

Table 3

## Recommended Empirical Treatment for CAP in the Inpatient Setting

Pneumonia Classification	Standard Regimen	Add MRSA Coverage	Add <i>P aeruginosa</i> Coverage
Nonsevere	<p><i>Monotherapy with a respiratory fluoroquinolone:</i> Levofloxacin 750 mg daily, moxifloxacin 400 mg daily or</p> <p><i>Beta-lactam plus macrolide</i></p> <p><i>Beta-lactam options:</i> Ampicillin-sulbactam 1.5 g-3 g IV q6h, cefotaxime 1 g-2 g IV q8h, ceftriaxone 1 g-2 g IV daily, ceftaroline 600 mg IV q12h</p> <p><i>Macrolide options:</i> Azithromycin 500 mg IV or po daily Clarithromycin 500 mg po bid</p>	<p>If prior respiratory isolation of MRSA,<sup>a</sup> add vancomycin 15 mg/kg IV with interval based on renal function and dose adjusted based on levels or</p> <p>Linezolid 600 mg IV or po q12h</p> <p>If recent hospitalization with receipt of parenteral antibiotics and locally validated risk factors for MRSA, obtain cultures and do not start treatment unless results are positive; if rapid nasal PCR is available, add MRSA coverage if PCR is positive (while awaiting culture results)</p>	<p>If prior respiratory isolation of <i>P aeruginosa</i>,<sup>b</sup> switch beta-lactam from standard regimen to one of the following antipseudomonal beta-lactams: Piperacillin-tazobactam 4.5 g IV q6h, ceftepime 2 g IV q8h, ceftazidime 2 g IV q8h, imipenem 500 mg IV q6h, meropenem 1 g IV q8h, aztreonam 2 g IV q8h</p> <p>If recent hospitalization with receipt of parenteral antibiotics and locally validated risk factors for <i>P aeruginosa</i>, obtain cultures and start treatment only if results are positive</p>
Severe	<p><i>Beta-lactam plus macrolide</i> or</p> <p><i>Beta-lactam plus respiratory fluoroquinolone</i></p> <p><i>Beta-lactam options:</i> Ampicillin-sulbactam 1.5 g-3 g IV q6h, cefotaxime 1 g-2 g IV q8h, ceftriaxone 1 g-2 g IV daily, ceftaroline 600 mg IV q12h</p> <p><i>Macrolide options:</i> Azithromycin 500 mg IV or po daily, clarithromycin 500 mg po bid</p> <p><i>Fluoroquinolone options:</i> Levofloxacin 750 mg daily, moxifloxacin 400 mg daily</p>	<p>If prior respiratory isolation of MRSA or recent hospitalization with receipt of parenteral antibiotics and locally validated risk factors for MRSA,<sup>a</sup> add vancomycin 15 mg/kg IV with interval based on renal function and dose adjusted based on levels or</p> <p>Linezolid 600 mg IV or po q12h</p>	<p>If prior respiratory isolation of <i>P aeruginosa</i> or recent hospitalization with receipt of parenteral antibiotics and locally validated risk factors for <i>P aeruginosa</i>,<sup>b</sup> switch beta-lactam from standard regimen to one of the following antipseudomonal beta-lactams: piperacillin-tazobactam 4.5 g IV q6h, ceftepime 2 g IV q8h, ceftazidime 2 g IV q8h, imipenem 500 mg IV q6h, meropenem 1 g IV q8h, aztreonam 2 g IV q8h</p>

<sup>a</sup> Obtain cultures or nasal PCR to confirm need for continued MRSA therapy or ability to deescalate.

<sup>b</sup> Obtain cultures to confirm need for continued antipseudomonal therapy or ability to deescalate.

CAP: community-acquired pneumonia; MRSA: methicillin-resistant *Staphylococcus aureus*; *P aeruginosa*: *Pseudomonas aeruginosa*; PCR: polymerase chain reaction.

Source: References 4, 9.

# Cms Cap Guidelines

**Betty A. Forbes, Daniel F. Sahm, Alice  
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## Cms Cap Guidelines:

*A Practical Guide to Medicare Appeals* Kathleen Scully-Hayes,Daniel A. Cody,2007 A Practical Guide to Medicare Appeals describes the steps necessary to successfully resolve appeals of all types of Medicare determinations Co authored by a CMS hearing officer and a private practitioner with years of Medicare appeals experience this book will walk practitioners through every step of the very confusing and sometimes self contradictory rules so that appeals can be decided on their merits rather than barred for procedural rules violations

### **Community Acquired Pneumonia: Controversies and Questions, an**

**Issue of Infectious Disease Clinics** Thomas M. File Jr.,2013-03-28 Pneumonia is the leading cause of death due to infectious disease This issue of Infectious Disease Clinics guest edited by Tom File focuses on the controversies and questions surrounding community acquired pneumonia including the potential benefits of identifying biomarkers for management of CAP which could someday become a part of routine diagnostic testing for CAP the best therapies for influenza viral causes of pneumonia the most common form of the disease in children and clinical scoring tools to help predict long term outcomes The issue also discusses how to approach MRSA as a cause of CAP and how to approach the non responding patient

**Medicare and Medicaid Guide** ,1969 *Ensuring Accuracy and Accountability in Laboratory Testing* United States. Congress. House. Committee on Government Reform. Subcommittee on Criminal Justice, Drug Policy, and Human Resources,2004 **Ensuring Accuracy and Accountability in Laboratory Testing:.... Serial No. 108-252, July 7, 2004, 108-2 Hearing, \*. ,2005**

**Code of Federal Regulations, Title 42, Public Health, Pt. 414-429, Revised as of October 1, . 2017** Centers for Medicare and Medicaid Services (U S ),Office Of The Federal Register (U S,Centers for Medicare and Medicaid Services (U.S.),2018-01-11 The Code of Federal Regulations is a codification of the general and permanent rules published in the Federal Register by the Executive departments and agencies of the United States Federal Government This print ISBN is the official U S Federal Government edition 2 CFR Parts 414 429 covers federal regulations

rules and processes for the Centers for Medicare and Medicaid Services within the United States Department of Health and Human Services This print volume part of the annual2017 print subscription covers topics such as payment for Part B Medical and other health services ambulatory surgical services hospice care Medicare Advantage Program conditions for Medicare payment Medicare contracting and more Medicare beneficiaries and participants internal medicine and geriatric physicians health practitioners hospice care facilities and home services personnel and volunteers may be interested in this volume Additionally students pursuing coursework in personal and community health health science terminology patient care primary care speech pathology and occupational therapy or rehabilitation for elder populations Related products Aging resources collection is available here <http://tpps.bookstore.gpo.gov/catalog/aging> Other products produced by the Center for Medicare and Medicaid Services CMS are available here <https://bookstore.gpo.gov/agency/centers/medicare-and-medicaid-services/cms> Your Guide to Choosing a Nursing Home or Other Long Term Services Supports is available here <https://bookstore.gpo.gov/agency/centers/medicare-and-medicaid-services/cms>

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**Revised as of October 1. 2011** Office of the Federal Register (U.S.) Staff, 2012-01-09    **PSAP, Pharmacotherapy Self-assessment Program: Science and practice of pharmacotherapy I, Science and practice of pharmacotherapy II** American College of Clinical Pharmacy, 2002    *Code of Federal Regulations, Title 40, Protection of Environment, Pt. 63 (Sec. 63. 6580 to 63. 8830), Revised As of July 1 2016* Office of the Federal Register (U.S.), 2016-11-04 CFR 40 Parts 63 Section 63 6580 to 63 8830 continues coverage on the United States Environmental Protection Agency In this volume you will find rules processes procedures and regulations relating to the national emission standards emissions limitations testing maintenance and compliance requirements for hazardous air pollutants for source categories such as combustion engines lime manufacturing plants miscellaneous coating manufacturing and more Audience Personnel managing manufacturing plants organic compound architectural coatings production home air radiation technicians engine cooling engineers research engineers quartermaster and chemical equipment repairers experienced service technicians including mechanics equipment managers compliance officers environmental inspectors and environmental scientists may be interested in this volume Related products Pollution resources collection is available here <https://bookstore.gpo.gov> catalog environment nature pollution Other products produced by the United States Environmental Protection Agency EPA can be found here <https://bookstore.gpo.gov> agency 544    [Harrison's Principles of Internal Medicine, 18th Edition](#) Dan Longo, Anthony Fauci, Dennis Kasper, Stephen Hauser, J. Jameson, Joseph Loscalzo, 2011-07-21 The most trusted textbook in medicine featuring the acclaimed Harrison's DVD with 57 additional chapters and exclusive video and tutorials Now presented in TWO VOLUMES As reviewed by JAMA With the 18th edition Harrison's Principles of Internal Medicine retains its standing as a definitive clinical reference and remains an outstanding foundation for any physician or physician in training In many regards Harrison's remains synonymous not just with internal medicine but with medicine in general The editors of the 18th edition have skillfully balanced tradition with the desire and need for innovation The result is a book that remains as fundamental to current medical practice as the first edition was in 1949 JAMA Extensively revised and expanded by the world's leading physicians Harrison's Principles of Internal Medicine 18e continues to set the standard as the pinnacle of current medical knowledge and practice offering the definitive review of disease mechanisms and management CURRENT All chapters have been completely updated to reflect the latest knowledge and evidence and important new chapters have been added

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