



My Patient has Pneumonia – are they suitable for OPAT?

You have decided that your patient is suitable for OPAT based on standard criteria. Now you must determine that your patient's condition is suitable for OPAT. The CURB-65 score (see below) can be used to determine whether your patient should be kept in hospital or not.

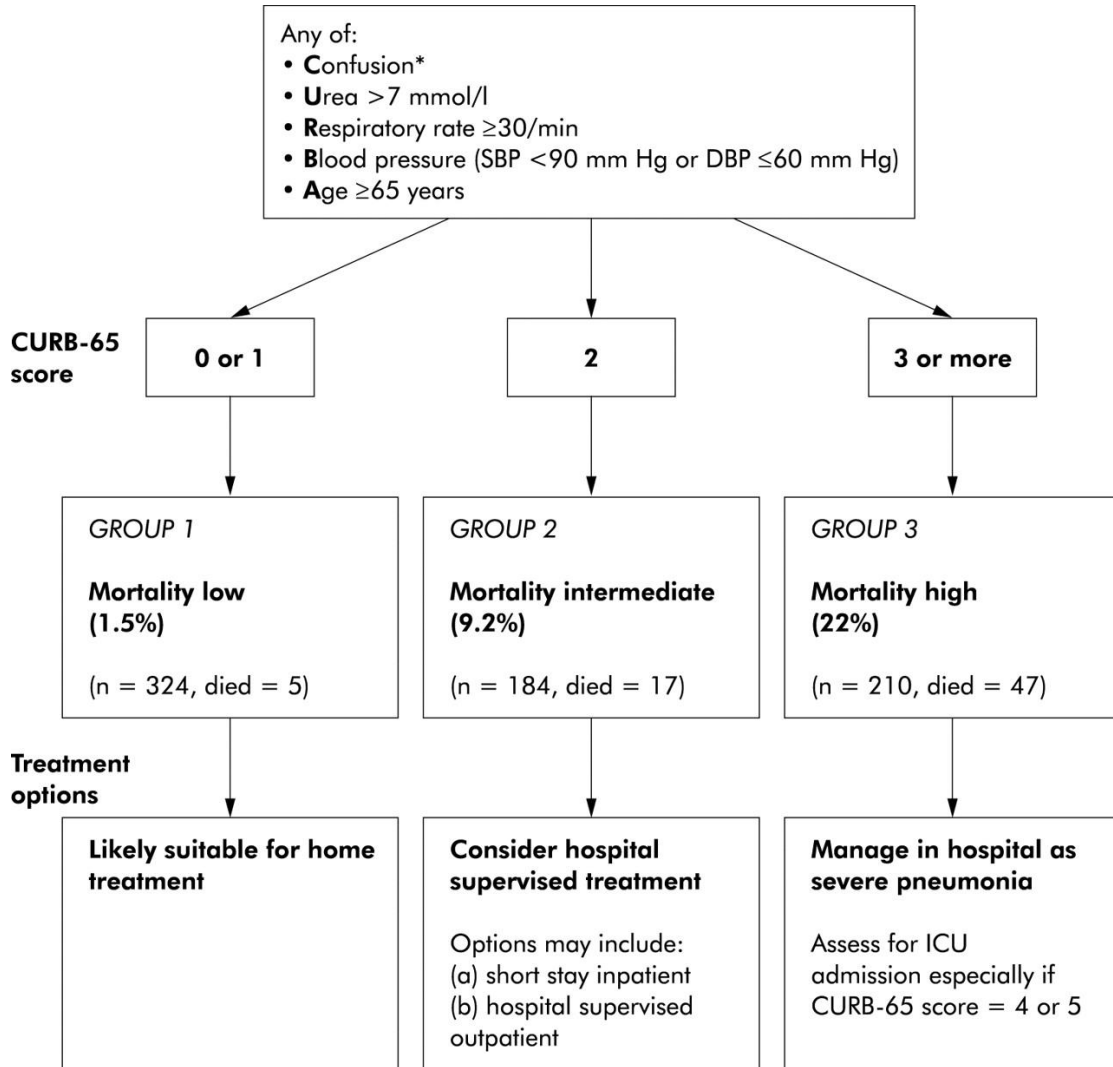
For most patients who do not need to be hospitalized for their pneumonia, a course of oral antibiotics will be entirely appropriate. Equally the majority of patients with an infective exacerbation of COPD with an appropriate CURB-65 score require oral antibiotics alone, as per individual hospital guidelines.

In rare circumstances, patients may benefit from 24-48 hours of intravenous antibiotics as OPAT for pneumonia. This situation may arise in a patient who has known underlying lung disease, with known microbiology requiring an intravenous antibiotic due to the presence of antibiotic resistance e.g. Pt with cystic fibrosis requiring pip/tazobactam for a resistant Pseudomonal infection.

A patient with Pneumonia should not be sent home on OPAT if any of the following are happening:

- Ongoing high fevers which might indicate an abscess
- Ongoing systemic upset with hypotension and tachycardia
- Worsening hypoxia
- CXR findings consistent with a pleural effusion awaiting investigation.
- Unstable co-existent medical problems e.g. unstable blood sugars, poor renal function, co-existent unstable heart failure

The CURB-65 Score



*defined as a Mental Test Score of 8 or less, or new disorientation in person, place or time