

Pneumonia is the #1 hospital-acquired infection in the US—including in patients who are not on a ventilator^{1,2}

YOU CAN HELP PROTECT YOUR PATIENTS

[Learn more inside.](#)

NONVENTILATOR HOSPITAL-ACQUIRED PNEUMONIA (NV-HAP)

NV-HAP can occur in every type of hospital unit, with a higher incidence, financial cost, and number of deaths than ventilator-acquired pneumonia (VAP). Mortality rates for NV-HAP and VAP are similar.³



- NV-HAP, which can develop as soon as 48 hours after admission, accounts for **60% of hospital-acquired pneumonia**—the **#1 hospital-acquired infection**^{1,4}



- **Pneumonia is the #1 cause of sepsis** and may require ICU admission, mechanical ventilation, and increased use of antibiotics—affecting your hospital's antibiotic stewardship program⁵



- Sick patients with NV-HAP experience nearly **4x longer hospitalization** and more than **8x higher mortality** than sick patients without NV-HAP and may require hospital readmission⁶

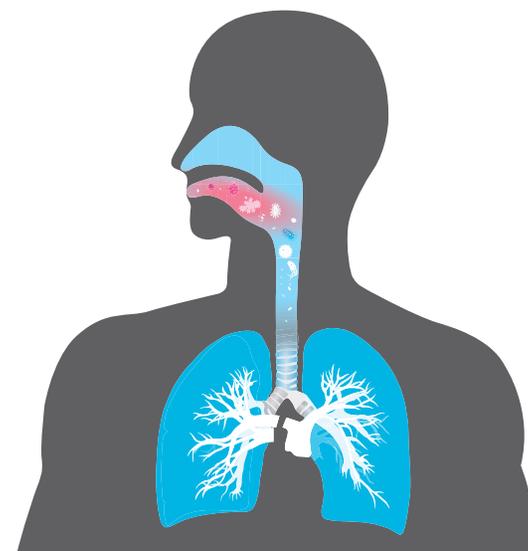


- NV-HAP **increases the risk of discharge to long-term care, hospice, or palliative care**, increasing the burden on patients, family members, and the larger community⁷

A PREVENTABLE CAUSE OF NV-HAP: ORAL BIOFILM⁸

In the absence of regular oral care, **biofilm** in the oral cavity can contain up to *20 billion microbes*.⁹

- Oral microbes **can duplicate every 5 hours**⁸



Microaspirations may bring bacteria that cause pneumonia to the lungs.¹⁰

Consistent oral care, performed
3-4 TIMES A DAY,
can decrease the risk of NV-HAP⁸

Experts believe comprehensive oral care including an oral rinse is the most modifiable risk factor for the prevention of NV-HAP⁸

3 SIMPLE STEPS TO HELP REDUCE YOUR PATIENTS' RISK OF NV-HAP⁸:



1. Provide a soft-bristled brush, toothpaste, oral rinse, and a lip moisturizer



2. Instruct patients to:

- **Brush** their teeth (and tongue) for 1-2 minutes **(3x-4x a day)**
- Use an oral **rinse** according to label instructions, as rinsing reaches areas that brushing cannot **(2x a day)**
- Apply a non-petroleum-based **lip moisturizer** after meals and before bedtime **(3x-4x a day)***



3. Communicate that following this procedure is **an important step** patients can take to help reduce their risk of NV-HAP

*Some patients may require assistance, including use of a suction toothbrush.

REFERENCES: **1.** Magill SS et al. *N Engl J Med.* 2018;379(18):1732-1744. **2.** Giuliano KK et al. *Am J Infect Control.* 2018;46(3):322-327. **3.** Davis J et al. *Pa Patient Saf Advis.* 2012;9(3): 99-105. **4.** Flanders SA et al. *Am J Infect Control.* 2006;34(2):84-93. **5.** Angus DC et al. *N Engl J Med.* 2013;369(9):840-851. **6.** Micek ST et al. *Chest.* 2016;150(5):1008-1014. **7.** Baker D et al. *Am J Infect Control.* 2018;46(1):2-7. **8.** Quinn B et al. *J Nurs Scholarsh.* 2014;46(1):11-19. **9.** Loesch WJ. *Dental Caries: a Treatable Infection.* Grand Haven, MI: ADD Publications; 1993. **10.** Bradley S et al. *Pa Patient Saf Advis.* 2011;8(4):131-137.