

CAP ORDER SET EXAMPLE

Community Acquired Pneumonia (Pathway A- Non ICU patient)

- **Duration of therapy is 5 days** for patients who defervesce within 72 hours and have **no more than 1** sign of CAP instability at the time of antibiotic discontinuation
- Patients with delayed response should discontinue therapy 48-72 hours after defervesce and have no more than 1 sign of CAP instability at time antibiotic discontinuation

CAP clinical signs of instability (if different then patient baseline status)

1. HR \geq 100 bpm
2. RR \geq 24 breaths/min
3. SBP \leq 90 mmHg
4. Arterial O2 sat \leq 90% or pO2 \leq 60 mmHg on room air
5. Altered mental status

- Preferred Therapy
- PCN allergy without anaphylaxis, angioedema or urticarial
- Severe PCN allergy AND/OR cephalosporin allergy (anaphylaxis, angioedema, hives)

Preferred Therapy

Preferred regimen- ampicillin/sulbactam AND azithromycin IV/PO

- ampicillin-sulbactam (UNASYN) IV 3 g, Intravenous, EVERY 6 HOURS SCHEDULED
- azithromycin (ZITHROMAX) tablet 500 mg, Oral, ONCE
- azithromycin (ZITHROMAX) tablet 250 mg, Oral, ONCE DAILY, starting H+24 Hours for 4 doses
- azithromycin (ZITHROMAX) IV 500 mg, Intravenous, ONCE
- azithromycin (ZITHROMAX) IV 250 mg, Intravenous, EVERY 24 HOURS, Starting H+24 Hours
- doxycycline hyclate (VIBRAMYCIN) capsule- ALTERNATIVE for macrolide allergy 100 mg, Oral, 2 TIMES DAILY

PCN allergy without anaphylaxis, angioedema, or urticarial

Ceftriaxone AND azithromycin

- ceftriaxone (ROCEPHINE) IV 1g, Intravenous, EVERY 24 HOURS
- azithromycin (ZITHROMAX) tablet 500 mg, Oral, ONCE
- azithromycin (ZITHROMAX) tablet 250 mg, Oral, ONCE DAILY, starting H+24 Hours for 4 doses
- azithromycin (ZITHROMAX) IV 500 mg, Intravenous, ONCE
- azithromycin (ZITHROMAX) IV 250 mg, Intravenous, EVERY 24 HOURS, Starting H+24 Hours
- doxycycline hyclate (VIBRAMYCIN) capsule- 100 mg, Oral, 2 TIMES DAILY

Severe PCN allergy AND/OR cephalosporin allergy (anaphylaxis, angioedema, hives)

Levofloxacin

- levofloxacin (LEVAQUIN) tablet 750 mg, Oral, DAILY
- levofloxacin (LEVAQUIN) IV 750 mg, Intravenous, EVERY 24 HOURS