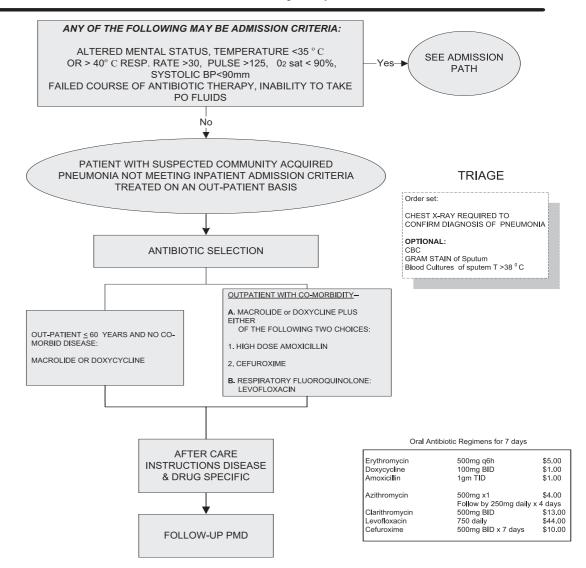


UCI Medical Center Antibiotic Therapy for Out-Patient Treatment for Community Acquired Pneumonia

GOAL: MUST RECEIVE ANTIBIOTICS PRIOR TO DISCHARGE

| Patient Characteristic | Points |
|-------------------------------|---------|
| Demographic Factors | |
| Male age in years | Age |
| Female age in years minus 10 | Age -10 |
| Nursing home resident | 10 |
| Comorbidities | |
| Neoplastic disease | 30 |
| Liver disease | 20 |
| Congestive heart failure | 10 |
| Cerebrovascular disease | 10 |
| Renal disease | 10 |
| Physical examination findings | |
| Altered mental status | 20 |
| Respiratory rate ≥ 30/min | 20 |
| Systolic BP < 90 mmHg | 20 |
| Temperature < 35 °C or ≥40 °C | 15 |
| Pulse ≥ 125/min | 10 |
| Laboratory Findings | |
| PH < 735 | 30 |
| BUN > 29.7 mg/dl | 20 |
| Sodium < 130 mEq/L | 20 |
| Glucose > 250 mg/dl | 10 |
| Hematocrit < 30 % | 10 |
| PO2 <60 mm Hg * | 10 |
| Pleural effusion | 10 |
| Total | |

Stratification of Risk Score Classes based on age, comorbidities and clinical findings. Risk classes I to II are considered low risk. Risk classes IV and V are moderate to high risk CLASS I Low Risk **Out Patient** < 50 years of age No comorbidities (see below) No abnormal physical examination findings (see below) CLASS II to V Recommendations for Care Class II < 70 points Low Risk **Out Patient** Class III 71-90 points Low Risk In Patient Class IV 91-130 Points Moderate In Patient Class V >130 points High In Patient



Risk classification was partially adapted from the Infectious Disease Society of America and the American Thoracic Society, (Fine et al 1997)
EACH PATIENT IS AN INDIVIDUAL AND THE RESPONSES MAY VARY. THIS CLINICAL PATH IS TO BE USED AS A GUIDELINE ONLY.

^{*}Oxygen saturation <90% is also considered abnormal. eg. 50-yr old female with neoplastic disease and respiratory rate ≥30.min=50 -10+30+20=90