

What causes Bronchiolitis?

The RSV virus is spread via droplets which can be breathed, sneezed, coughed or picked up from surfaces including door handles and toys.

It is possible to get bronchiolitis more than once in the same season. Steps can be taken to prevent reoccurrence which include:

- Frequent hand washing (Figure No.1)
- Regular cleaning of toys and surfaces with detergent
- Avoiding exposure to other sick people

6 Steps Hand Washing



Discharge home

Children with bronchiolitis typically spend less than a week in hospital. They may have a cough for 2-3 weeks after discharge, despite otherwise being well.

It is important to note that **your child can remain infectious for up to 3 weeks** after symptoms resolve.

It is advised to avoid close contact with other children during this period.

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BRONCHIOLITIS

Information for Parents & Guardians



What is bronchiolitis?

Bronchiolitis is a lower respiratory tract infection, which causes inflammation and infection of the smallest parts of the airways in the lungs (the bronchioles). It is most commonly caused by the respiratory syncytial virus (RSV), which peaks between October and March. The infection generally lasts between 10 and 14 days.

Signs and Symptoms

The signs and symptoms of Bronchiolitis include:

- Cough
- Blocked or runny nose
- Raised temperature (fever)
- Difficulty feeding or reduced intake
- Dry nappies (dehydration)
- Rapid and or noisy breathing (wheezing)
- Irritability



Admission to hospital

On admission the following may be required

- Mucous swab sample from your child's nose to test what virus is causing the infection
- Blood tests to rule out other infections and to monitor how the child's condition

Due to the infectious nature of bronchiolitis, your child will be placed in a single room or an area removed from infected children.

Visiting will be restricted.

Treatment

There is no treatment for bronchiolitis only supportive treatment, and your child will be monitored closely and supported in the following ways

- Observations and oxygen levels will be checked regularly. If your child requires oxygen this will be provided through a mask or nasal prong
- Saline nebulisers or drops may be given to loosen secretions and ease congestion
- Suctioning may be carried out to clear secretions in the airways
- Your child may need assistance with taking fluids. Sometimes formula feed is given through a tube inserted into the stomach through the nose. This is called a nasogastric tube. Fluids may also be given through an intravenous cannula
- Your child may require medication to reduce a high fever