Pneumonia Recommended Antibiotic Therapy

Give first dose of antibiotics within 6 hours of arrival to hospital after Blood C&S obtained

NON-ICU INPATIENT ANTIBIOTIC REGIMEN (Select one antibiotic only)
1. Levofloxacin
2. Ceftriaxone and Azithromycin
3. Ceftriaxone and Doxycycline

*If contraindicated, document in progress notes*

For possible MRSA add Vancomycin
For possible PSEUDOMONAS add Piperacillin-Tazobactam and Levofloxacin
For PCN ALLERGY use Levofloxacin and Aztreonam

ICU INPATIENT ANTIBIOTIC REGIMEN (Select one antibiotic only)
1. Ceftriaxone and Levofloxacin
2. Ceftriaxone and Azithromycin

*If contraindicated, document in progress notes*

For possible MRSA add Vancomycin
For possible PSEUDOMONAS add Piperacillin-Tazobactam and Levofloxacin
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RISK FACTORS FOR MULTIDRUG-RESISTANT PATHOGENS

Give first dose of antibiotics within 6 hours of arrival to hospital after Blood C&S obtained

<table>
<thead>
<tr>
<th>Antimicrobial therapy in preceding 90 days</th>
<th>Chronic dialysis within 30 days</th>
<th>Home wound care</th>
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<tr>
<td>Hospitalization for 2 days or more in the preceding 90 days</td>
<td>High frequency of antibiotic resistance in the community/facility/unit</td>
<td>Home infusion therapy</td>
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<tr>
<td>Residence in a nursing home or extended care facility</td>
<td>Family member with MDR pathogen</td>
<td>Immunosuppressive disease and/or therapy</td>
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FOR SUSPECTED ESBL PRODUCING PATHOGENS CHOOSE A CARBEPENEM CONTAINING REGIMEN

1. Piperacillin-Tazobactam and Levofloxacin
2. Piperacillin-Tazobactam and Tobramycin
3. Meropenem and Levofloxacin
4. Meropenem and Tobramycin

Possible MRSA add Vancomycin