Pediatric Care Network (PCN): Home Oxygen Protocol in Primary Care Setting for Patients with Bronchiolitis

**Inclusion criteria:**
- 3-24 months
- Consider day of illness
- Gestational age >44 weeks corrected
- Reside <8500 ft

**Exclusion criteria:**
- Critically ill child
- Severe bronchiolitis requiring ICU admission
- Children with underlying respiratory illness
- Asthma
- Immunodeficiency
- Hemodynamically significant congenital heart disease
- Suspected serious bacterial infections (SBI)
- Neuromuscular disease
- Apnea

**Patient with bronchiolitis appropriate for discharge to home on oxygen. Use pulse oximetry in office. If oxygen saturations are greater than or equal to 84% and less than or equal to 90% consider home oxygen.**

**During observation period look for:**
- Stable on no more than ½ L sat ≥90%
- Maintaining hydration without need for frequent suctioning
- No signs of deterioration
- Caregiver and provider comfortable with discharge home
- Caregivers demonstrate proper use of oxygen tank

**Observe at least 1-2 hours**

**Phone call at 4-12 hours. Reassess work of breathing, hydration and comfort. Schedule for follow-up in morning**

**Home 02 provided by office**
- Oxygen consignment agreement with DME provider
- Completion of home 02 orders

**In-person follow-up with MD at 24 hours**

**Reassess work of breathing, hydration and comfort**

**Oxygen Wean or Discontinuation:**
- Consider at 24 hours
- Follow-up in person visit within 2-3 days
- If on home oxygen >10 days, consider a referral to pulmonary specialist

**AAP Guidelines:**
- The AAP recommends:
  - Supportive care such as suctioning, hydration and supplemental oxygen, when needed, for the majority of patients with bronchiolitis.
  - Avoiding non-evidence-based interventions such as bronchodilators, chest X rays and respiratory viral testing.

**Therapeutic Adjuncts:**
- Provide Nose aspirator and Home 02 handouts
- Use Nose Aspirator
- Control fever with antipyretics
- Assess on individual basis to provide home oxygen if there are smokers in the home

**Home Oxygen use Considerations:**
- Home 02 Handout
- Nose aspirator
- Handout
- Day of illness

**Billing Considerations:**
- CPT does not contain oxygen administration codes, it bundles into the E/M service you report for the day. Report the appropriate office visit code 99201-99205, 99212-99215 that describes the service the provider performs and documents.
- Bill prolonged services codes as appropriate: 99415-99416 for clinical staff face-to-face time, 99354-99355 for physician or APP face-to-face time.
- Pulse oximetry codes: 94760 single, 94761 multiple
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