

Antibiotic Recommendations for Outpatient Adults with Community-Acquired Pneumonia

Empiric Treatment of CAP (otherwise healthy adults; listed in order of preference):

1. Amoxicillin 1000mg PO TID x 5 days **PLUS** azithromycin 500mg PO on day 1, then 250mg PO on days 2-5 (**Preferred**) **or**
2. Amoxicillin 1000mg PO TID x 5 days **PLUS** Doxycycline 100mg PO BID x 5 days

Amoxicillin requires dose reduction in patients with GFR < 30mL/min

Empiric Treatment of CAP in adult patients with comorbidities or recent (within the past 3 months) antibiotic use:

1. Amoxicillin/Clavulanate 875mg PO BID x 5 days **PLUS** azithromycin 500mg PO on day 1, then 250mg PO on days 2-5 (**Preferred**) **or**
2. Cefdinir 300mg PO BID x 5 days **PLUS** azithromycin 500mg PO on day 1, then 250mg PO on days 2-5 **or**
3. Augmentin 875mg PO BID x 5 days **PLUS** doxycycline 100mg PO BID x 5 days **or**
4. Cefdinir 300mg PO BID x 5 days **PLUS** doxycycline 100mg PO BID x 5 days **or**
5. Levofloxacin 750mg PO daily x 5 days

With combination therapy, azithromycin is preferred over doxycycline in patients not at risk for QT interval prolongation; however, as with any treatment recommendation, patient specific factors must be considered such as: allergies, vascular disease (fluoroquinolones), recent antibiotic use, and history of infection with C. difficile

Dose reduction required in Amoxicillin/Clavulanate and Cefdinir for CrCl < 30mL/min, and in Levofloxacin for CrCl < 50mL/min