## **Clinical Features of Community Acquired Pneumonia**

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## Abstract

The common symptoms of community acquired pneumonia (CAP) include fever with chills and/or rigors, productive cough, dyspnoea and pleuritic chest pain. These are typically of less than one week duration. Presence of bronchial breath sounds, whispering pectoriloquy, localized crackles and tachypnoea are important signs. However, host and microbial factors can alter the presentation of CAP such that typical symptoms and signs may not always be present. Even the onset of symptoms and their mean duration before presentation may vary in such cases. This is particularly true in extremes of ages and presence of comorbidities. Mental confusion and disorientation is a common feature in the elderly who may not manifest with the classical clinical features. Gastrointestinal symptoms are most often reported in atypical pneumonia. Assessment of severity is essential to determine the optimal site for management. Although several severity assessment tools have been proposed, presence of shock and/or acute hypoxemic respiratory failure invariably mandates admission to an intensive care unit. In less severe cases, the decision to hospitalize may be individualized with the help of any of the severity assessment tools available as well as other adverse prognostic factors.

Key Words: Community acquired pneumonia, severity assessment, symptoms, signs, prognostic factor.