

**Regional Order Set**

**Adult Community Acquired  
Pneumonia Management**

Page 1 of 2 *PATIENT LABEL*

**Allergies:** ☐ None known ☐ Unable to obtain

List with reactions: \_\_\_\_\_

1. Blood cultures x 2 (from different sites)
2. Chest x-ray
3. CBC and differential; creatinine, BUN and electrolyte panel (sodium, potassium, chloride and bicarbonate)
4. Sputum culture for gram stain and C+S if available
5. Oxygen saturation and temperature qid x 72 hours
6. CURB-65 score: \_\_\_\_\_ (scoring system on back)
7. If **azithromycin** or **moxifloxacin** ordered, baseline ECG and magnesium is needed for QTc assessment

- ☐ **Regimen A:** For patients requiring admission to hospital medical ward including patients from nursing homes
- **ampicillin** 1 g IV q6h

**Plus one of the following:**

☐ **doxycycline** 100 mg PO bid

**OR**

☐ **azithromycin** 500 mg IV on day 1, then 250 mg PO daily x 4 days

**OR**

☐ **azithromycin** 500 mg IV q24h (if unable to take PO) x 3 days

- ☐ **Regimen B:** For patients requiring admission to hospital ICU

- **cefTRIAxone** 2 g IV q24h

**Plus the following:**

☐ **azithromycin** 500 mg IV on day 1, then 250 mg PO daily x 4 days

**OR**

☐ **azithromycin** 500 mg IV q24h (if unable to take PO) x 3 days

- ☐ **Regimen C:** For patients with documented allergic reaction (anaphylaxis) to penicillins, failed previous beta-lactam therapy or MIC of penicillin to *S. pneumoniae* equal to or greater than 4 mg/L. (Fluoroquinolones have high oral absorption and bioavailability.)

☐ **moxifloxacin** 400 mg PO q24h

**OR**

☐ **moxifloxacin** 400 mg IV q24h

- ☐ **Pneumococcal vaccine** 0.5 mL subcutaneous/IM x 1 dose (if not given in last 5 years) for high risk individuals, such as equal to or greater than 65 years of age; living in residential care facility; chronic lung, heart, liver or renal disease; asplenia; sickle-cell; diabetes; immuno-compromising medications or conditions (refer to [www.bccdc.ca](http://www.bccdc.ca)).

Reassess patient for conversion to oral therapy in 72 hours (criteria on page 2)

**Physician's signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Some significant drug interactions:**

**azithromycin** can increase levels of statins, **carbamazepine**, **cycloSPORINE**, **digoxin**, ergot alkaloids, **felodipine**, **sildenafil**, **tacrolimus**, **theophylline** and **warfarin**.



**CURB-65: Pneumonia severity of illness scoring system**

Patient characteristics	Points assigned	Patient's points
(C) Confusion	1	
(U) Blood urea nitrogen greater than 7 mmol/L	1	
(R) Respiratory rate greater than 30/min	1	
(B) Systolic blood pressure less than 90 mmHg or diastolic less than 60 mmHg	1	
Age greater than or equal to 65 years	1	
<b>Total score</b>		

This prediction rule is to be used as a guideline and does **not** supersede sound clinical judgement.

Score	30 day mortality risk (%)	Site of care recommendation
0 to 1	0.7 to 2.1	Outpatient
2	9.2	Inpatient
3	14.5	Inpatient, consider ICU
4	40	Inpatient, often ICU
5	57	Inpatient, often ICU

**Criteria for switching to oral antibiotic**

- Clinically improving
  - Consistent improvement in fever over the last 24 hours or patient is afebrile (less than 38°C)
  - White blood cells decreasing
  - Hemodynamically stable
- Able to tolerate and absorb oral medication and is **not**:
  - NPO or having difficulties swallowing
  - Unconscious with no OG/NG available
  - Experiencing active GI bleed, GI obstruction/ileus, OG/NG continuous suction, malabsorption syndrome
  - Experiencing severe or persistent nausea, vomiting or diarrhea
- Pathogen is not known to be resistant to the oral antimicrobial to be used

**Discharge criteria:** Switched onto oral antibiotics x 24h plus

- WBC of less than 12
- Stable co-morbid illness
- Normal oxygenation (sat. 90% RA)
- For COPD patients PO<sub>2</sub> greater than 60 mmHg and PCO<sub>2</sub> less than 45 mmHg

Intravenous antibiotic	Oral antibiotic	Total* duration
ampicillin 1 g IV q6h	amoxicillin 500 mg PO tid	7 days
azithromycin 500 mg IV q24h	azithromycin 250 mg PO daily	5 days
cefTRIAXone 2 g IV q24h	amoxicillin-clavulanate 875 mg PO bid or cefixime 400 mg PO daily	7 days
moxifloxacin 400 mg IV q24h	moxifloxacin 400 mg PO daily	7 days

\*Total duration includes both IV and oral treatments given