When to Contact a Physician for Antibiotics

Suspected Urinary Tract Infection (UTI)

Resident WITH indwelling catheter
The criteria are met to initiate antibiotics if ONE of the below are selected:
- Fever of 100°F (38°C) or repeated temperatures of 99°F (37°C)*
- New back or flank pain
- Acute pain
- Rigors (shaking chills)
- New dramatic change in mental status
- Hypotension (significant change from baseline BP or a systolic BP <90)

Resident WITHOUT indwelling catheter
The criteria are met if ONE of the three situations are met
- **Situation 1:** Acute dysuria alone
- **Situation 2:** Single temperature of 100°F (38°C) AND at least ONE new or worsening of the following:
  - urgency
  - frequency
  - back or flank pain
- **Situation 3:** No fever, but TWO OR MORE of the following symptoms:
  - urgency
  - frequency
  - incontinence

Nurses: Please check box to indicate whether or not criteria are met
- Nursing home protocol criteria are met. Resident may require UA with C&S or an antibiotic.
- Nursing home protocol criteria are NOT met. The resident does NOT need an immediate prescription for an antibiotic, but may need additional observation.

*For residents that regularly run a lower temperature, use a temperature of 2°F (1°C) above the baseline as a definition of a fever.

Fever with Unknown Focus of Infection

Fever (>37.9°C [100°F] or a 1.5°C [2.4°F] increase above baseline temperature)
AND at least ONE of the following:
- Delirium (sudden onset of confusion, disorientation, dramatic change in mental status)
- Rigors (shaking chills)

NOTE: fever + mental status changes that do not meet delirium criteria (e.g. reduced functional activities, withdrawal, loss of appetite) need to be investigated but empiric antibiotics are not needed.

Suspected Lower Respiratory Tract Infection

The criteria are met if ONE of the four situations are met:
- **Situation 1:** Resident with a fever of 102°F (38.9°C) or higher and ONE of the following:
  - Respiratory rate >25 breaths per minute
  - New or worsened cough
  - New or increased sputum production
  - O₂ saturation <94% on room air or a reduction in O₂ saturation of >3% from baseline
- **Situation 2:** Resident with a fever of 100°F (37.9°C) and less than 102°F (38.9°C)
  - Cough and at least ONE of the following:
    - Pulse >100
    - Delirium (sudden onset of confusion, disorientation, dramatic change in mental status)
    - Rigors (shaking chills)
    - Respiratory rate >25 breaths per minute
- **Situation 3:** Afebrile resident with COPD and age >65
  - New or increased cough with purulent sputum production
- **Situation 4:** Afebrile resident without COPD and age >65
  - New or increased cough with purulent sputum production and at least ONE of the following:
    - Respiratory rate >25
    - Delirium (sudden onset of confusion, disorientation, dramatic change in mental status)

Nurses: Please check box to indicate whether or not criteria are met
- Nursing home protocol criteria are met. The resident may have a lower respiratory tract infection and need a prescription for an antibiotic agent.
- Nursing home protocol criteria are NOT met. The resident does NOT need an immediate prescription for an antibiotic, but may need additional observation.

Suspected skin and soft tissue infection

The criteria are met to initiate antibiotics if ONE of situations below are met:
- **Situation 1:** New or increasing pus at a wound, skin, or soft-tissue site
- **Situation 2:** At least TWO of the following:
  - Fever of 100°F (38°C) or repeated temperatures of 99°F (37°C)
  - redness
  - pain
  - warmth
  - swelling that is new or increasing

Nurses: Please check box to indicate whether or not criteria are met
- Nursing home protocol criteria are met. The resident may have a skin and soft tissue infection and need a prescription for an antibiotic agent.
- Nursing home protocol criteria are NOT met. The resident does NOT need an immediate prescription for an antibiotic, but may need additional observation.