

Clinical Assessment Tool for Babies/Children under 2 years with Suspected Bronchiolitis

Management Out of Hospital Setting

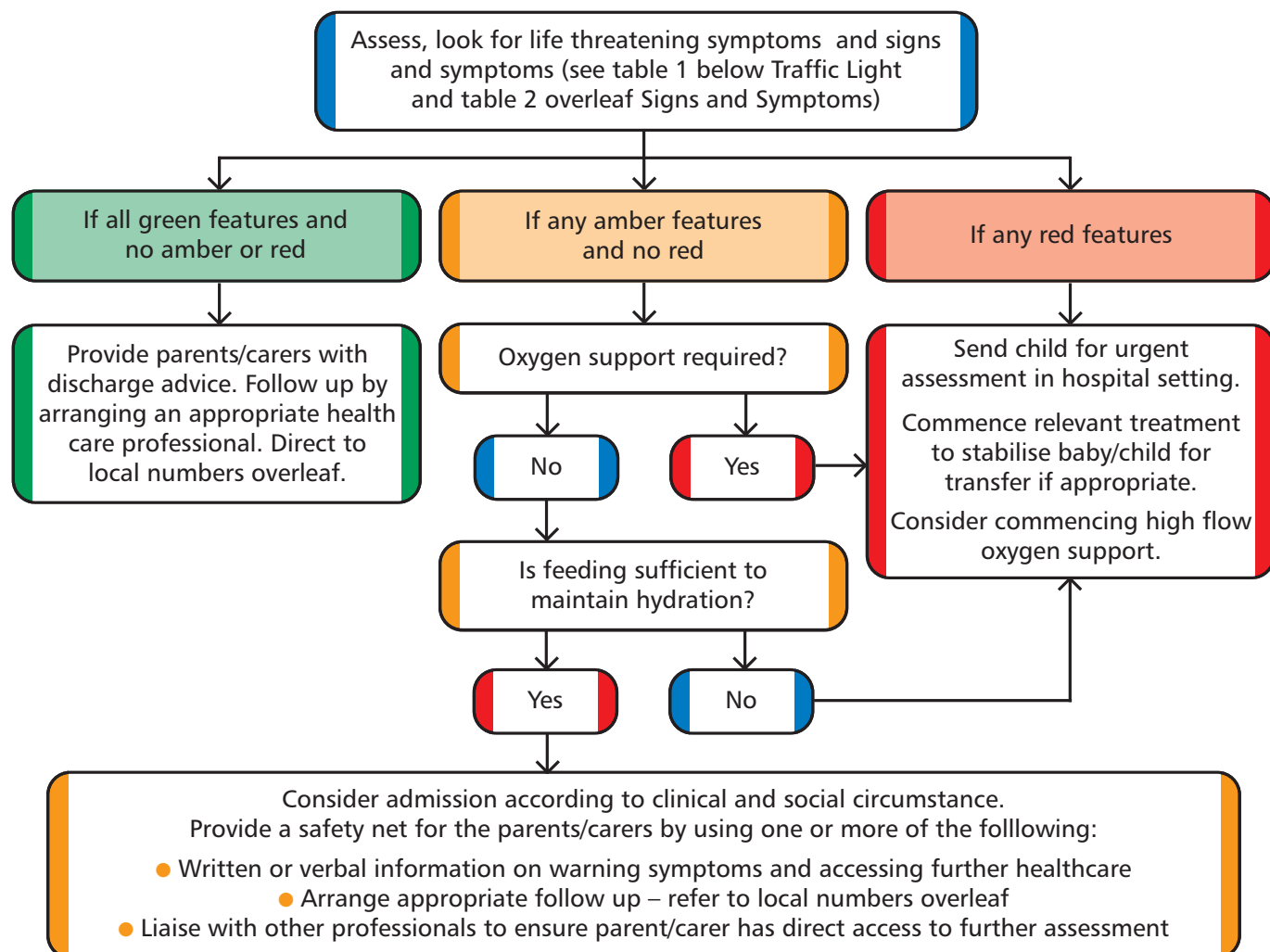


Table 1 Traffic light system for identifying severity of illness

	Green – low risk	Amber – intermediate risk	Red – high risk
Behaviour	<ul style="list-style-type: none"> Alert Normal 	<ul style="list-style-type: none"> Irritable Not responding normally to social cues Decreased activity No smile 	<ul style="list-style-type: none"> Unable to rouse Wakes only with prolonged stimulation No response to social cues Weak, high pitched or continuous cry Appears ill to a healthcare professional
Skin	CRT ≤ 2 secs Normal colour skin, lips & tongue Moist mucous membranes	CRT 2–3 secs Pale/mottled Pallor colour reported by parent/carer Cool peripheries	CRT over 3 secs Pale/Mottled/Ashen blue Cyanotic lips and tongue
Respiratory Rate	Under 12mths <50 breaths/minute Over 12 mths <40 breaths/minute No respiratory distress	<12mths 50-60 breaths /minute >12 months 40-60 breaths / minute	All ages >60 breaths/minute
SATS in air	95% or above	92 – 94%	<92%
Chest Recession	None	Moderate	Severe
Nasal Flaring	Absent	May be present	Present
Grunting	Absent	Absent	Present
Feeding Hydration	Normal – no vomiting	50-75% fluid intake over 3-4 feeds +/- vomiting. Reduced urine output	<50% fluid intake over 2-3 feeds +/- vomiting. Significantly reduced urine output
Apnoeas	Absent	Absent	Present*

CRT: capillary refill time SATS: saturations in air * Apnoea – for 10-15 secs or shorter if accompanied by a sudden decrease in saturations/central cyanosis or bradycardia

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Healthcare professionals should be aware of the increased need for hospital admission in infants with the following:

- Pre existing lung disease, congenital heart disease, neuromuscular weakness, immune-incompetence
- Age <6weeks (corrected)
- Prematurity
- Family anxiety
- Re-attendance
- Duration of illness is less than 3 days and Amber – may need to admit

Table 2 Signs and Symptoms can include:

- Rhinorrhoea (Runny nose)
- Cough
- Poor Feeding
- Vomiting
- Pyrexia
- Respiratory distress
- Apnoea
- Inspiratory crackles +/- wheeze
- Cyanosis

Some Useful Telephone Numbers

GP/Practice Nurse (Parent to complete).....

Health Visitor – (If you do not know this number you may be able to locate your health visitor at one of the health centres below)

Liverpool Road Health Centre01582 70 81 51	Wheatfield Road Surgery01582 47 86 78
Marsh Farm Health Centre01582 70 74 44	Wigmore Lane Health Centre01582 70 73 33
Queensborough House01582 70 76 60	Sure Start01582 55 66 61

Community Nurse(If applicable - Regents Court 01582 70 81 39)

Walk in Centre01582 55 64 00

Opening Times (as at July 2009) Mon-Fri – 8am to 7-30pm / Sat – 8am to 3pm / Sunday – Closed / Bank Holidays – 8am to 7-30pm

NHS Direct.....0845 46 47 Open 24hrs – 7 days www.nhsdirect.nhs.uk

This guidance is written in the following context

This assessment tool was arrived at after careful consideration of the evidence available including but not exclusively *SIGN, Bristol guideline, EBM data and NHS evidence. Healthcare professionals are expected to take it fully into account when exercising their clinical judgement. The guidance does not, however, override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.