# Minimum Criteria for Initiation of Antibiotics in Long-Term Care Residents

## **Suspected Urinary Infection**

· NO indwelling catheter

#### need either:

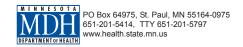
- Acute dysuria
  - 01
- Fever >38.9°C (102°F)
   and at least one of the following:
  - Urgency
  - Frequency
  - Suprapubic pain
  - Hematuria
  - Costovertebral tenderness
  - · New onset urinary incontinence
- WITH indwelling catheter need at least one of the following:
  - Fever >38.9°C (102°F)
  - New costovertebral tenderness
  - Rigors
  - New onset of delirium

#### **Suspected Skin and Soft-tissue Infection**

 New or increasing purulent drainage at wound, skin, or soft-tissue site

#### or

- At least two of the following:
  - Fever >38.9°C (102°F)
  - Redness
  - Tenderness
  - Warmth
  - New or increasing swelling





### **Suspected Respiratory Infection**

- Fever >38.9°C (102°F)
  and at least one of the following:
  - Respiratory rate > 25
  - · Productive cough

or

- Fever >37.9°C (100° F) and cough and at least one of the following:
  - Pulse > 100
  - Delirium
  - Rigors
  - Respiratory rate > 25

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COPD history and purulent cough

or

- New purulent cough and at least one of the following:
  - Respiratory rate > 25
  - Delirium

or

- New infiltrate on chest x-ray and at least one of the following:
  - Respiratory rate > 25
  - · Productive cough
  - Fever >37.9° C (100° F)

For patients who have fever, cough, and at least one of pulse >100, worsening mental status, or rigors, a chest x-ray is recommended.

## **Fever with Unknown Focus of Infection**

- Fever >37.9° (100° F)
   and at least one of the following:
  - New delirium
  - Rigors