

Antibiotic Recommendations for Inpatient Adults with Community-Acquired Pneumonia

Empiric treatment of non-severe CAP without risk factors for MRSA or Pseudomonas aeruginosa:

1. Ceftriaxone 1-2gm IV daily x 5 days **PLUS** azithromycin 500mg PO or IV daily x 5 days **(Preferred) Or**
2. Ceftriaxone 1-2gm IV daily x 5 days **PLUS** doxycycline 100mg PO or IV BID x 5 days **Or**
3. Levofloxacin 750mg PO or IV daily x 5 days

Dose reduction required in Levofloxacin for CrCl < 50mL/min

Empiric treatment of severe CAP without risk factors for MRSA or Pseudomonas aeruginosa:

1. Ceftriaxone 1-2gm IV daily x 5 days **PLUS** azithromycin 500mg PO or IV daily x 5 days **(Preferred) Or**
2. Ceftriaxone 1-2gm IV daily x 5 days **PLUS** Levofloxacin 750mg PO or IV daily x 5 days

Empiric treatment of severe CAP with recent hospitalization and parenteral antibiotics and locally validated risk factors for MRSA or prior respiratory isolation of MRSA:

1. Ceftriaxone 1-2gm IV daily x 5 days **PLUS** azithromycin 500mg PO or IV daily x 5 days **PLUS** Vancomycin IV pharmacy to dose **(Preferred) or**
2. Ceftriaxone 1-2gm IV daily x 5 days **PLUS** Levofloxacin 750mg PO or IV daily x 5 days **PLUS** Vancomycin IV pharmacy to dose

Obtain cultures/nasal PCR to allow for de-escalation or confirmation of need for continued IV Vancomycin

Empiric treatment of severe CAP with recent hospitalization and parental antibiotics and locally validated risk factors for P. aeruginosa or prior respiratory isolation of P. aeruginosa:

1. Azithromycin 500mg PO or IV daily x 5 days **PLUS** piperacillin-tazobactam 4.5gm IV q 6 hours **or** cefepime 2gm IV q 8 hours **or** aztreonam 2gm IV q 8 hours **or** meropenem 1gm IV q 8 hrs
2. Levofloxacin 750mg PO or IV daily x 5 days **PLUS** piperacillin-tazobactam 4.5gm IV q 6 hours **or** cefepime 2gm IV q 8 hours **or** aztreonam 2gm IV q 8 hours **or** meropenem 1gm IV q 8 hrs

Obtain cultures to allow for de-escalation or confirmation of need for continued P. aeruginosa coverage

Levofloxacin, piperacillin-tazobactam, cefepime, aztreonam, and meropenem require dose reduction in renal impairment