

Pulmonary Exacerbation Scoring Sheet (PESS)

Patient Initials:

Age:

Attending:

Visit Date:

Call In Date:

Call In Time (hhmm):

Systemic symptoms/ signs:

1. Fevers > 38C (100.4) in the prior 2 weeks?
 No Yes
2. Malaise or Fatigue in the prior 2 weeks?
 No Yes
3. Any increased or new absenteeism from work or school in the prior 2 weeks?
 No Yes
4. Anorexia or poor appetite in the prior 2 weeks?
 No Yes
5. Weight loss (>=5%) or poor weight gain compared to last clinic visit or (or in the last 3 months?)
 No Yes

Sum of systemic symptom scores: _____

Pulmonary symptoms/ signs:

1. Increased cough (frequency, duration, or intensity) for >= 1 week?
 None Mild Significant
2. Major change in sputum (new onset, increased amount, change in consistency) or change in chest congestion for >= 1 week?
 None Mild Significant
3. Increased DOE or SOB at rest?
 No Yes
4. Change in chest exam (wheezes, crackles, rhonchi, decreased air entry) or increased WOB or Respiratory Rate?
 No Yes

Sum of systemic symptom scores: _____

Objective measurements:

1. Decrease in FEV1 compared to highest value of the prior 6 months?
 < 10% 10-15% >=15% decrease
2. New chest radiographic abnormality?
 None Increase air-trapping, mucus plugging or bronchiectasis New atelectasis or infiltrate Pneumothorax
3. Hemoptysis?
 None Streaked Increased or new onset
4. Decreased SaO2 from baseline compared to the highest value of the prior 6 months?
 < 4% 4-10% >=10% decrease

Sum of systemic symptom scores: _____

Total Pulmonary Exacerbation Score: _____

* All symptoms/signs/measurements will be compared to the patient's most recent baseline w/in previous 3 months or as noted below.
** If a patient has Systemic findings they must have at least 1 finding from either the Pulmonary or Objective measurements to have a PE. (i.e. a Pulmonary Exacerbation will not be present with Systemic symptoms alone.)

Pulmonary Exacerbation is defined as a PES >=5

Treated for exacerbation: No Yes

Antibiotic treatment: Oral IV

ADMITTED?:

Treated for alternative diagnosis: Asthma ABPA

Failed oral ABX / IV ABX started:

NO

Other:

No Yes

YES