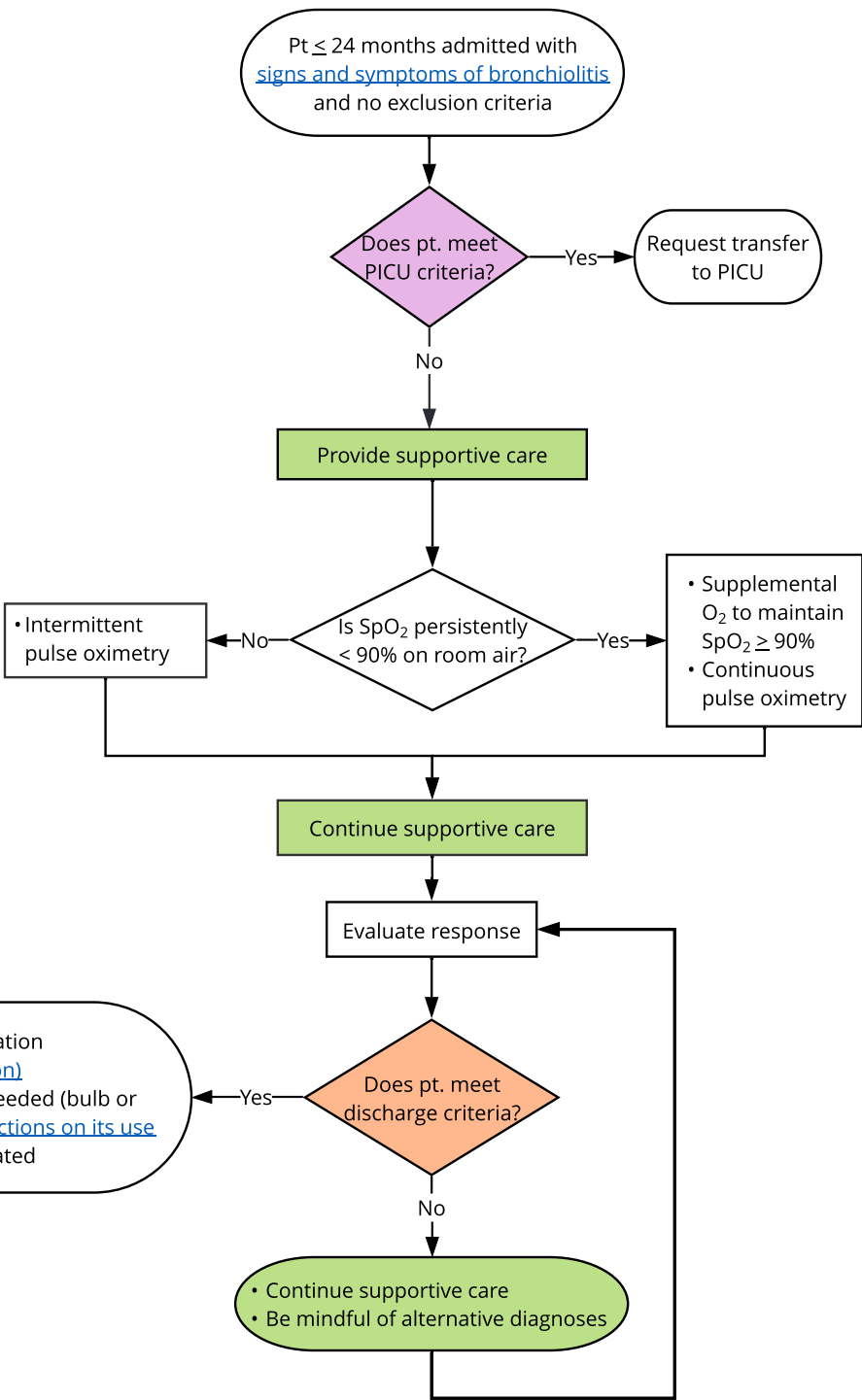


QR code for
 mobile access



Exclusion criteria:

- For infants < 60 days of age with fever consider whether sepsis workup is indicated (link to [Febrile Infant](#))
- Alternative diagnosis, such as:
 - [Sepsis](#)
 - [Asthma](#)
 - [Pneumonia](#)
 - Congestive heart failure
 - Pertussis
 - Chronic lung disease
 - Airway obstruction
 - [Croup](#)
 - [Foreign Body Aspiration](#)



PICU criteria:

- On HFNC requiring > 40% FiO2 or > 2 L/min/kg or 30 L/min
- Recurrent apnea requiring close monitoring
- Severe respiratory distress
- Hypercarbic respiratory failure/refractory hypoxemia

Supportive care:

- Nasal or nasopharyngeal suctioning as needed
 - Supplemental O₂
 - Offer PO feeds. If not taking adequate PO, consider NG (preferred) or IV hydration ([Bronchiolitis Feeding CAT](#))
 - Antipyretics as needed
 - For otherwise healthy pt, cardiac monitor is not routinely indicated
- If considering HFNC:**
- See HFNC site-specific information ([link to CMH HFNC holiday algorithm](#))

Discharge criteria:

- Minimal to no increased work of breathing
- No need for supplemental oxygen
- Tolerating adequate PO intake
- Access to follow-up care if needed

Abbreviations (laboratory & radiology excluded):

IV = intravenous
 NG = nasogastric tube
 PO = by mouth
 pt. = patient
 HFNC = high flow nasal cannula
 PICU = Pediatric Intensive Care Unit

Evidence does NOT support routine use of the following:

- [Albuterol](#)
- [Hypertonic saline](#)
- Systemic or inhaled corticosteroids
- Racemic epinephrine
- Chest radiography
- Laboratory tests
- Antibiotics