

Community-Acquired Pneumonia: A Review



Pneumonia is defined as having 2 or more signs/symptoms plus radiographic findings.

Outpatient Care

Antibiotic Treatment:



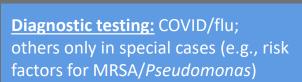
- Amoxicillin or doxycycline alone
- If comorbidities: amoxicillin/ clavulanate or oral cephalosporin (i.e., cefpodoxime or cefuroxime) AND macrolide/doxycycline
- Duration: 3 days

Diagnostic testing: COVID/flu

Other: no steroids

<u>Inpatient Care</u> (Non-severe Pneumonia) Antibiotic Treatment:

- β-lactam (e.g., ampicillin + sulbactam or ceftriaxone) + macrolide
- Duration: 3-5 days



Other: no steroids

ICU Care (Severe Pneumonia)

Antibiotic Treatment:



- β-lactam (e.g., ampicillin + sulbactam or ceftriaxone) + macrolide
 - Add vancomycin and substitute cefepime for β-lactam only if risk factors for MRSA/pseudomonas
- Duration: limited evidence; MRSA/pseudomonas minimum of 7 days; longer for complications

<u>**Diagnostic testing:</u>** Blood & respiratory cultures, legionella urinary antigen, COVID/flu (+/- expanded viral testing); If started on anti-MRSA/*Pseudomonas* -- MRSA nasal swab, pneumococcal urinary antigen</u>

ASAP Hydrocortisone 200 mg/day x 4-7 days then taper

Treatment should be based on severity of illness and take into account risks/benefits of treatment.

Vaughn VM, Dickson RP, Horowitz JK, Flanders SA. JAMA. 2024.