

McKesson
Readmissions Resource™



PNEUMONIA
Prevent • Diagnose • Treat

MCKESSON

Guide Reference

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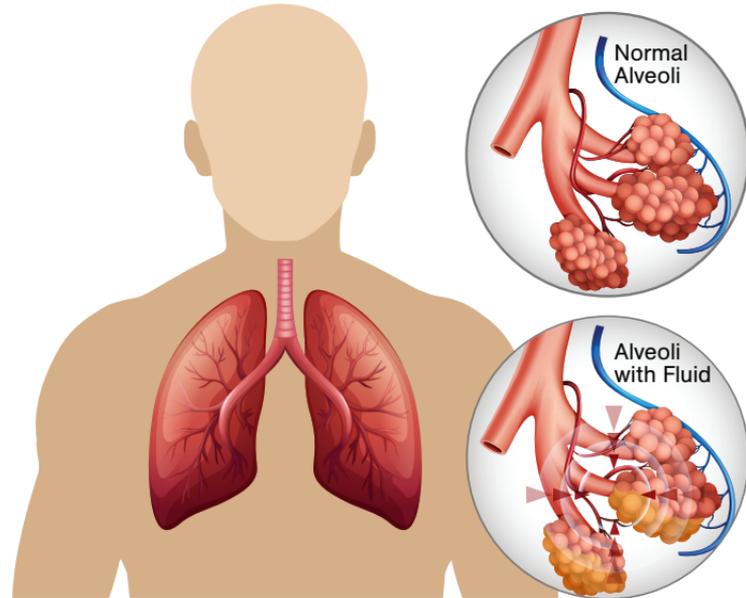
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Overview of Pneumonia

Pneumonia is an infection of the lungs that can cause mild to severe illness in people of all ages. Viruses, bacteria and fungi can all cause pneumonia. **Common symptoms include cough, fever and trouble breathing.**

Bacteria and viruses that commonly cause pneumonia in the community are different from those in healthcare settings. A common cause of bacterial pneumonia is ***Streptococcus pneumoniae* (pneumococcus)**.



Pneumonia Statistics

About **50,000**

people die from the disease each year in the U.S.

Pneumonia is the most common cause of sepsis and septic shock, causing

50% of all episodes



About

1 million

adults in the U.S. seek care in a hospital due to pneumonia every year

Number of visits to emergency departments with pneumonia as the primary diagnosis:

1.3 million



Pneumonia, or lower respiratory tract infection (LRTI) is the **second most common** cause of infection among nursing home residents



Pneumonia and Readmissions

Hospital Readmissions Reduction Program (HRRP)

Pneumonia is one of the top ten causes of a readmission, particularly in elderly patients. CMS includes the following six condition/procedure-specific 30-day risk-standardized unplanned readmission measures in the program:

- Acute Myocardial Infarction (AMI)
- Chronic Obstructive Pulmonary Disease (COPD)
- Heart Failure (HF)
- **Pneumonia**
- Coronary Artery Bypass Graft (CABG) Surgery
- Elective Primary Total Hip Arthroplasty and/or Total Knee Arthroplasty (THA/TKA)



Signs and Symptoms of Pneumonia

The signs and symptoms of pneumonia may include:



Fever, sweating and chills



Rapid, shallow breathing



Loss of appetite, low energy and fatigue



Nausea and vomiting
(especially in small children)



Cough

(which may produce greenish, yellow or even bloody mucus)



Shortness of breath



Sharp or stabbing chest pain
(that gets worse when you breathe deeply or cough)



Confusion

(especially in older people)



Risk Factors

General risk factors that increase the chance of getting pneumonia include:

- Chronic lung disease (COPD, bronchiectasis, cystic fibrosis)
- Cigarette smoking
- Dementia, stroke, brain injury, cerebral palsy or other brain disorders
- Immune system problems (during cancer treatment, or due to HIV/AIDS, organ transplant or other diseases)
- Other serious illnesses, such as heart disease, liver cirrhosis or diabetes
- Recent surgery or trauma
- Inadequate oral care
- Surgery to treat cancer of the mouth, throat or neck



NHAP (Nursing Home Acquired Pneumonia) risk factors include:

- Increasing age, poor functional status, dementia, co-morbid conditions, male gender, swallowing difficulty, inability to take oral medications and inadequate oral care have been identified as risk factors
- Medications such as anti-psychotics, anticholinergics, H2 receptor blockers and proton pump inhibitors have also been linked to a higher risk



Prevention Overview

To help prevent hospital readmission, ask these questions:

In the pre-admission process:

- Do you have a listing of services/capabilities to ensure your facility meets the specific acuity level of the patient or resident?
- Are the hospital discharge instructions complete and include advance directives?
- Does your facility have a process in place to ensure readiness for admissions?

In the discharge planning process:

- Are you starting the discharge process upon admission? Is it interdisciplinary?
- Are you properly discharging patients and residents with clear/concise instructions?
- Is social services completing a post-discharge follow-up to ensure patient or resident well-being?

In the post-admission process:

- Are you doing quality rounding for at least the first seven days? Is upper management involved?
- Are nurses proficient in clinical assessment skills? How do you educate your staff members?
- Are you using Situation, Background, Assessment, Recommendation (SBAR) or an equivalent system to ensure proper/informed communication?

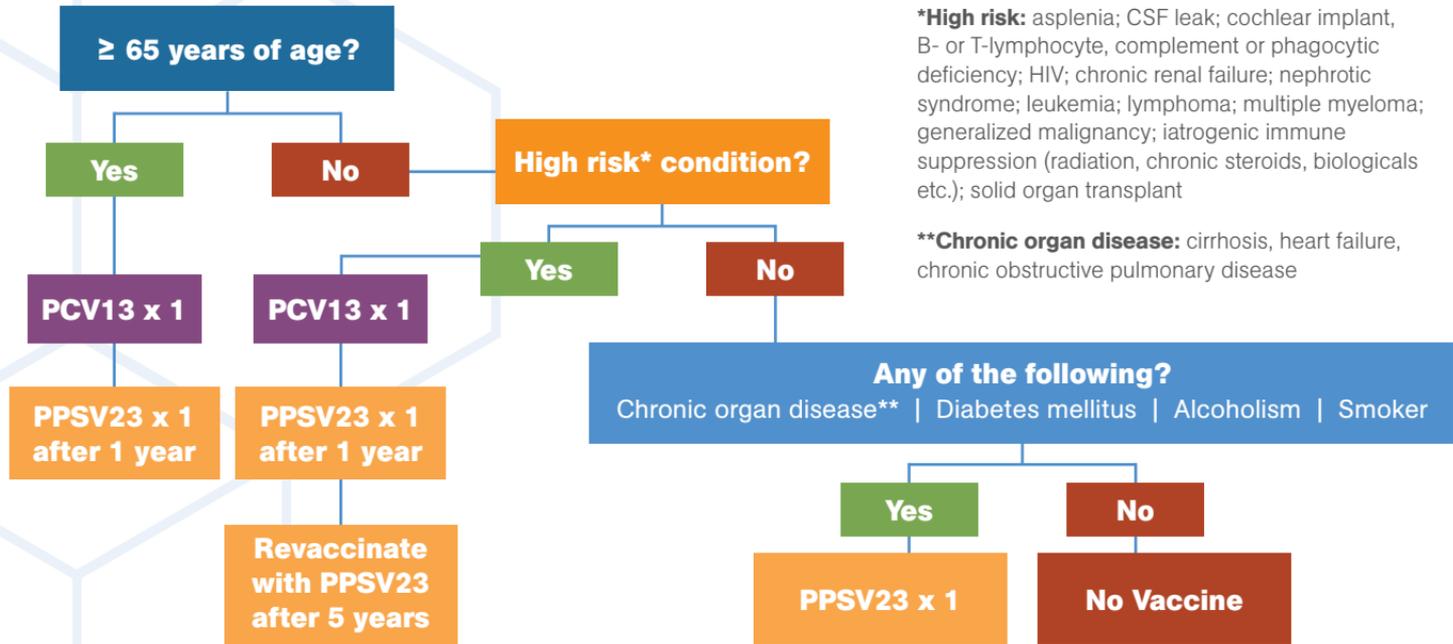


Preventative Measures for Patients

- Promote hand hygiene and infection prevention, and control precautions with peers, staff, patients/residents and visitors. Handwashing is the best way to stop the spread of infections as 80% of common infections can be spread by the hands.
- Provide pneumococcal and annual influenza vaccines for patients/residents
- Recommend that all facility staff receive an annual influenza vaccination. Staff should stay home if they develop influenza-like symptoms.
- Help patients/residents to stop smoking and to avoid exposure to environmental tobacco smoke. Smoking is the strongest independent risk factor for invasive pneumococcal disease in adults.
- Ensure patients/residents have good oral hygiene
- Vitamin E supplementation has appeared to be protective from (re)hospitalization for any disease following discharge from hospitals for pneumonia infection



Choosing Pneumonia Vaccines



Administering Pneumococcal Vaccines

Do not use any pneumococcal vaccine beyond the expiration date printed on the label.

Administer pneumococcal polysaccharide vaccine (PPSV23) intramuscularly or subcutaneously.
Administer pneumococcal conjugate vaccine (PCV13) intramuscularly.

ROUTE	AGE	NEEDLE GAUGE AND LENGTH	INJECTION SITE
Intramuscular injection	Adults, 19 years and older	22–25-gauge	Deltoid muscle of arm
	130 lbs (60 kg) or less	1 inch (25 mm)	
	130–152 lbs (60–70 kg)	1 inch (25 mm)	
	Men, 152–260 lbs (70–118 kg)	1–1.5 inches (25–38 mm)	
	Women, 152–200 lbs (70–90 kg)	1–1.5 inches (25–38 mm)	
	Men, 260 lbs (118 kg) or more	1.5 inches (38 mm)	
	Women, 200 lbs (90 kg) or more	1.5 inches (38 mm)	



Administering Pneumococcal Vaccines

Single-dose vials

Withdraw 0.5 mL from the vial using a sterile needle and 1 cc syringe free of preservatives, antiseptics and detergents.

Single-dose, prefilled syringe

The package does not contain a needle. Attach a sterile needle to the prefilled syringe by twisting in a clockwise direction until the needle fits securely on the syringe.

For detailed vaccine administration guidelines visit:

<https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/administration.html>



Preventative Products

	MANUFACTURER	MANUFACTURER #	ITEM DESCRIPTION
VACCINES			
	Merck	6483703	Pneumovax® 23 Pneumonia Vaccine, 0.5 mL
	Pfizer	5197102	Prevnar 13® Syringe, 0.5 mL
INFECTION PREVENTION			
	Avadim	HXC-08Z	Theraworx® Protect, Advanced Hygiene and Barrier System, 8 oz.
	Avadim	HXC-04Z	Cleanser, Skin Theraworx® Foam, 4 oz.
	McKesson	53-27033-8C	Hand Sanitizer with Aloe, Premium Ethyl Alcohol Gel, Bottle, 8 oz.
	McKesson	53-27037-18	Hand Sanitizer with Aloe, Premium Ethyl Alcohol Gel, Pump Bottle, 18 oz.
	McKesson	53-28067-18	Antimicrobial Soap, Lotion, Pump Bottle, Herbal Scent, 18 oz.



Preventative Products

	MANUFACTURER	MANUFACTURER #	ITEM DESCRIPTION
ORAL CARE			
	McKesson	959	Toothbrush, Green, Adult Soft
	McKesson	16-9571	Toothpaste, Mint Flavor Tube, 1.5 oz.
	McKesson	16-DEN-1	Denture Cleaner Tablet
	McKesson	56-70293	Denture Cups, Aqua Snap-On Lid, Single-Patient Use, 8 oz.
	McKesson	150-MW4OZ	Mouthwash, Alcohol-Free Mint Flavor, 4 oz.
	McKesson	4832	Oral Foam Swabstick, Untreated
	McKesson	4833	Oral Foam Swabstick, Dentifrice Mint
	McKesson	989	Oral Swabstick, Lemon Glycerin



Diagnosis

Sometimes pneumonia can be difficult to diagnose because the symptoms are so variable and are often very similar to those seen in a cold or influenza. To diagnose pneumonia, and to try to identify the pathogen that is causing the illness, the below steps may be considered:

1. Medical history

Ask questions about signs and symptoms, and how and when they began. To help figure out if infection is caused by bacteria, viruses or fungi, you may ask questions about possible exposures, such as:

- Any recent travel
- Occupation
- Contact with animals
- Exposure to other sick people at home, work or school
- Whether they have recently had another illness



Diagnosis

2. Physical exam/Auscultation

Listen to lungs with a stethoscope. Rumbles, crackles or bubbling often indicate pneumonia, and absent breath sounds and/or wheezing may also be present.

3. Diagnostic tests

If you suspect pneumonia, you might recommend some tests to confirm the diagnosis and learn more about the infection. These may include:

- Blood tests to confirm the infection and to try to identify the germ that is causing the illness
- Chest X-ray to look for the location and extent of inflammation in lungs
- Pulse oximetry to measure the oxygen level in blood. Pneumonia can prevent the lungs from moving enough oxygen into your bloodstream.
- Sputum test on a sample of mucus (sputum) taken after a deep cough, to look for the source of the infection



Diagnosis

If a patient is considered high-risk because of their age and overall health, you may choose to do additional tests, including:

- CT scan of the chest to get a better view of the lungs and look for abscesses or other complications
- Arterial blood gas test, to measure the amount of oxygen in a blood sample taken from an artery, usually in the wrist. This is more accurate than the simpler pulse oximetry.
- Pleural fluid culture, which removes a small amount of fluid from around tissues that surround the lung, to analyze and identify bacteria causing the pneumonia
- Bronchoscopy, a procedure used to look into the lungs' airways. If the patient is hospitalized and treatment is not working well, you may want to see whether something else is affecting your airways, such as a blockage. You may also take fluid samples or a biopsy of lung tissue.



Evaluation

When evaluating how to diagnose and treat an infection, there are resources available to help with decision making.

- SBAR (Situation, Background, Assessment, Request) Toolkit** – Promotes better communication by addressing the specific types of information and tests that clinicians are likely to need for decision making.
- CARE PATH** – Assists with decision making for medical management, including when to refer a patient to the hospital and when to reassess a patient.

The image displays three overlapping medical forms:

- Suspected LRI SBAR:** A form for documenting and reporting suspected lower respiratory tract infection. It includes fields for patient name, date of birth, physician, room, sex, name, and facility phone. It is divided into sections for Situation, Background, Assessment, and Request.
- Nuring Home Acquired Pneumonia Checklist:** A checklist for assessing symptoms of NHAAP (I). It includes sections for 'Measure and record vital signs', 'Assess for symptoms of NHAAP (I)', 'Goals of Care Designation', 'Check & Re-evaluate', 'Additional clinical information', 'Antimicrobial therapy', and 'Assess for transfer to acute care'. It also includes a 'Resident Information' section.
- Resident Care Path:** A flowchart or decision tree for managing a resident with a suspected LRI. It provides a systematic approach to diagnosis and treatment, including when to refer to acute care.



Diagnostic Products

	MANUFACTURER	MANUFACTURER #	ITEM DESCRIPTION
DIAGNOSTICS			
	McKesson	01-768-641-11ABKGM	Adult Sphyg/Sprague B/P Kit, LF Black
	McKesson	01-670BKGM	Lumeon® Classic Stethoscope, Double-Sided Chestpiece, 28", Black
	McKesson	01-660BKGM	Classic Stethoscope, Black, 1 Tube, 21" Tube, Single-Head Chestpiece
	McKesson	16-93651	Fingertip Pulse Oximeter, Battery-Operated, Without Alarm
	Welch Allyn	71WT-B	Welch Allyn Connex® Spot Monitor
POINT OF CARE TESTING			
	Sysmex	POCHI-LAB-KIT	Analyzer, Hematology POCH-100I with Implementation



Treatment Overview

Treatment of pneumonia may include:

1. Incentive spirometry

- Frequently used at the bedside and is single-patient use
- If visible secretions are present on the mouthpiece or connecting tubing, they should be cleaned with soap and water, rinsed and air dried

2. Small-volume medication nebulizers, in-line and handheld

- Clean, disinfect and rinse with sterile water between treatments on the same patient
- Allow to dry and store in a manner that prevents contamination

- Use only sterile fluid and medication and dispense into the nebulizer aseptically
- Use single-dose medication whenever possible
- If multidose vials are used, follow manufacturer instructions for storage and use no more than 28 days from date of opening or until the expiration date (whichever is first)

3. Oxygen humidifiers

- Follow manufacturer instructions for use
- Tubing, prongs and masks should be single-patient use and changed weekly if visibly contaminated or malfunctioning (or according to organization policy)



Culturally Competent Patient Education

- Cultural beliefs and customs influence patients' health behaviors, perceptions of care and interpretation of medical information or advice
- Facilitate trust with patients by demonstrating respect for cultural practices and beliefs that may impact understanding of the disease, treatment, self-management and possible outcomes and risks, and tailor patient education accordingly
- Engage families in care transitions, as appropriate, and leverage cultural beliefs or practices that promote self-care and family or social support
- Link patients to community-based educational programs offered by trusted institutions (e.g., faith organizations, cultural organizations)
- Address cultural factors that may predict medication non-adherence, such as patient perceptions regarding the benefits of Western vs. Eastern medicine and perceptions of susceptibility to disease/harm



Treatment Products

	MANUFACTURER	MANUFACTURER #	ITEM DESCRIPTION
	ANTIBIOTICS		
	WG Critical Care	44567070125	Ceftriaxone, Vial 1gm (25/BX)
	Apotex	60505614205	Cefazolin, Singel Dose Vial 1gm (25/CT)
	Greenstone	59762219803	Azithromycin, Tablet 250mg 3x6 (18/CT)
	WG Critical Care	44567070025	Ceftriaxone, Vial 500mg 15mL (25/BX)
	NorthstarRX	16714029903	Amoxicillin, Capsule 500mg (100/BT)
	NorthstarRX	16714065202	Ciprofloxacin HCL, Tablet 500mg (100/BT)
	NorthstarRX	16714047801	Amoxicillin and Clavulanate Potassium, Tablet 875-125mg (20/BT)
	Teva USA	50111078810	Azithromycin, Tablet 500mg (30/BT)
	Ranbaxy	63304069201	Clindamycin HCL, Capsule 150mg (100/BT)
	Sun Pharmaceuticals	63304061650	Doxycycline, Capsule 100mg (50/BT)



Treatment Products

	MANUFACTURER	MANUFACTURER #	ITEM DESCRIPTION
ANTIBIOTICS			
	Akorn Inc	17478010720	Levofloxacin, Vial 25mg/mL 20mL
	Sandoz	781615752	Amoxicillin, Suspension 400mg/5mL 50mL
	Camber Pharmaceutical	31722072250	Levofloxacin, Tablet 500mg (50/BT)
	Camber Pharmaceutical	31722072320	Levofloxacin, Tablet 750mg (20/BT)
	Epic Pharma LLC	42806031205	Doxycycline Hyclate, Tablet 100mg (500/BT)
	Fresenius Kabi USA	63323013011	Doxycycline Hyclate, Single Dose Vial 100mg 20mL (10/CT)
	NorthstarRX	16714023501	Penicillin V Potassium, Tablet 500mg (100/BT)
	Camber Pharmaceutical	31722072150	Levofloxacin, TAB 250mg (50/BT)
	NorthstarRX	16714023401	Penicillin V Potassium, Tablet 250mg (100/BT)
	Sandoz	781613595	Penicillin G Potassium, Vial (powder) 5mmu (10/CT)
	Mylan	67457032325	Moxifloxacin, Piggyback 400mg/250mL (12/CS)



Treatment Products

	MANUFACTURER	MANUFACTURER #	ITEM DESCRIPTION
RESPIRATORY THERAPY SOLUTIONS			
	Teleflex	200-59	Saline Inhalation Solution, 5mL (100/BX)
	Vyaire Medical	2D0735X	Sterile Water, Inhalation Solution 1000mL (14/CS)
	Vyaire Medical	CN0005	Sterile Water, Inhalation Solution 500mL (18/CS)
	McKesson	16-20039	McKesson Normal Saline, Inhalation Solution, Sterile, 3mL Unit Dose Vial
	McKesson	16-20059	McKesson Normal Saline, Inhalation Solution, Sterile, 5mL Unit Dose Vial
	McKesson	16-00550	McKesson Sterile Water Inhalation Humidifier Adapter Bottle, 500 mL
INHALANTS			
	Nephron Pharmaceutical	487020103	Albuterol+Ipratrop, Amp Neb 0.5-3mg/3mL UD (30/BX)
	Nephron Pharmaceutical	487020160	Albuterol+Ipratrop, Amp Neb 0.5-3mg/3mL UD (60/CT)
	Ritedose Pharmaceuticals	76204090001	Levalbuterol HCL, VL Neb 1.25mg/3mL UD (30/CT)
	Akorn Inc	50383074120	Albuterol Sulfate, Sol Inh 5mg/mL 20mL (1/EA)
	Nephron Pharmaceutical	487950125	Albuterol Sulfate, VL Neb 0.083% 2.5mg/3mL UD (25/BX)



Treatment Products

	MANUFACTURER	MANUFACTURER #	ITEM DESCRIPTION
	B. Braun	L8001	IV Solution, Normal Saline 0.9%, 500 cc
	B. Braun	L8000	IV Solution, Normal Saline 0.9%, 1,000 cc
	B. Braun	352894	IV Admin Set, SafeDAY™ 15 DPM, 106" Tubing, 2 Ports
	B. Braun	473438	Extension Set, 8" Tubing, 1 Port, 0.61 Priming Volume, DEHP-Free
	B. Braun	E8000	Replacement Preparation, Sodium Chloride, 0.9%, Intravenous IV Solution, Flexible Bag, 1,000 mL
	B. Braun	798302	Replacement Preparation, Sodium Chloride, Preservative-Free 0.9% Intravenous IV Solution, Flexible Bag, 250 mL
	B. Braun	4251652-02	Introcan Safety® Peripheral IV Cath, 20 G 1" Sliding Safety Needle
	B. Braun	4252500-02	Introcan Safety® Peripheral IV Cath, 24 G 3/4" Sliding Safety Needle
	KORU Medical Systems	RMS42609	SubQ Infusion Set, HlGH-Flo™, 4 4 x 26 Gauge 9mm 20" Tubing Without Port
	McKesson	25-8821	IV Start Kit, w/ Tegaderm™ Dressing, PVP Prep Pad, Nitrile Gloves



Treatment Products

	MANUFACTURER	MANUFACTURER #	ITEM DESCRIPTION
ORAL HYDRATION			
	ARKRAY	1000003	Pill Swallowing Aid Zero
	ARKRAY	1000002	Pill Swallowing Aid Forte
	Kent Precision Foods	J589-LE800	Food and Beverage Thickener, Thick-It® Original, 6g Container, Individual Packet Unflavored Powder, Consistency Varies By Preparation
	Kent Precision Foods	B451-L9044	Thickened Water, Thick-It® AquaCareH2O® Bottle, Unflavored, Ready-to-Use Nectar, 8 oz.
	Kent Precision Foods	X393-MD600	Electrolyte Replenishment Drink Mix, Sqwincher® Zero Lemon-Lime Flavor, 1.75 oz.
THERAPEUTIC TREATMENT			
	Drive Medical	525DS	Oxygen Concentrator DeVilbiss (Concentrator, Oxygen 5 L with OXY Sensor, 3-Year Warranty)
	McKesson	16-3655LT	Nebulizer Compressor



Treatment Products

	MANUFACTURER	MANUFACTURER #	ITEM DESCRIPTION
THERAPEUTIC TREATMENT			
	McKesson	32637	Cannula Nasal Contrd 7'
	McKesson	32633	Oxygen Mask
	McKesson	32646	25' Tubing
	Teleflex Medical	8884719025	Incentive Spirometer Voldyne®
	Teleflex Medical	1119	25' Tubing
	Teleflex Medical	1623	Swivel Connector
	Vyaire Medical	1325	Cannula Nasal
	Vyaire Medical	1841	Swivel Connector
	Vyaire Medical	1201	Oxygen Mask



Treatment Products

	MANUFACTURER	MANUFACTURER #	ITEM DESCRIPTION
MISC. ITEMS			
	Infection Prevention Products Inc.	IPD-POUCH2.0	Pouch, IPD Microbiostatic with Drawstring, 9.5" x 11"
	McKesson	16-9203	Bedside Bag, Polyethylene



Discharge Planning

Self Care

- Warm, moist air helps clear mucus from lungs; commonly recommended sources include moist, warm clothes near airways or commercial humidifiers
- Deep breathing, combined with coughing, effectively clears mucus and promotes optimal lung function; recommended routines include 2 deep breaths taken 2-3 times each waking hour
- Gently tapping chest while laying down can help move mucus from lungs
- Smoking cessation is greatly recommended
- Drink plenty of fluids (1.5 to 2.5 liters daily) while avoiding alcohol, unless medically restricted
- Maximize physical rest



Discharge Planning

Medication

- Take all doses of any prescribed antibiotic, even if you begin to feel better before finishing
- Avoid any medications that will reduce coughing, unless doctor recommended

Avoiding Infection

- Get vaccinated for the flu and consider the pneumococcal vaccine if applicable
- Wash hands frequently
- Avoid crowds and ask home visitors to wear a mask if feeling ill

Home-use oxygen

- Unless ordered by your doctor, do not change oxygen flow rate
- Ensure you have a reserve oxygen supply and keep the contact information for your provider readily available
- Absolutely no smoking around oxygen source



Discharge Planning

When to call for help

- Experience new fever
- Breathing becomes faster
- Leaning forward is required to breathe comfortably
- It becomes more difficult to breathe, or if breaths are short and you still feel breathless
- Breathing with chest pain
- New-onset, frequent headaches
- Coughing up dark-colored mucus or blood
- Notable exhaustion or drowsiness
- Blue coloration of skin around fingernails or fingertips

Data shows that patients that utilize home health services within 14 days of discharge are **25% more likely** to avoid a readmission within 30 days of discharge.



Pneumonia Management Plan

Green Zone: In Control

- ✓ I am breathing easily
- ✓ I have no fever
- ✓ I am not coughing, wheezing, or experiencing chest tightness or shortness of breath
- ✓ I am able to maintain my normal activity level

Green Means I Should:

- Continue to take my medicine as ordered
- Balance activity and rest periods
- Drink plenty of water, unless ordered otherwise
- Take a deep breath and cough 2–3 times every hour to open up my lungs (Coughing helps to clear my airways)

Yellow Zone: Caution

- ✓ I have an increase or change in the color of my mucus (phlegm)
- ✓ I am coughing or wheezing more than usual
- ✓ I become short of breath with activity
- ✓ I have a fever of 100.5 F or greater oral or 99.5 F or greater under the arm
- ✓ Need more pillows or need to sleep sitting up

Yellow Means I Should:

- Contact my physician, and share my symptoms

Red Zone: Medical Alert

- ✓ I am experiencing unrelieved shortness of breath
- ✓ I have a change in the color of my skin, nails, or lips to gray or blue
- ✓ I have unrelieved chest pain
- ✓ I experience an increased or irregular heartbeat

Red Means I Should:

- Take action!
- You need to go to the Emergency Room or call 9-1-1 immediately!



This guide has been assembled using the following resources as source material:

<https://www.cdc.gov/dotw/pneumonia/>

<https://www.cdc.gov/nchs/fastats/pneumonia.htm>

<https://www.thoracic.org/patients/patient-resources/resources/top-pneumonia-facts.pdf>

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3319407/>

<https://www.lung.org/lung-health-diseases/lung-disease-lookup/pneumonia>

<https://medlineplus.gov/ency/article/000145.htm>

[https://actt.albertadoctors.org/CPGs/Lists/CPGDocumentList/NHAP-guideline.pdf#search=pneumonia,](https://actt.albertadoctors.org/CPGs/Lists/CPGDocumentList/NHAP-guideline.pdf#search=pneumonia)

<https://www.hsag.com>

<https://actt.albertadoctors.org/CPGs/Lists/CPGDocumentList/NHAP-guideline.pdf#search=pneumonia>

<https://www.nhlbi.nih.gov/health-topics/pneumonia>

<https://blog.rehabselect.net/5-top-reasons-hospital-readmissions>

<http://www.dobugsneeddrugs.org/wp-content/uploads/nhap-checklist.pdf>

<https://www.medprodisposal.com/wp-content/uploads/2017/09/LRI-SBAR-PDF.pdf>

<https://www.hsag.com/globalassets/care-coordination/zone-tools/zonetoolpneumonia508.pdf>

Other Resources:

Caregiver tools - <http://www.decisionguide.org/>

Infection Prevention Tools - <https://www.cdc.gov/longtermcare/prevention/index.html>

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For more information on the McKesson Readmissions Resource™, visit mms.mckesson.com/readmissions-care.

Have additional questions?
Contact our Clinical Resource Team at
mckessonclinicalconnection@mckesson.com.

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