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2 3	NATIONAL INSTITUTE FOR HEALTH AND CARE EXCELLENCE
4	Guideline scope
5 6	Bronchiolitis in childen: diagnosis and management (update)
7	
8 9	This guideline will update the NICE guideline on Bronchiolitis in children: diagnosis and management (NG9).
10 11 12	The guideline will be developed using the methods and processes outlined in developing NICE guidelines: the manual, this update has used the interim process in Appendix L.
13	
14	1 Why the update is needed
15 16 17 18 19	Expert and stakeholder views and new evidence was identified from a <u>Health Technology Assessment</u> that could affect existing NG9 recommendation relating to oxygen saturation for discharge. The evidence suggests that oxygen saturation levels of ≥90% prior to discharge may indicate that a child with bronchiolitis can be discharged. Full details are set out in the surveillance review decision:
21	• 2019 surveillance of bronchiolitis in children (NICE guideline NG9)
22	Why the guideline is needed
23	Please see original scope for NG9.
24	2 Who the guidelines are for

NICE guidelines: Bronchiolitis in children: diagnosis and management. Update scope.

This guideline is for:

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- healthcare professionals in the NHS
- commissioners and providers of services
- people using services, their families and carers.

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- 5 It may also be relevant for:
- voluntary organisations and patient support groups

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- 8 NICE guidelines cover health and care in England. Decisions on how they
- 9 apply in other UK countries are made by ministers in the Welsh Government,
- 10 <u>Scottish Government</u> and <u>Northern Ireland Executive</u>.

11 Equality considerations

- 12 NICE has carried out <u>an equality impact assessment</u> during scoping.
- 13 The assessment:
- lists equality issues identified, and how they have been addressed.
- explains why any groups are excluded from the scope.

16 3 What the updated guidelines will cover

17 3.1 Who is the focus?

18 Groups that will be covered

- Children with bronchiolitis. Bronchiolitis occurs in children under 2 years,
- 20 most commonly in the first year of life.
- Subgroups may include: children who were born prematurely, children with
- 22 underlying conditions such as congenital heart disease, cystic fibrosis,
- immunodeficiney, or chronic lung disease

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3.2 Settings

2 Settings that will be covered

• Primary care.

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- Acute and maternity services.
- Children's secondary or tertiary services.

6 3.3 Activities, services or aspects of care

7 Area that will be covered in this update

- 8 For this update to NG9 we will look at evidence in the area below when
- 9 developing this update. We will consider making new recommendations or
- updating existing recommendations for this area only.
- 11 1 Oxygen saturation
- 12 Oxygen stauration level for referral, admission, use of supplementary oxygen
- or discharge for children with bronchiolitis.

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15 Proposed outline for the guideline

- 16 The tables below outlines the areas in the existing guideline that will be
- updated from this scope. It sets out what NICE plans to do for each area in
- 18 this update.

Area in the guideline (NG9)	What NICE plans to do
1.1 Assessment and diagnosis	No evidence review: retain recommendations from existing guideline.
1.2 When to refer	Review evidence for oxygen saturation levels as part of the referral decision: update recommendation 1.2.1 as needed.
	No evidence reviews or recommendation updates for other recommendations in this section.
1.3 When to admit	Review evidence for oxygen saturation levels as part of the admission decision: update recommendation 1.3.2 as needed.
	No evidence reviews or recommendation updates for other recommendations in this section.
1.4 Management of bronchiolitis	Review evidence for oxygen saturation levels as part of the management decision: update recommendation 1.4.4 as needed.
	No evidence reviews or recommendation updates for other recommendations in this section.
1.5 When to discharge	Review evidence for oxygen saturation levels as part of the discharge decision: update recommendation 1.5.1 as needed.
	No evidence reviews or recommendation updates for other recommendations in this section.
1.6 Key safety information for looking after a child at home	No evidence review: retain recommendations from existing guideline.

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3.4 Economic aspects

- 4 For this update, we will take economic aspects into account when making
- 5 recommendations. A health economic evidence review may be completed.
- 6 New health economic modelling will not be required.

7 3.5 Draft question

- 8 While writing the scope for these guidelines for update, we have identified the
- 9 following key issue and draft review questions related to it:

NICE guidelines: Bronchiolitis in children: diagnosis and management. Update scope.

- 1 At what oxygen saturation threshold should a child with bronchiolitis be:
- 2 referred to hospital
- 3 admitted to hospital
- 4 given supplementary oxygen
- 5 discharged?

3.6 PICO table for the draft review question

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Population	Children with suspected or confirmed bronchiolitis
Intervention	Oxygen saturation thresholds, in air
Comparator	≥92% oxygen sturation in air
Outcomes	For referral, admission or discharge; change in respiratory rate, change in oxygen saturation, feeding difficulty, readmission rates
	For management; length of stay, use of oxygen, CPAP or mechanical ventilitation Adverse effects

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1 4 NICE quality standards and NICE Pathways

2 4.1 NICE quality standards

- 3 NICE quality standards that may need to be revised or updated when
- 4 this guideline is published
- Bronchiolitis in children (2016) NICE quality standard QS122

6 4.2 NICE Pathways

- 7 When this guideline is published, if needed, we will update the existing NICE
- 8 Pathway on <u>bronchiolitis</u>. . NICE Pathways bring together everything NICE
- 9 has said on a topic in an interactive flowchart.

10 5 Further information

This is the scope for this guideline update.

The guideline is expected to be published: to be confirmed.

You can follow progress of the guideline.

Our website has information about how NICE guidelines are developed.

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