



HMS Pneumonia Definition

1 Radiographic Component + 2 or More Clinical Findings

Radiographic Component ^{1,2,3}	Clinical Findings ¹
Air Bronchograms	Cough
Air Space Density/Opacity/Disease	Increased Secretions/Sputum Production
Aspiration ⁴	Dyspnea/Shortness of Breath or Tachypnea ⁹
Aspiration Pneumonia	Hypoxia/Hypoxemia ¹⁰
Bronchopneumonia	Fever ¹¹ or hypothermia ¹²
Cannot Rule Out Pneumonia	Exam consistent with pneumonia (Rales, Crackles, Dullness on Percussion, Bronchial Breath Sounds, Egophony, or Rhonchi)
Cavitation	WBC >10,000 or < 4,000
Consolidation	
Ground Glass ⁵	
Infection (Cannot Rule Out Infection, Likely Infection)	
Infiltrate (Single Lobe, Multiple, Not Specified, or New or Worsening)	
Loculations	
Mass ⁶	
Necrotizing Pneumonia	
Nodules or Nodular Airspace Disease ⁷	
Pleural Effusion ⁸	
Pneumonia	
Post Obstructive Pneumonia	

1. Radiographic findings and clinical findings are analyzed from 2 days prior to the hospital encounter through day 2 of the hospital encounter when determining pneumonia diagnosis.
2. If a Chest CT and Chest X-Ray or Abdominal CT are done within 1 calendar day of each other within this timeframe, the radiographic findings from the Chest CT will be utilized over those from a Chest X-Ray or Abdominal CT when determining pneumonia diagnosis.
3. If there is documentation of "Interval Improvement or Resolution", "No change from previous/no interval change", "Normal/No abnormalities", or "No evidence of pneumonia", this will be classified as Questionable Pneumonia.
4. If there is documentation of "Pneumonitis" in addition to the documentation of "Aspiration", this will not be counted as a radiographic finding for pneumonia classification.
5. If there is documentation of "Interstitial Lung Disease", "Pulmonary Edema", or "Pulmonary Vascular Congestion" in addition to the documentation of "Ground Glass", this will not be counted as a radiographic finding for pneumonia classification.
6. If there is documentation of "Neoplasm/Metastatic Disease/Malignancy" in addition to the documentation of "Mass", this will not be counted as a radiographic finding for pneumonia classification.
7. If there is documentation of "Neoplasm/Metastatic Disease/Malignancy" or "Interstitial Lung Disease" in addition to the documentation of "Nodules" or "Nodular Airspace Disease", this will not be counted as a radiographic finding for pneumonia classification.
8. If there is documentation of "Pulmonary Edema", "Pulmonary Vascular Congestion", or "Ground Glass" in addition to the documentation of "Pleural Effusion", this will not be counted as a radiographic finding for pneumonia classification.
9. Tachypnea is defined as a respiratory rate of 21 or greater.
10. Hypoxia/Hypoxemia is defined as medical documentation of Hypoxia/Hypoxemia in the 2 days prior to the hospital encounter or on days 1 or 2 of the hospital encounter, lowest PaO₂ on days 1 or 2 of the hospital encounter is 59 or less, lowest oxygen saturation on days 1 or 2 of the hospital encounter is less than 90%, OR a new oxygen requirement from baseline on days 1 or 2 of the hospital encounter.
11. Fever is defined as medical documentation of either fever or rigors in the 2 days prior to the hospital encounter or on days 1 or 2 of the hospital encounter OR a temperature of 38.1 C or greater on days 1 or 2 of the hospital encounter.
12. Hypothermia is defined as a temperature of 36 C or less on days 1 or 2 of the hospital encounter.