**Systematic Review Case Scenarios**

1. You are on inpatient service and have been taking care of a 4 month old with bronchiolitis. The infant was initially admitted to the ICU for respiratory distress, but was transferred to 11N on the 4th hospital day with resolved increased work of breathing but a persistent O2 requirement. Your attending suggests starting the child on systemic corticosteroids because she is getting impatient with the prolonged length of stay. You are skeptical, and decide to see where the medical evidence lies.

**Garrison MM. et al. Systemic Corticosteroids in Infant Bronchiolitis: A Meta-analysis. Pediatrics, 2000; 105:e44.**

1. You are taking care of a 2 year old child with Kawasaki Disease who has been sick for 11 days. Her cardiac echo reveals diffuse aneurismal formatio of the coronary arteries. You are wondering if starting the child on corticosteroids early on in the course of her hospitalization would have helped to prevent this complication of her vasculitis.

**Wooditch AC, Aronoff SC. Effect of Initial Corticosteroid Therapy on Coronary Artery Aneurysm Formation in Kawasaki Disease: A Meta-analysis of 862 Children. Pediatrics, 2005;116:989.**

1. You are making rounds on 11N and find a respiratory therapist administering chest PT to the infant mentioned in Scenario #1 (4 mo bronchiolitis). The mother is horrified and the infant is screaming. You decide to see if this sort of barbaric treatment is effective in alleviating symptoms and reducing length of hospitalization.

**Figuls MR, Giné-Garriga M, Granados Rugeles C, Perrotta C. Chest physiotherapy for acute bronchiolitis in paediatric patients between 0 and 24 months old. Cochrane Database of Systematic Reviews 2012.**