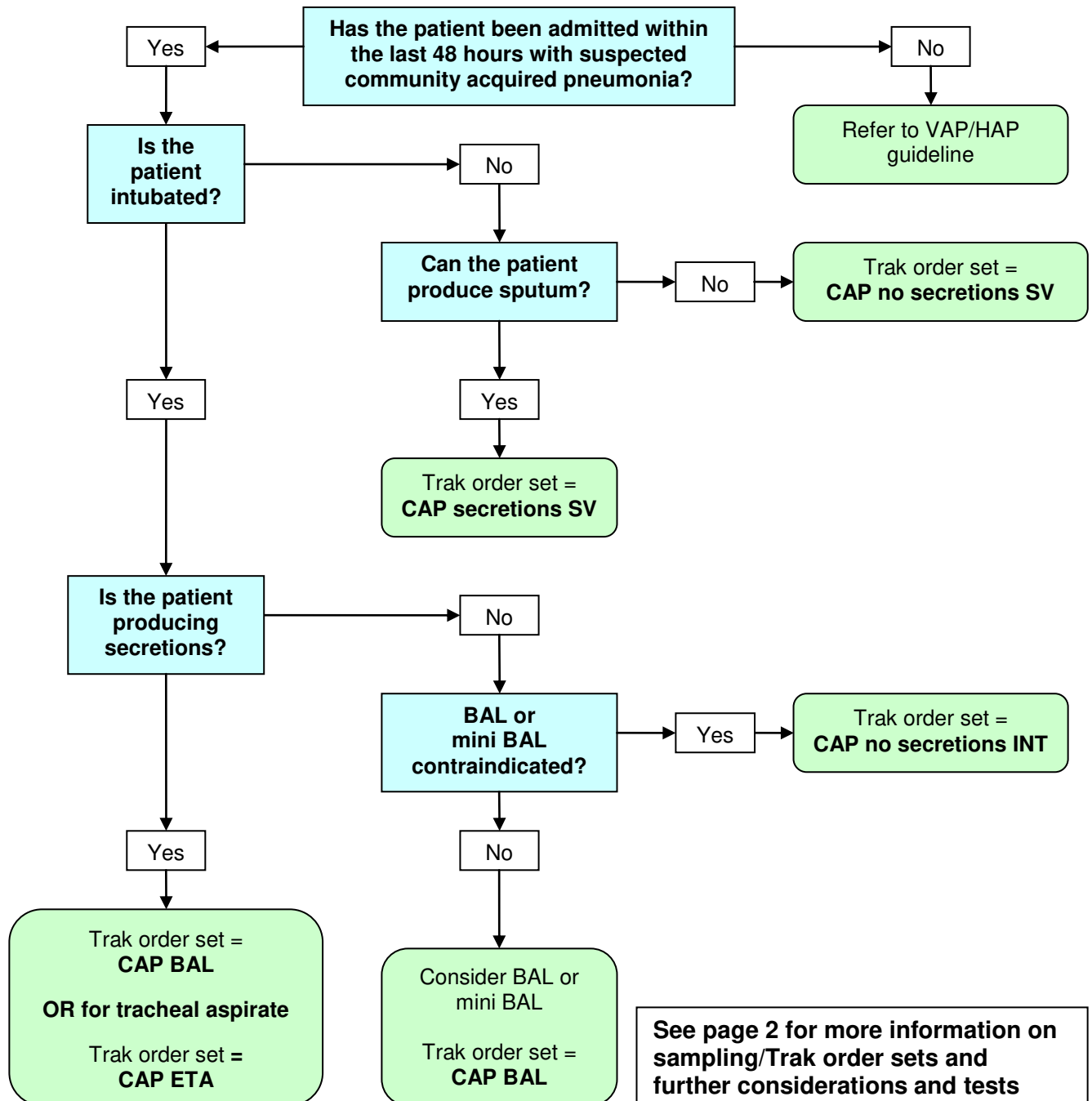


Investigations required for Community Acquired Pneumonia (CAP)

Specimens to be sent to the microbiology laboratory in patients admitted with community acquired pneumonia.

Cultures should ideally be taken prior to starting antimicrobials.



Title: Investigation checklist for Community Acquired Pneumonia	
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Critical Care Guidelines
FOR CRITICAL CARE USE ONLY

Considerations

COVID-19 testing	<ul style="list-style-type: none"> ➤ All patients >70 years and any patient from residential/communal living setting ➤ All patients admitted via unscheduled care ➤ All patients where COVID-19 is clinically suspected
PJP testing	<p>In severe CAP especially when patients are immunosuppressed</p> <ul style="list-style-type: none"> ➤ PJP must be stated as potential pathogen in TRAK request clinical information section.
Legionella, Severe Acute Respiratory Infection, MERS Co-V	Send a deep respiratory specimen e.g. tracheal secretions or BAL or mini BAL or induced sputum.
Travel history	<p>Contact microbiology if recent foreign travel, as some areas are high risk for antibiotic resistance</p> <p>If recently in hotel or holiday resort consider Legionella</p>
Occupational history	<p>Gardening (<i>Legionella longbeachae</i>)</p> <p>Sheep farmer or abattoir worker (Q-fever)</p> <ul style="list-style-type: none"> ➤ For Q fever send EDTA blood sample for PCR <p>Working with birds (<i>Chlamydophila</i> Spp.)</p> <ul style="list-style-type: none"> ➤ If <i>Chlamydophila</i> spp are suspected this must be stated as a potential pathogen in the Trak clinical infection section
Immunosuppression	<p>PJP, cytomegalovirus, aspergillus and mycobacteria</p> <ul style="list-style-type: none"> ➤ Send BAL or induced sputum ➤ Specifically request on Trak and label specimens for these tests
Anti-streptolysin O titres	In the absence of positive results, consider convalescent sample 7-10 or more days after symptom onset

Sampling

Trak Order Set	Trak Order Items	Choose site if applicable
CAP no secretions SV	Legionella antigen test (urine)*	
	Swab for Respiratory Viruses	Throat swab
	Blood Culture Ix - ADULT ONLY	Peripheral
	HIV Ag/Ab Antibody screen	
CAP secretions SV (no need to send urine for Legionella)	C&S - Respiratory (Routine Bacteriology)	Sputum
	Secretions non-bal sep09	Sputum
	Blood Culture Ix - ADULT ONLY	Peripheral
	HIV Ag/Ab Antibody screen	
CAP no secretions INT	Legionella antigen test (urine)*	
	Swab for Respiratory Viruses	Throat swab
	Blood Culture Ix - ADULT ONLY	Peripheral
	HIV Ag/Ab Antibody screen	
CAP BAL (no need to send urine for Legionella)	C&S –Respiratory (BAL/Bronchial washings)**	BAL/bronchial washings/mini BAL
	Secretion BAL: resp cmv hsv	BAL/bronchial washings/mini BAL
	Blood Culture Ix - ADULT ONLY	Peripheral
	HIV Ag/Ab Antibody screen	
CAP ETA (no need to send urine for Legionella)	C&S - Respiratory (Routine Bacteriology)	Tracheal aspirate
	Secretions non-bal sep09	Tracheal aspirate
	Blood Culture Ix - ADULT ONLY	Peripheral
	HIV Ag/Ab Antibody screen	

*If it is not possible to obtain deep respiratory samples for PCR **Legionella antigen test (urine)** must be specifically requested by phoning molecular lab triage on X26019 between 0900 and 1700

****Bronchial washings** inform Biomedical Scientist X26021 (or bleep 2900 between 2000-0800). Send to lab with a porter (no tube system). Request urgent quantitative culture set up and assistance with triage for other tests.