

# The Atlantic Provinces Medical Peer Review



## MANAGEMENT OF SPECIFIC DISEASE ENTITIES

### Internal Medicine # 2 – BACTERIAL PNEUMONIA

It is important to note that these guidelines are meant to be of assistance to assessors in making observations. They should not be taken as standards of any of the Atlantic Provinces Licensing Authorities.

General Prevention: influenza and pneumococcal vaccine, smoking cessation, avoid Indiscriminate use of antibiotics for minor URI's

Risk Factors: smoking, alcoholism, COPD, renal failure, hospitalization, post-op, recent influenza, malignancy, altered gag reflex (from stroke or seizure) age, malnutrition, compromised immune system, occupational exposure, poor hygiene

Signs & Symptoms:

- ✓ cough & fever, chest pain, chills, dark, thick, bloody or rust sputum
- ✓ tubular or decreased breath sounds, crackles, dullness to percussion, egophony
- ✓ tachypnea, tachycardia or bradycardia, cyanosis
- ✓ possible confusion, anxiety restlessness; also abdominal pain, diarrhea, anorexia

Diagnosis:

- ✓ tests: blood cultures, chest x-ray, consider urine testing for Legionella or pneumococcal antigen
- ✓ differential diagnosis: viruses, pulmonary embolism with infarction, bronchiolitis obliterans with organizing pneumonia, pulmonary contusion or vasculitis, sarcoidosis, ARDS, pneumothorax

Therapies:

- ✓ hospitalization considered: assessment of co-morbidities, calculation of pneumonia severity
- ✓ medication: outpatient, no co-morbidities: clarithromycin or azithromycin
- ✓ medication: outpatient, no co-morbidities, antibiotic use past 3 months: avoid previously used class, and use respiratory fluoroquinolone plus high dose amoxicillin
- ✓ medication: inpatient: fluoroquinolone or B-lactam agent plus macrolide
- ✓ ICU: Pseudomonas No: Cefotaxime/ceftriaxone/ampicillin plus either a fluoroquinolone or a macrolide
- ✓ ICU: Pseudomonas Yes: an antipseudomonal B-Lactam agent plus either a fluoroquinolone or a macrolide

	N/A	E	S	D
Evidence that general prevention and risk factors have been discussed and considered.				
Diagnostic measures including history, physical exam and medical imaging have been utilized.				
Hospitalization criteria, medication and follow-up all appropriate.				

COMMENTS: \_\_\_\_\_

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