Should All Children Admitted with Community Acquired Pneumonia have Blood Cultures Taken? *Correspondence*

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To the Editor: We would like to discuss on the article entitled “Should all children admitted with community acquired pneumonia have blood cultures taken?” recently published online in Indian Journal of Pediatrics [1]. Lai et al; noted that “both the yield and the impact of blood culture results on the adjustment of empiric antibiotic treatment were very small [1]” and “there was a high contamination rate [1].” The consideration is on the quality of present blood collection for blood culture. The poor collection technique can be the reason for high contamination and low yield. In the setting of Lai et al., the problem of “pre-analytical error” should be systematically assessed and corrected. It should be noted the pre-analytical error is the main reason for poor analytical result and it can be seen at a high rate despite the laboratory being internationally accredited [2]. The problem can be seen in many countries including USA [3]. The new guideline that focuses on the rational use and quality control of laboratory investigations is important and should be applied for any setting [4]. In a setting with good laboratory quality control system, the contamination rate will be low and the positive blood cultures can be useful for “prompt change to narrow-spectrum antibiotic therapy [5].”

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