

## Summary sheet for interpreting CRP test results

For people presenting with symptoms of lower respiratory tract infection in primary care, consider a point-of-care C-reactive protein (CRP) test if, after clinical assessment, a diagnosis of pneumonia has not been made and it is not clear whether antibiotics should be prescribed. Use the results of the CRP test to guide antibiotic prescribing in people without a diagnosis of pneumonia as follows:



### Afinion

<b>CRP less than 20 mg/l</b>	Antibiotics are unlikely to be beneficial
<b>CRP between 20 and 100 mg/l</b>	A back-up/delayed antibiotic prescription may be helpful
<b>CRP greater than 100 mg/l</b>	Antibiotics may be needed



### SureScreen

<b>Control line (next to C)</b>	Indicates that the test has worked; no C line indicates invalid test
<b>Control line only:</b> CRP less than 10 mg/l	Antibiotics are unlikely to be beneficial
<b>T1 line appears:</b> CRP between 10 & 39 mg/l	A back-up/delayed antibiotic prescription may be helpful
<b>T1 and T2 lines appear:</b> CRP between 40 & 79 mg/l	A back-up/delayed antibiotic prescription may be helpful
<b>T1, T2 and T3 lines appear:</b> CRP is at least 80 mg/l	Antibiotics may be needed

This document was developed as part of STEP-UP research study conducted by the University of Oxford and Imperial College London, October 2019. Find out more on: <https://antibioticoptimisation.web.ox.ac.uk>