McGeer’s Case Classification Worksheet For Respiratory Illness in Long-Term Care Facilities (LTCFs)

Patient Name __________________ Room Number ______ Date of Onset ______

McGeer’s Case Classification (Circle one): P I L U None

Completed By __________________________ Date ______________________

Part I: Constitutional Criteria (Patient needs to meet one of the 4 major criteria: fever, leukocytosis, acute change in mental status or acute functional decline.)

☐ Fever: (Patient should have at least one of the following)
  □ Single oral temperature > 37.8 C° (>100 F°) or
  □ Repeated oral temperature > 37.2 C° (99 F°) or rectal temperatures 37.5 C° (99.5 F°)
  □ Single temperature 1.1 C° (2 F°) over baseline from any site (oral, tympanic, axillary)

☐ Leukocytosis: (Patient should have at least one of the following)
  □ Neutrophilia (>14,000 leukocytes (WBC)/mm3) OR
  □ Left shift (>6% bands or ≥1,500 bands/mm3)

☐ Acute change in mental status from baseline (ALL criteria must be present)
  □ Acute onset
  □ Fluctuating course: coming and going or changing in severity during assessment
  □ Inattention: difficulty focusing attention
  □ Either disorganized thinking: incoherent thinking OR altered level of consciousness

☐ Acute functional decline (A new 3-point increase in total activities of daily living (ADL) score (range, 0–28) from baseline, based on the following 7 ADL items, each scored from 0 (independent) to 4 (total dependence. Fill in score for each)

  ___ Bed mobility ___ Transfer ___ Locomotion within LTCF
  ___ Dressing ___ Toilet use ___ Personal hygiene ___ Eating

Part II Respiratory Symptoms (Subcriteria): (Please mark all that apply)

☐ New or increased cough
☐ Pleuritic chest pain
☐ O2 saturation < 94% on room air or a reduction in O2 saturation of >3% from baseline
☐ New or changed lung examination abnormalities (Rales, Rhonchi, etc.)
☐ New or increased sputum production
☐ Respiratory rate of ≥25 breaths/min
Part III Case Classification (Ascertainment)

**Pneumonia (ALL 3 criteria must be present)**
- ☐ Chest radiograph interpretation as pneumonia or the presence of a new infiltrate
- ☐ At least 1 of the constitutional criteria (See page 1)
- ☐ At least 1 of the respiratory symptoms (See page 1)

Does the patient meet the criteria for pneumonia?  (circle one)  Yes  No
(If yes  \( \rightarrow \) stop and complete the appropriate case classification in page 1: “P”)

**Influenza-like illness (ILI) (Fever and at least 3 other subcriteria must be present)**
- ☐ Fever
- ☐ At least 3 of the following influenza-like illness subcriteria
  - ☐ Chills
  - ☐ New headache or eye pain
  - ☐ Myalgias or body aches
  - ☐ Malaise or loss of appetite
  - ☐ Sore throat
  - ☐ New or increased dry cough

Does the patient meet the criteria for ILI?  (Circle one)  Yes  No
If yes  \( \rightarrow \) stop and complete the appropriate case classification in page 1: “I”

**Lower respiratory tract infection (LRTI) (bronchitis or tracheobronchitis); (ALL 3 must be present)**
- ☐ Chest radiograph not performed or negative results for pneumonia or new infiltrate
- ☐ At least 1 of the constitutional criteria (See page 1)
- ☐ At least 2 of the respiratory symptoms (See page 1)

Does the patient meet the criteria for LRTI?  (Circle one)  Yes  No
(If yes  \( \rightarrow \) stop and complete the appropriate case classification in page 1: “L”)

**Upper Respiratory Tract Infection (URTI: Common Cold Syndrome or Pharyngitis:**
(At least 2 criteria must be present)
- ☐ Runny nose or sneezing
- ☐ Stuffy nose (ie, congestion)
- ☐ Sore throat or hoarseness or difficulty in swallowing
- ☐ Dry cough
- ☐ Swollen or tender glands in the neck (cervical lymphadenopathy)

Does the patient meet the criteria for URTI?  (circle one)  Yes  No
(If yes  \( \rightarrow \) stop and complete the appropriate case classification in page 1: “U”)
If no  \( \rightarrow \) circle “none” in page 1)