

**Northwestern Medicine-West Region
Bronchitis Treatment Guideline Summary**

Basic Point: Since bronchitis is highly likely to be due to a viral infection, symptomatic treatment is recommended and antibiotics are not usually recommended.

Diagnosis of Bronchitis

- Acute respiratory infection with mainly a cough, with or without sputum production, that lasts no more than 3 weeks
- No clinical evidence of pneumonia and the patient is not immunocompromised
- Other possible diagnoses have been ruled out including the common cold, reflux esophagitis, acute asthma, or COPD exacerbation
- If cough > 3 weeks, consider other diagnoses

Clinical Information/Testing

- **Purulent sputum is not predictive of bacterial infection and by itself is not an indication for a CXR**
- Not routinely recommended for diagnosis: viral cultures, serologic assays and sputum analyses
- Consider getting CXR if:
 - HR > 100 bpm
 - RR > 24 breaths/min
 - Temp > 100.4°F (>38°C)
 - Lung examination suggestive of focal consolidation

Symptom Management

- Antitussives-Adult (multiple options for these, products containing dextromethorphan or codeine)
 - Dextromethorphan (Robitussin, Delsym) 10-20mg every 4 hours or 30mg every 6-8 hours (max 120 mg/day) [Available as capsules or liquid]
 - Guaifenesin plus Codeine 400mg/10 or 20mg tab: 1 tab every 4-6 hours (max 6 tabs/day)
 - Guaifenesin plus codeine liquid—dosing depends on concentration
 - Benzonatate (Tessalon Perles) 100-200mg PO TID PRN (Max 600mg daily)
- Beta₂-agonist bronchodilator for short-term treatment ONLY in patients with significant wheezing
 - Albuterol neb or inhaler

[Not recommended per guideline: antibiotics, mucolytic agents (guaifenesin)]

Patient Education

- Antibiotics not recommended
- Condition is a self-limited respiratory disorder
- Cough may last up to 3 weeks
- Rest and increase oral fluid intake
- Smoking cessation and avoidance of second-hand smoke

Reference:

- 1) Michigan Quality Improvement Consortium. Management of uncomplicated acute bronchitis in adults. Southfield (MI): Michigan Quality Improvement Consortium; 2012 Sep. 1 p.