Burn Center Guideline: Ventilator Associated Pneumonia

Presence of 3 out of 4 clinical findings:
-New, persistent, or progressive infiltrate on CXR
-Fever
-Leukocytosis
purulent tracheobronchial secretions

Perform BAL
-Direct endoscope to the segment as directed by CXR
-Instill 20 mL of non-bacteriostatic saline and aspirate. The first aliquot is aspirated and discarded.
Non-bacteriostatic saline is instilled in 20 mL aliquots
-Pooled aspirate is sent to microbiology
-On Wiz Order:
1. type BRB or BAL
2. select the appropriate test
3. in the instruction box type "**quantitative culture**"
-Perform CXR after all bronchs to rule out PTX

Start Empiric antibiotic coverage until culture results return

GRAM NEGATIVE COVERAGE

Jan-April:
Zosyn + Gent

May - August:
Cefepime + Levofloxicin

September-December
Timentin + Tobramycin

GRAM POSITIVE COVERAGE

Vancomycin
or
Zyvox

Culture results

$<10^3$ CFU → No need for continued abx use

$>10^3$ CFUs → Might be pneumonia and repeat BAL as needed; evaluate need for abx

$>10^4$ CFUs → Positive culture, change abx based on ID and sensitivity results

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