Pneumonia, Community-Acquired (CAP)

DIAGNOSIS & DISPOSITION

**Signs and Symptoms of Pneumonia**
(in immunocompetent adult)

- ≥1 of the following?
  - Fever ≥37.8°C/100°F
  - HR ≥100 bpm
  - RR ≥24
  - SpO₂ ≤88%
  - Focal rales

**ORDER chest x-ray**

- New infiltrate → DIAGNOSE pneumonia
- No new infiltrate → Consider influenza, bronchitis, or other (see Bronchitis CPM)

**ASSESS risk factors: CURB-65**

- Confusion: not oriented to person, place, or time
- Uremia: BUN ≥20 mg/dL
- Respiratory rate: ≥30 breaths per minute
- Blood pressure: SBP <90 mm Hg
- 65 years or older

- ≥3 CURB-65 factors
- 2 CURB-65 factors
- ≤1 CURB-65 factors

**ICU admit:**
- 2 sets of blood cultures then
- First antibiotic dose before transport (ceftriaxone 1 g IM or IV)

**NON-ICU admit:**
- Consider blood cultures then
- First antibiotic dose before transport (ceftriaxone 1 g IM or IV)

**CONSIDER other factors:**
- SpO₂ ≤88%, no caregiver, multi-lobar infiltrates, plural effusion >5 cm, comorbidities
  - ≥1
  - no other factors
  - outpatient treatment

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Not intended to replace physician judgment with respect to individual variations and needs.
**OUTPATIENT TREATMENT**

**Community-Acquired Pneumonia**

**Mild**
(Previously healthy; no antimicrobial use in past 3 months)

**TREAT mild CAP**

**Antibiotics:**
- **Doxycycline monohydrate** (100 mg orally twice daily for 7 days) OR
- **Azithromycin** (500 mg orally daily for 3 days) PLUS **amoxicillin*** (1,000 mg 3 times daily for 7 days) if pregnant or allergic to **doxycycline**

**Vaccinations:** Influenza and pneumonia vaccines if appropriate

**Moderate**
(COPD, CHF, diabetes, malignancy, or renal failure OR antimicrobial use in past 3 months)

**TREAT moderate CAP**

**Antibiotics:**
- **Doxycycline monohydrate** (100 mg orally twice daily for 7 days) OR
- **Azithromycin** (500 mg orally daily for 3 days) if pregnant or allergic to **doxycycline**
  PLUS:
  - **Ceftriaxone** (1 g IV or IM daily) until stable, then **amoxicillin*** (1,000 mg orally 3 times daily for 7 days)

**EDUCATE and FOLLOW UP:**

- **Patient/family education:** Use Intermountain fact sheet *Pneumonia: Prevention and Care at Home* (also in Spanish)
- **Follow-up visit or phone call in 48 to 72 hours**
- **Follow-up visit in 6 weeks:**
  - Give influenza and pneumococcal vaccines if not already given
  - Repeat CXR for any smoker ≥35 or for any nonsmoker ≥60
  - Provide smoking cessation counseling if appropriate: Use Intermountain booklet *Quitting Tobacco — Your Journey to Freedom* (also in Spanish)

*If beta-lactam allergic: Monotherapy with **levofloxacin** (Levaquin) 750 mg orally once daily for 5 days. Do not combine **levofloxacin** with **doxycycline** or **azithromycin**.