

Appendix 1: Metro South Prescribe: Antibiotic Guidelines for Community Acquired Pneumonia
(Retrieved on 1 Feb 2020)

Mild CAP

PRESCRIBE

 **Amoxicillin** 1 g orally, 8-hourly

If patient has a penicillin hypersensitivity or an atypical organism is suspected, use:

 **Doxycycline** 100 mg orally, 12-hourly

OR

 **Roxithromycin** 300 mg orally, once daily.

PRACTICE POINTS

- If the patient is not improving by 48 hours, or if clinical review within 48 hours is not possible, consider using dual therapy with amoxicillin plus either doxycycline or roxithromycin. For most patients, a total of 5-7 days therapy is appropriate.

Moderate CAP

PRESCRIBE

 **Benzylpenicillin** 1.2 g intravenously, every 6 hours followed by  **amoxicillin** 1 g orally, 8-hourly

AND EITHER

 **Doxycycline** 100 mg orally, 12-hourly

OR

 **Roxithromycin** 300 mg orally, once daily

For patients with non-immediate penicillin hypersensitivity, substitute benzylpenicillin with:

 **Ceftriaxone** 1 g intravenously, once daily followed by  **cefuroxime** 500 mg orally, 12-hourly

For patients with immediate penicillin hypersensitivity, use as a single agent:


 **Moxifloxacin** 400 mg orally, once daily

PRACTICE POINTS

- Switch from IV to oral therapy as soon as patients have clinically improved.
- If *Legionella* pneumonia is strongly suspected or confirmed, discuss with Infectious Diseases.
- For most patients, a total of 5-7 days therapy is appropriate.

Severe CAP


PRESCRIBE

 **Benzympenicillin** 1.2 g intravenously, 4-hourly



AND

 **Gentamicin** intravenously – see [Gentamicin dosing, administration and monitoring](#).


AND

 **Azithromycin** 500 mg intravenously, once daily for up to 3 days

For patients with non-immediate penicillin hypersensitivity, substitute penicillin AND gentamicin with:

 **Ceftriaxone** 2 g intravenously, once daily (gentamicin is not required) followed by  **cefuroxime** 500 mg orally, 12-hourly

AND

 **Azithromycin** 500 mg intravenously, once daily for up to 3 days

For patients with immediate penicillin hypersensitivity, use as a single agent:

 **Moxifloxacin** 400 mg intravenously / orally, once daily

PRACTICE POINTS

- Gram-negative sepsis can masquerade as severe community-acquired pneumonia, therefore gentamicin is included as empiric therapy in the above regimen. Gentamicin can be ceased when gram-negative sepsis is excluded.
- If *Legionella* pneumonia is strongly suspected or confirmed, discuss with Infectious Diseases.

Note: Retrieved from MSH Medicines Management Committee. MSHPrescribe. Brisbane: Metro South Health; 2020.¹⁴