

# Pediatric Cold DHA CSSP Algorithm

## \*\*Exclusion Criteria\*\*

Any "yes" responses to the exclusion criteria require provider notification for a plan of care.

- Fever >101 for more than 48 hours
- Pregnant
- Muffled voice or drooling
- Wheezing/shortness of breath/stridor or noisy breathing
- Significant sputum production
- Cough lasting more than 8 weeks
- Symptoms worsen after 5-7 days or not improved after 10 days
- Chest pain
- Abdominal pain
- Vomiting or diarrhea
- Dizziness or fainting
- Symptom of dehydration or unable to tolerate liquids
- History of Asthma or prescribed albuterol inhaler; COPD; Chronic Bronchitis; Cystic Fibrosis or another chronic lung disease
- History of Diabetes, Cancer, Chronic Kidney Disease, HIV, Taking Immunosuppressants
- Smoker

**IMPORTANT:**  
Vital signs outside the normal ranges must be repeated after 5 mins & both sets reported to the provider for plan of care.

### Normal Vital Signs

	6-9y	10-11y	12-15y	16+y
SBP	97-115	102-120	110-131	90-140
DBP	57-76	61-80	64-83	60-90
HR	75-118	75-118	60-100	60-110
RR	18-25	18-25	12-20	12-20
Temp	<101.5	<101.5	<101.5	<101.5
O2 sat	>95%	>95%	>95%	>95%

## \*\*Differential Criteria\*\*

If 2 or more of these symptoms have been present less than 48 hours, notify provider for care plan:  
chills, sweats, malaise, myalgia, arthralgia, headache, fever, nonproductive cough

Prior to the patient leaving the clinic, offer a patient ed handout and advise patient/caregiver to follow up if symptoms worsen or are not improving after 2-3 days of treatment.

Provider will review/sign the EHR note and close the encounter.

Patients age 6-18 years presenting to the clinic with symptoms of a common cold (stuffy nose, nasal discharge, post-nasal drip, sneezing, cough, sore/scratchy throat, fever, ear fullness, muscle aches)

Walk-in: encounter created

Support staff completes the DHA CSSP following the EHR documentation process.

**\*\*Exclusion Criteria\*\***  
Any "yes" responses from the Exclusion Criteria Box or abnormal vital signs?

Yes

Support staff will consult with the provider about the plan of care.

No

**\*\*Differential Criteria\*\***  
Any "yes" responses from the Differential Criteria Box on the left?

Yes

No

If all responses to exclusion and differential criteria are "No" and vital signs within normal range, continue with the protocol.

Ensure thorough documentation of all aspects of the visit are entered into the EHR (e.g. patient education, counseling, and/or follow-up care instructions).

Support staff will discuss supportive & symptomatic care, including:

- adequate hydration; drink plenty of fluids
- salt water gargle for sore throat
- wash hands regularly to avoid the spread of infection
- cover your cough with your arm or a tissue.
- Honey for cough; menthol vaporizer; hot, steamy shower
- OTC medications as desired, could include the following: Guaifenesin, pseudoephedrine, Cepacol lozenges, ibuprofen\*, acetaminophen, saline nasal spray, Afrin nasal spray, zinc

\*Unless pregnant, history of asthma, kidney failure, stomach upset with NSAIDS, or taking Angiotensin II Receptor Blocker (ARB) or Angiotensin Converting Enzyme (ACE) inhibitor, or an ARB.