Any order preceded by a box must be checked to enable the order. All other orders will be automatically implemented.

Use this standard order form for empiric therapy for patients with Community Acquired Pneumonia admitted to non critical care inpatient units. This form should not be used for patients with the following:
- Neutropenia
- Suspected or documented aspiration pneumonia
- Healthcare associated pneumonia
- Suspected pseudomonas pneumonia
- Immunosuppression/HIV
- Hematologic malignancy
- Sepsis

Questions about specific antibiotic recommendations or classification/diagnosis of community acquired pneumonia should be directed to Infectious Disease, beeper #: 2674.

1. Inpatient Attending: ___________________________ Beeper #: __________
   Inpatient Resident: ___________________________ Beeper #: __________
   ☐ The above physicians have been called and are aware of this patient.

2. Allergies & Reactions: ___________________________ ☐ No known allergies

3. Oxygen Therapy: ☐ Room Air ☐ Nasal cannula – titrate to sp02 greater than _________ ☐ Other

4. IV Fluid Therapy: ☐ IVF type __________ Additive ________ Rate ________ ml/hour
   Stop after _____________ ml or ________ hours
   ☐ Other: ___________________________

National guidelines recommend the following tests:

5. Diagnostic Tests:
   ☐ Chest X-ray: PA and Lateral
   ☐ Portable CXR if patient not able to stand
   ☐ Blood cultures x 2 – before antibiotic administration (if appropriate)
   ☒ Expectorated sputum gram stain and culture (Goal: within 4 hrs; obtain result promptly, at least before second antibiotic dose, to determine spectrum of coverage needed.)
   ☐ CBC with differential
   ☐ Electrolytes, BUN/Creatinine, LFTs
   ☐ Other: ___________________________

6. Empiric Antibiotic Therapy: Hospitalized Patients, Non-ICU (The antibiotics listed below do NOT require ID approval when used with this form)

   Goal: First dose of antibiotics in less than 4 hours

   Date/Time Given Signature
   ☐ Azithromycin 500 mg PO every 24 hours *First Dose Now
   - AND –
   Ceftriaxone 1 gram IV every 24 hours *First Dose Now
   -OR-
   ☐ Azithromycin 500 mg IV every 24 hours *First Dose Now
   - AND –
   Ceftriaxone 1 gram IV every 24 hours *First Dose Now

A generic equivalent may be administered when a drug has been prescribed by brand name unless the order states to the contrary.

Original: To the medical record Yellow Copy: Pharmacy

Approved by: P&T: 7-26-2004 (P-221) Medical Records: ___________ Page 1 of 2
Any order preceded by a box must be checked to enable the order. All other orders will be automatically implemented.

<table>
<thead>
<tr>
<th>Empiric Antibiotic Therapy (cont.)</th>
<th>Date/Time Given</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td>If Cephalosporin allergy or anaphylaxis to Penicillin:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>[ ] Moxifloxacin 400 mg PO every day <em>First Dose Now</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-OR-</td>
<td></td>
<td></td>
</tr>
<tr>
<td>[ ] Moxifloxacin 400 mg IV every day <em>First Dose Now</em></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Other Medications: | | |
|-------------------| | |
| ☐ Albuterol 2.5mg nebulizer treatments every 4 hours PRN wheezing or acute bronchospasm. | | |

Signature: _________________ MD/ARNP/PA Date & Time: _________________

PRINT Name: ____________________________ Pager/Phone#: _________________

A generic equivalent may be administered when a drug has been prescribed by brand name unless the order states to the contrary.
Figure 1. Identification of patient risk class I: Community-acquired pneumonia

- Patients with community-acquired pneumonia
  - Is the patient >50 years of age?
    - Yes
      -Assign patient to risk class I-V based on step two of the prediction rule (Figure 2)
    - No
      - Does the patient have a history of any of the following comorbid conditions?
        - Bronchitis
        - Heart failure
        - Boil
        - Diabetes
        - Other disease
          - Yes
            - Assign patient to risk class I
          - No

Figure 2. Prediction rule scoring system: Community-acquired pneumonia.

If a patient is younger than 51 years and has no coexisting illnesses or no abnormal physical examination findings, then risk class = C. OTHERWISE, circle the following characteristics and add up the score to determine the risk class.

**Patient characteristics**

| Points | Age (years)
|--------|-------------
|        | Woman
|        | Age (years-10)
| Coexisting illnesses | +10
| Neoplastic disease | +30
| Liver disease | +20
| Congestive heart failure | +10
| Cerebrovascular disease | +10
| Renal disease | +10

**Physical examination findings**

| Points | Altered mental status | +20
|        | Respiratory rate 30 breaths/min | +20
|        | Systolic blood pressure <90 mm Hg | +20
|        | Temperature <35°C (95°F) or >40°C (104°F) | +15
|        | Pulse 125 beats/min | +10

**Laboratory and radiographic findings (if study performed)**

| Points | Arterial pH <7.35 | +30
|        | Blood urea nitrogen 30 mg/dL | +20
|        | Serum creatinine 1.3 mg/dL | +20
|        | Glucose >250 mg/dL | +10
|        | Hematocrit <30% | +10
|        | Partial pressure of arterial O2 <50 mm Hg or Pao2 <60% | +10
|        | Bilateral pleural effusions | +10

Total points = Age + sex correction + sum of above circled points

**PSISeverity Index with Point Total and Suggested Therapy**

<table>
<thead>
<tr>
<th>Class</th>
<th>Points</th>
<th>Mortality</th>
<th>Suggested Therapy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Class I*</td>
<td>&lt;51</td>
<td>0.1%</td>
<td>Oral antibiotics at home</td>
</tr>
<tr>
<td>Class I</td>
<td>(51-70)</td>
<td>0.6%</td>
<td>Oral antibiotics at home if vomiting/unreliable, then short stay</td>
</tr>
<tr>
<td>Class II</td>
<td>(71-90)</td>
<td>0.9%</td>
<td>Oral antibiotics at home if vomiting/unreliable, then short stay</td>
</tr>
<tr>
<td>Class III</td>
<td>(91-130)</td>
<td>9.5%</td>
<td>Inpatient stay + IV antibiotics</td>
</tr>
<tr>
<td>Class V</td>
<td>&gt;130</td>
<td>26.7%</td>
<td>Inpatient stay (ICU?) + IV antibiotics</td>
</tr>
</tbody>
</table>

*Younger than 51 years of age and no coexisting illnesses or abnormal physical examination findings.
