SDC 1. Diagnostic Criteria for Pleural Effusion and for The Etiology in Children with Community-acquired Pneumonia in whom Procalcitonin was Measured on Admission: 4 (30.8%) with Bacterial Infection, 6 (46.2%) with Viral Infection, 3 (23.0%) with Viral-bacterial Infection

Case	Pleural effusion diagnosis	Probable etiology	Etiological diagnostic criteria	PCT (ng/mL) on admission
39	Costophrenic angle opacity up to the top of the hemi-thorax; Thoracentesis: non-purulent fluid	*S. pneumoniae*	Serum IgG to C-polysaccharide (from 8903 to 241894)	10.52
276	Flowing fluid on lateral decubitus view	*H. influenzae*	Serum IgG titre increase (from 12014 to 82585)	1.62
263	Costophrenic angle opacity up to the middle of the hemi-thorax	*M. catarrhalis*	Serum IgG titre increase (from 1144 to 6801)	1.34
9	Costophrenic angle opacity up to the middle of the hemi-thorax; Thoracentesis: non-purulent fluid	*M. pneumoniae*	Serum IgM antibodies	1.03
40*	Flowing fluid on lateral decubitus view	Rhinovirus	Positive PCR in NPA	1.37
43	Costophrenic angle opacity up to the middle of the hemi-thorax; Ultrasound: free fluid up to the top	Rhinovirus	Positive PCR in NPA	0.27
116	Costophrenic angle opacity up to the top of the hemi-thorax pushing the mediastinum; Drainage of purulent fluid for 4 days	Enterovirus	Positive PCR in NPA	6.00
303	Costophrenic angle opacity up to the top of the hemi-thorax; Thoracentesis: non-purulent fluid	RSV	NPA antigen detection + serum IgG (from<40 to 1280)	1.68
96	Costophrenic angle opacity up to the top of the hemi-thorax; Drainage of purulent fluid for 2 days	Influenza A-virus	NPA antigen detection + serum IgG (from 1 to 3)	7.10
55	Costophrenic angle opacity up to the top of the hemi-thorax + one diaphragm on lateral view	Parainfluenzavirus 1/3 Influenza A-virus	Serum IgG titre increase (from 32 to 191) Serum IgG titre increase (from 1 to 3)	3.93

220	Costophrenic angle opacity up to the middle of the hemi-thorax + one diaphragm on lateral view	Parainfluenzavirus 1/3 *S. pneumoniae*	Serum IgG titre increase (from <1 to 30) Serum IgG to C-polysaccharide (from 22 to 2849)	7.44
297	Costophrenic angle opacity up to the lower third part of the hemi-thorax	Enterovirus *S. pneumoniae*	Positive PCR in NPA Serum IgG to C-polysaccharide (from 4558 to 10572)	0.19
261	Elevation of the diaphragm and lens like image: loculated pleural fluid	Parainfluenzavirus 3 HBoV *S. pneumoniae*	NPA antigen detection + Serum IgG (from 4 to 16) Serum IgM antibodies + low IgG avidity Blood culture isolation[†]	3.28

Infection by *C. trachomatis, C. pneumoniae*, parainfluenzavirus type 2, adenovirus or human metapneumovirus was not identified.
All cases presented vaccination card, received *Haemophilus influenzae* type b vaccine and did not receive pneumococcal vaccine.
[*] Pre-hospital cefalexin use.
[†] Pneumococcal serotype was 14 according to the Public Meningitis, Pneumonia and Pneumococcal Infections Core (National Reference Laboratory), Bacteriology Centre of the Adolfo Lutz Institute, São Paulo, Brazil.
PCR: polymerase chain reaction; NPA: nasopharyngeal aspirates; RSV: respiratory syncytial virus; HBoV: human bocavirus.