

Recommended Empirical Treatment for CAP in the Outpatient Setting

Patient Characteristics	Oral Antibiotic Regimen
No comorbidities or risk factors for methicillin-resistant <i>Staphylococcus aureus</i> or <i>Pseudomonas aeruginosa</i> ^a	Choose one agent: Amoxicillin 1 g tid Doxycycline 100 mg bid Azithromycin ^b 500 mg day 1, followed by 250 mg daily Clarithromycin ^b 500 mg bid Clarithromycin extended-release ^b 1,000 mg daily
Comorbidities (chronic heart, lung, liver, or renal disease; diabetes mellitus; alcoholism; malignancy; asplenia)	<i>Monotherapy with a respiratory fluoroquinolone:</i> Levofloxacin 750 mg daily Moxifloxacin 400 mg daily Gemifloxacin 320 mg daily <i>or</i> <i>Beta-lactam plus macrolide OR beta-lactam plus doxycycline</i> <i>Beta-lactam options:</i> Amoxicillin-clavulanate 500 mg/125 mg tid Amoxicillin-clavulanate 875 mg/125 mg bid Amoxicillin-clavulanate 2,000 mg/125 mg bid Cefpodoxime 200 mg bid Cefuroxime 500 mg bid <i>plus</i> <i>Macrolide options:</i> Azithromycin 500 mg day 1, then 250 mg daily Clarithromycin 500 mg bid Clarithromycin extended-release 1,000 mg daily <i>or</i> Doxycycline 100 mg bid

CAP: community-acquired pneumonia. ^a Risk factors include prior respiratory isolation of the pathogen or hospitalization with receipt of parenteral antibiotics within the past 90 days. ^b Use only if local pneumococcal resistance is <25%. Source: Reference 4.

Guidelines For Community Acquired Pneumonia

O García



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