**2021 Ventilator-Associated Pneumonia (VAP)* Checklist**

- ✓ Pneumonia documented in Medical Record during the patient’s initial stay at your hospital
- ✓ Ventilator in place > 2 calendar days (Date of ventilator placement = Day 1) AND
- ✓ Ventilator in place on the date of event or the day before.

### Imaging:

**NO UNDERLYING PULMONARY OR CARDIAC DISEASE***
- ✓ ONE definitive chest imaging result showing:
  - New and persistent or progressive and persistent infiltrate
  - Consolidation
  - Cavitation
  - Pneumatoceles in infants ≤1-year-old

**YES, UNDERLYING PULMONARY OR CARDIAC DISEASE***
- ✓ TWO or more serial chest imaging results showing:
  - New and persistent or progressive and persistent infiltrate
  - Consolidation
  - Cavitation
  - Pneumatoceles in infants ≤1 yo

*Underlying Pulmonary or Cardiac Disease (e.g. Respiratory Distress, Bronchopulmonary Dysplasia, Pulmonary Edema, or COPD)

### Signs/Symptoms:

- ✓ ONE of the following:
  - Fever (> 38°C or > 100.4°F)
  - Leukopenia (<4000 WBC/mm³ or leukocytosis (≥ 12,000 WBC/mm³)
  - For adults ≥70 yo, altered mental status with no other recognized cause

- ✓ AND at least ONE of the following:
  - New onset of purulent sputum, change in character of sputum, increased respiratory secretions, or increased suctioning requirements
  - New onset worsening cough, dyspnea or tachypnea
  - Rales or bronchial breath sounds
  - Worsening gas exchange (O₂ desaturations, PaO₂/FiO₂ ≤ 240, increased O₂ requirements, or increased ventilator demand

### Laboratory:

- ✓ AND at least ONE of the following:
  - Organism identified from blood
  - Organism identified from pleural fluid
  - Positive quantitative culture or corresponding semi-quantitative culture result from minimally-contaminated LRT specimen (BAL or protected specimen brushing or endotracheal aspirate)
  - ≥ 5% BAL-obtained cells contain intracellular bacteria on Gram’s stain
  - Positive quantitative or semi-quantitative culture of lung tissue
  - Histopathologic exam shows at least one of the following evidences of pneumonia:
    - Abscess formation or foci of consolidation with intense PMN accumulation in bronchioles and alveoli
    - Evidence of lung parenchyma invasion by fungal hyphae or pseudohyphae

*Definition taken from the National Trauma Data Standard Data Dictionary (2021 Admissions)
Consistent with January 2019 CDC-defined VAP

**ALL criteria in (✓) red must be met for hospital event: VAP (Bacterial or Filamentous Fungal Pathogens).**

Please consult the appropriate Algorithm for VAP with Viral, Legionella, other Bacterial Pneumonias, VAP in Immunocompromised Patients, and VAP for Infants ≤1 year old, or for VAP for Children > 1 or ≤12 years old.