Uncomplicated CAP



Dear _____

YOU ARE A TOP PERFORMER!

Upon reviewing the following Uncomplicated Community Acquired Pneumonia (CAP) patient, we would like to share the following with you. Your patient with FIN# ______, admitted on ______, was given a total duration of ____ days of antibiotics. According to both our evidenced-based Institutional and the Michigan Hospital Medicine Safety (HMS) guidelines, this patient received an appropriate duration of antibiotic treatment.

If you have any questions, please contact xxxx (nurse abstractor)or xxxx (ID physician champion). We appreciate your ongoing efforts to provide Remarkable Patient Care, every patient, every time.

Sincerely,

Hospital Medicine Safety Quality Improvement Team-Ann Arbor

"This is a confidential professional/peer review and quality improvement document of xxxx"