

Original Date	07/2003	Revision Date	08/2009	Withdrawn Date	
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A. **DIAGNOSIS:** Community Acquired Pneumonia Other _____

B. **ALLERGIES:** _____

C. MEDICATIONS

1. IV fluid orders: _____ @ _____ ml/hr

2. Antibiotic orders: (NOTE: Order immediately, give STAT after blood cultures done.)

a. Mild to Moderate Pneumonia:

Option 1:

Ceftriaxone (Rocephin) 1g IV q 24hr

PLUS one of the following:

Azithromycin (Zithromax) 500mg IV q 24hr

Azithromycin (Zithromax) 500mg PO x1, then 250mg daily

Clarithromycin (Biaxin) 500mg PO BID

Option 2:

Moxifloxacin (Avelox) 400mg q 24hr IV PO

b. Serious Pneumonia:

Option 1:

Ceftriaxone (Rocephin) 1g IV q 24hr 2g IV q 24hr

OR

Ampicillin/Sulbactam (Unasyn) 1.5g IV q 6hr 3g IV q 6hr

PLUS one of the following:

Azithromycin (Zithromax) 500mg IV q 24hr

Moxifloxacin (Avelox) 400mg IV q 24hr

Option 2: Beta-Lactam-Allergic

Aztreonam (Azactam) 2g IV q 6hr + Moxifloxacin (Avelox) 400mg IV q 24hr

c. Concern for Pseudomonal Pneumonia:

Piperacillin/Tazobactam (Zosyn) 3.375g IV q 4hr

OR

Aztreonam (Azactam) 2g IV q 6hr **(IF Beta-Lactam Allergy)**

PLUS one of the following:

Moxifloxacin (Avelox) 400mg IV q 24hr

Moxifloxacin (Avelox) 400mg IV q 24 hr + Gentamicin (see

Conventional Gent protocol for dose)

3. Pain/Fever Reducer: Acetaminophen 325mg 1-2 tablets q 4hr prn fever/pain

4. Nebulized Medication: Albuterol nebs q 3hr prn dyspnea

Duonebs q 3hr prn dyspnea

Saline nebs q 3hr prn dyspnea

5. Cough Medication: Guaifenesin/Codeine (Robitussin AC) 5ml PO q 4-6hr prn cough

Tussionex 5ml PO q 12hr prn cough

Benzonate (Tessalon) 100mg PO TID prn cough

6. If currently a smoker: Tobacco Replacement/Cessation Protocol ** Nurse to complete

7. Other medications: _____



D. NURSING

1. Titrate O₂ to keep SAT ≥ _____%
2. T, P, R, BP & SpO₂ q 4h x 3, then q 8h unless abnormal
3. Respiratory vest treatment BID TID QID PRN
4. Incentive Spirometer: _____
5. Activity: _____
6. Diet: _____

E. CHEST X-RAY

- PA & Lateral in Radiology Department **-OR-** Portable Done in ER

F. LAB

- Sputum: gram stain, culture & sensitivity stat Obtained in ER
- Assist patient in obtaining sputum specimen
- Use normal saline neb 3 ml **bullet** to induce sputum for patients unable to produce a specimen within one hour
- If unable to obtain a specimen within 8 hours notify the physician
- S. Pneumonia urinary antigen test Obtained in ER
- Blood cultures x2 stat prior to starting antibiotic therapy Obtained in ER
- CBC/Differential Done in ER
- Hospital chemistry profile Basic **-OR-** Comprehensive Done in ER
- O₂ SAT (oximetry) **-OR-** Arterial blood gases Done in ER

Additional lab tests (when indicated):

- MRSA (nasal swab)
- Legionnaires disease
 - Urine antigen
 - DFA on sputum
- Mycobacterium tuberculosis
 - AFB smear and culture on spontaneous sputum
 - AFB smear and culture on sputum daily x3
- Viral studies
 - RSV antigen on sputum
 - Influenza A and B antigen on sputum
 - Influenza A and B antigen on nasopharyngeal swab
 - Respiratory viral culture on sputum
 - Respiratory viral culture on nasopharyngeal swab
 - Endemic fungi (KOH smear and fungal culture on sputum)
 - Chlamydia pneumoniae (PCR on sputum)
 - Mycoplasma pneumoniae (PCR on sputum)
 - Other _____

G. Studies tomorrow AM

- CBC w/ diff BMP CMP
 CXR, Portable CXR, PA & Lateral

H. Vaccinations

- Nursing to complete the vaccine immunization screening assessment and if the criteria is met give pneumococcal and/or influenza vaccine.

_____/_____/_____ :_____
 Physician Signature Date Time

PATIENT STICKER

