

APPENDICES

1. Minimal criteria for initiation of antimicrobials use for suspected urinary and lower respiratory tract infections in nursing home residents with advanced dementia

2. Pain Assessment IN Advanced Dementia- PAINAD

Minimal criteria for initiation of antimicrobials use for suspected urinary and lower respiratory tract infections in nursing home residents with advanced dementia^{1,2}

Suspected urinary tract infection	Suspected lower respiratory tract infection
<p><u>a. No indwelling foley catheter</u> Acute dysuria³ alone OR Temperature >100°F or > 2°F above baseline or rigors AND one of following³:</p> <ol style="list-style-type: none"> 1. New or worse frequency 2. Urgency 3. Costovertebral tenderness 4. Gross hematuria 5. Suprapubic pain 6. Mental status change⁴ <p><u>b. Indwelling foley catheter</u> ≥ 1 of following:</p> <ol style="list-style-type: none"> 1. Temperature >100°F or > 2°F above baseline 2. Rigors 3. Mental status change 	<p><u>a. Temperature >102°F</u> ≥ 1 of following:</p> <ol style="list-style-type: none"> 1. Respiratory rate > 25 breaths/minute 2. New productive cough <p><u>b. Temperature < 102°F</u> New productive cough AND ≥ 1 of the following:</p> <ol style="list-style-type: none"> 1. Pulse > 100 beats/minute 2. Respiratory rate > 25 breaths/minute 3. Rigors 4. Change in mental status¹ <p><u>c. Afebrile with COPD</u> New/increased cough with purulent sputum</p>

1. Prior to starting antimicrobials, verify that treatment is consistent with patient preferences.

2. Adapted for patients with advanced dementia from Loeb M, Bentley DW, Bradley S, et al. Development of minimum criteria for the initiation of antibiotics in residents of long-term-care facilities: results of a consensus conference. *Infect Control Hosp Epidemiol* 2001;22:120-4.

3. Dysuria, urgency, frequency, skin tenderness, costovertebral tenderness and suprapubic pain may be difficult to evaluate in advanced dementia but accepted criteria if present

4. Mental status alone in the absence of other objectives clinical signs of an infection (e.g., fever) should not be the basis for starting antimicrobials in advanced dementia patients without foley catheters

Pain Assessment IN Advanced Dementia- PAINAD³⁹

ITEMS	0	1	2	SCORE
Breathing independent of vocalization	Normal	Occasional labored breathing. Short period of hyperventilation	Noisy labored breathing. Long period of hyperventilation. Cheyne-stokes respirations.	(0-2)
Negative vocalization	None	Occasional moan or groan. Low-level of speech with a negative or disapproving quality	Repeated troubled calling out. Loud moaning or groaning. Crying	(0-2)
Facial expression	Smiling or inexpressive	Sad, frightened, frown	Facial grimacing	(0-2)
Body language	Relaxed	Tense. Distressed pacing. Fidgeting	Rigid. Fists clenched. Knees pulled up. Pulling or pushing away. Striking out	(0-2)
Consolability	No need to console	Distracted or reassured by voice or touch	Unable to console, distract or reassure	(0-2)
				TOTAL (0-10)

INSTRUCTIONS: Observe the patient for 3-5 minutes before scoring his or her behaviors. Score each item based on the patient's behavior (0, 1, 2). Add scores for each item to achieve a total score. Monitor changes over time and in response to treatment.