

Supplemental Information

Clinical Scenarios

SCENARIO 1

A 9-month-old girl presents with 2 days of fever (temperature, 39.0°C), tachypnea, rhinorrhea, cough, and diffuse wheezing and rhonchi. Her percutaneous oxygen saturation is 89% in room air. CXR reveals a right lower lobe opacity. She is being admitted.

What is your admitting diagnosis?

Which of the following would you do?

Intravenous catheter placement	Yes	No
CBC count	Yes	No
Blood culture	Yes	No
Antibiotics	Yes	No
Nasal suctioning	Yes	No
Albuterol (nebulized)	Yes	No

SCENARIO 2

A well-appearing 5-year-old boy presents with 1 day of fever (temperature, 39.0°C), tachypnea, cough, and wheezing. His

percutaneous oxygen saturation is 89% in room air. A CXR performed at the outside hospital reveals a right lower lobe opacity. He is being admitted.

What is your admitting diagnosis?

Which of the following would you do?

Intravenous catheter placement	Yes	No
CBC count	Yes	No
Blood culture	Yes	No
Antibiotics	Yes	No
Nasal suctioning	Yes	No
Albuterol (nebulized)	Yes	No

SCENARIO 3

An ill-appearing 7-year-old girl presents with 1 day of fever (temperature, 39.0°C), tachypnea, and cough. Vitals

are as follows: heart rate, 125 beats per minute; respiratory rate, 52; and percutaneous oxygen saturation, 85% on room air. A CXR performed in the ambulatory setting revealed a right lower lobe infiltrate, prompting the primary pediatrician to prescribe amoxicillin. The patient has received 2 doses of amoxicillin but was referred to the ED for worsening tachypnea and vomiting. She is being admitted.

What is your admitting diagnosis?

Which of the following would you do?

Intravenous catheter placement	Yes	No
CBC count	Yes	No
Blood culture	Yes	No
Antibiotics	Yes	No
Nasal suctioning	Yes	No
Albuterol (nebulized)	Yes	No

1. In a patient with pneumonia, what findings or circumstances would prompt you to obtain a blood culture? (Please check all that apply)

Fever
Admission to hospital
Discharge to home
Previous oral antibiotics (before arrival in ED)
Previous intravenous/intramuscular antibiotics
Unimmunized/underimmunized
Hypoxemic
Age (If so, what age cutoff would you use?)
Tachycardia alone (adjusted for temperature)
Tachycardia and hypotension
CXR with lobar pneumonia
CXR without lobar pneumonia
Well-appearing, well-hydrated
Decision to treat with oral antibiotics in ED
Decision to treat with intravenous/intramuscular antibiotics in ED
Clinical bronchiolitis with infiltrate on CXR (atelectasis versus pneumonia)
Clinical asthma exacerbation with infiltrate on CXR (atelectasis versus pneumonia)

2. In a patient with pneumonia, what findings or circumstances would prompt you to not obtain a blood culture?

Fever
Admission to hospital
Discharge to home
Previous oral antibiotics (before arrival in ED)
Previous intravenous/intramuscular antibiotics
Unimmunized/underimmunized
Hypoxemic
Age (If so, what age cutoff would you use?)
Tachycardia alone (adjusted for temperature)
Tachycardia and hypotension
CXR with lobar pneumonia
CXR without lobar pneumonia
Well-appearing, well-hydrated
Decision to treat with oral antibiotics in ED
Decision to treat with intravenous/intramuscular antibiotics in ED
Clinical bronchiolitis with infiltrate on CXR (atelectasis versus pneumonia)
Clinical asthma exacerbation with infiltrate on CXR (atelectasis versus pneumonia)
