

1. Diagnostic Testing

(Recommended if not done in ED or primary care office)

- CXR PA and Lat
- CXR AP

(Recommended if clinically warranted)

- CMP
- ABG (check one) room air Oxygen ____ Liters ____ %FIO2
- CBC
- ECG
- Other _____

2. Respiratory therapy

- Oxygen: O2 protocol (titrate to saturation 92% at rest)
- Pulse oximetry continous every _____ (check one)
- Other _____

Bronchodilator therapy: (combinations utilized for moderate-severe exacerbations)

- Albuterol: MDI: _____ puffs Q_____ with spacer device
Nebulizer : 2.5 mg (unit dose = 2.5mg) Q_____
- Ipratropium: MDI: _____ puffs Q_____ with spacer device
Nebulizer: 0.5 mg (unit dose = 0.5mg) Q_____
- Other: _____

3. Medical Therapies

- NS lock IV
- IVF _____ to run _____ ml/hr.
- Solumedrol 80 mg IV every 8 hours
- Antibiotics (presence of 3 criteria/ see guideline)
 - Amoxicillin 500 milligrams po three times a day
 - Doxycycline 100 milligrams po twice a day
 - Trimethoprim-sulfamethoxazole DS one tablet po twice a day
- Other _____

4. Is patient an active smoker? Yes No Unknown (check one)

- Give patient educational brochure on smoking cessation (record in progress notes when given)

5. Has patient had pneumococcal vaccine within past 5 – 10 years?

- Yes No Unknown Not Indicated In This Patient (check one)
- Give pneumococcal vaccine 0.5ml IM x 1 dose (record in progress notes when given)

6. Has patient had influenza vaccine this season?

- Yes No Unknown Not Indicated In This Patient (check one)
- Give influenza vaccine 0.5ml IM x 1 dose (record in progress notes when given)

Physician Signature

Date