

Severity of pneumonia

In adults, severity is assessed by clinical judgement guided by mortality risk score (CRB65 or CURB65):

- low severity - CRB65 score 0 or CURB65 score 0 or 1
- moderate severity - CRB65 score 1 or 2 or CURB65 score 2
- high severity - CRB65 score 3 or 4 or CURB65 score 3 to 5

In children and young people, severity is assessed by clinical judgement.

Prescribing considerations

When choosing an antibiotic(s), take account of:

- the severity assessment (adults), or the severity of symptoms or signs (children and young people); see above
- the risk of complications, for example, a relevant comorbidity (such as severe lung disease or immunosuppression)
- local antimicrobial resistance and surveillance data (such as flu and *Mycoplasma pneumoniae* infection rates)
- recent antibiotic use
- previous microbiological results, including colonisation with multi-drug resistant bacteria

Give oral antibiotics first line if possible

Review intravenous antibiotics by 48 hours and consider switching to oral antibiotics if possible

Pneumonia (community-acquired)

- Offer an antibiotic(s) within 4 hours of establishing a diagnosis
- For adults, follow the recommendations on microbiological tests in the NICE guideline on pneumonia
- For children and young people in hospital with severe symptoms or a comorbidity, consider sending a sample (for example, a sputum sample) for microbiological testing

Give advice about:

- possible adverse effects of the antibiotic(s)
- how long symptoms are likely to last (see also the NICE guideline on pneumonia)
- seeking medical help if symptoms worsen rapidly or significantly, or do not start to improve within 3 days, or the person becomes systemically very unwell

If a respiratory sample has been sent for microbiological testing:

- review the choice of antibiotic(s) when results available, and
- consider changing the antibiotic(s) according to results, using a narrower spectrum antibiotic if appropriate

- Reassess if symptoms do not improve as expected, or worsen rapidly or significantly, taking account of possible non-bacterial causes such as flu
- If symptoms have not improved after antibiotics, send a sample (for example, a sputum sample) for microbiological testing, if not done already

Refer adults to hospital in line with NICE's guideline on pneumonia or if:

- symptoms or signs suggest a more serious illness such as sepsis, or
- symptoms are not improving as expected with antibiotics
- Consider referring adults or seeking specialist advice if they have bacteria resistant to oral antibiotics or they cannot take oral medicines

Consider referring children and young people to hospital or seek specialist paediatric advice on further investigation and management