



PNEUMONIA

Pneumonia can be a **VIRAL, BACTERIAL, or FUNGAL** infection that attacks the respiratory system. The risk of pneumonia increases with age and is higher for those who reside in Long Term Care facilities.

Risks for pneumonia include:

- Underlying health conditions
 - Heart/lung disease
 - Diabetes
 - Male gender
 - Smoking
- Decreased natural defenses in comparison to a younger person
 - Weaker cough
 - Decreased chest wall mobility
 - Loss of muscle strength
 - Neurological changes
- Certain medications
 - Such as common drugs used to treat dementia, depression, pain, and urinary incontinence in our resident population
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Symptoms of Pneumonia. * Pneumonia can be challenging to spot in older adults as they do not usually show typical signs and symptoms.

- Chest pain when breathing or coughing
- Cough with or without mucus
- Fever
- Shortness of breath
- Low blood oxygen levels
- Lower than normal temperature rather than a fever
- Sudden weakness
- Increased confusion
- Vague symptoms such as: headache, muscle pain, extreme tiredness, nausea, vomiting, and diarrhea

DIAGNOSING PNEUMONIA - A chest x-ray can be ordered to rule out or diagnose pneumonia. Bloodwork may be ordered to see if there are signs of the body fighting off an infection. Pulse oximetry monitoring may be used to see if the pneumonia is causing blood oxygen levels to be lower than normal.

TREATMENT – Treatment course depends on the type and severity of symptoms. Antibiotics may be ordered to clear the infection. Over the counter medications may be used for symptom management. IV fluids may be needed to maintain electrolyte balance and prevent dehydration.

PREVENTION – The Pneumonia vaccine is encouraged for people who are older than 65 years old, have chronic conditions or weak immune systems, or those that smoke. Hand hygiene is key in preventing the spread of the organisms that cause pneumonia to spread amongst residents.

NON-DRUG MEASURES – Encourage rest, frequent hand-washing, routine oral care, and encourage activity. Encourage sufficient nutritional and fluid intake. Offer O2 in those with hypoxemia. Use humidifier at bedside to reduce viscosity of secretions; encourage cough and deep breathing along with use of incentive spirometer.