# Cough/breathlessness pathway for children ≥ 1 year of age

**Clinical support tool for community pharmacists**

<table>
<thead>
<tr>
<th>Clinical findings</th>
<th>Green – low risk</th>
<th>Amber – intermediate risk</th>
<th>Red – high risk</th>
</tr>
</thead>
</table>
| **Colour Activity** | • Normal colour of skin, lips and tongue  
• Content/smiles  
• Stays awake/awakens quickly | • Pale  
• No smile  
• Decreased activity/lethargic | • Blue or grey colour  
• No response  
• Unable to rouse or if roused does not stay awake  
• Confused  
• Clinical concerns about nature of cry (Weak, high pitched or continuous) |
| **Respiratory** | • None of amber or red symptoms | • RR >40 breaths/min if age 12 months - 23 months  
• RR >35 breaths/min if age 2-5 years  
• RR >30 breaths/min if age 5-12 years  
• RR >25 breaths/min if age >12 years  
• Mild / Moderate resp distress  
• Audible stridor on exertion/distress only | • Grunting  
• Audible stridor at rest  
• Severe tachypnoea: RR > 10 breaths per minute above amber levels  
• Severe respiratory distress  
• Unable to complete sentences |
| **Circulation / hydration** | • None of amber or red symptoms  
• Able to tolerate some fluids  
• Passing urine | • Cold hands and feet in absence of fever  
• Reduced urine output  
• Not tolerating fluids / repeated vomiting  
• Unable to swallow saliva | |
| **Other** | • None of amber or red symptoms | • Fever for ≥ 5 days  
• Risk factors for severe disease – known asthma, chronic lung disease, bronchiectasis/CF, immunodeficiency etc.  
• Additional parental/carer support required | • Sudden onset and parental concern about inhaled foreign body |

**Green Action**

- Provide cough/breathlessness >1 year safety netting advice
- Confirm they are comfortable with the decisions/advice given.
- Always consider safeguarding issues.

**Amber Action**

- Refer to primary care for review

**Red Action**

- Refer immediately to emergency care – consider whether 999 transfer or parent/taxi most appropriate based on clinical acuity etc.