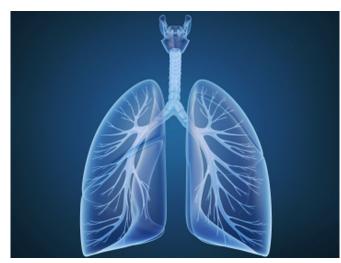


Non-ventilator hospital-acquired pneumonia risk affects all ages

13 January 2018



interventions aimed at pneumonia prevention in the 24 hours prior to diagnosis.

"We found that NV-HAP occurred on every hospital unit, including in younger, healthy patients. This indicates that although some patients are clearly at higher risk, all patients carry some NV-HAP risk," the authors write. "Therapeutic interventions aimed at NV-HAP prevention are frequently not provided for patients in acute care hospitals."

More information: Abstract/Full Text

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(HealthDay)—Non-ventilator hospital-acquired pneumonia (NV-HAP) is a significant burden in U.S. acute care hospitals and poses a risk to nonelderly, non-intensive unit (ICU) patients, according to research published in the January issue of the *American Journal of Infection Control*.

In an effort to determine the incidence and overall burden of NV-HAP, Dian Baker, Ph.D., R.N., from California State University in Sacramento, and Barbara Quinn, R.N., from Sutter Medical Center in Sacramento, retrospectively reviewed the charts of NV-HAP cases at 21 U.S. hospitals and searched for 2014 International Classification of Diseases, Ninth Revision, Clinical Modification codes for pneumonia not present on admission.

Across the 21 hospitals, the researchers identified 1,300 patients with NV-HAP (rate, 0.12 to 2.28 per 1,000 patient days). The majority of NV-HAP infections (70.8 percent) were acquired outside of ICUs, but 18.8 percent of cases required transfer into the ICU. Most of the <u>cases</u> did not have



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