

Adult Pneumonia

SUSPECTED LOWER RESPIRATORY TRACT INFECTION

»	Fever >38.9°C [102°F] and at least one of the following: Respiratory rate >25 breaths/minute
	☐ Productive cough
Ol	R .
»	Fever (>37.9°C [100°F] or a 1.5°C [2.4°F] increase above baseline temperature, but ≤38.9°C [102°F]) and cough and at least one of the following: □ Pulse >100 beats/minute □ Rigors □ New onset delirium □ Respiratory rate >25 breaths/minute
01	R
	Afebrile resident with COPD and >65 years and new or increased cough with purulent sputum production
Ol	R
»	Afebrile resident without COPD and new cough with purulent sputum production and at least one of the following:
	Respiratory rate >25 breaths/minute
	☐ New onset delirium
01	R
»	New infiltrate on chest X-ray thought to represent pneumonia and at least one of the following: ☐ Fever (>37.9°C [100°F] or a 1.5°C [2.4°F] increase above baseline temperature) ☐ Respiratory rate >25 breaths/minute ☐ Productive cough
	ference eb M, Bentley DW, Bradley S, Crossley K, Garibaldi R, Gantz N, McGeer A, Muder RR, Mylotte J, Nicolle LE, Nurse B, Paton S, Simor AE,





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Smith P, Strausbaugh L. Development of minimum criteria for the initiation of antibiotics in residents of long-term-care facilities: results of a

consensus conference. Infect Control Hosp Epidemiol. 2001 Feb;22(2):120-4. doi: 10.1086/501875. PMID: 11232875.



TREATMENT

Clinical setting	Risk factors	Preferred therapy	Therapy for life threatening penicillin allergy.∦
Community acquired pneumonia	No comorbidities At least one of	Amoxicillin 1g TID X 5 days Amoxicillin/	Doxycycline 100mg BID for X 5 days Cefpodoxime 200mg
	the following comorbidities: Chronic heart disease Chronic lung disease Chronic liver disease Chronic renal disease Diabetes mellitus Alcoholism Malignancy Asplenia	clavulanate 875/125mg BID for X 5 days PLUS EITHER Azithromycin 500mg X 3 days OR Doxycycline 100mg BID for X 5 days	PLUS EITHER Azithromycin 500mg X 3 days OR Doxycycline 100mg BID for X 5 days

Metlay JP, Waterer GW, Long AC, et al. Diagnosis and Treatment of Adults with Community-acquired Pneumonia. An Official Clinical Practice Guideline of the American Thoracic Society and Infectious Diseases Society of America. Am J Respir Crit Care Med. 2019 Oct 1;200(7):e45-e67.



January 2023 2