

**Supplemental table 2.** Summary of the main findings using chest X-rays and lung ultrasound for diagnosing pneumonia.

<b>Radiological findings in pneumonia</b> (Cherian T, Bull World Health Organ. 2005;83(5):353-359)
<p>-End-point consolidation: Dense or spongy opacity involving a portion or whole of a lobe, or the entire lung; it may or may not contain air bronchograms.</p> <p>-Infiltrate: Lineal with irregular densities (interstitial infiltrate) in a lacy pattern involving both lungs, with peribronchial thickening and multiple areas with atelectasis.</p> <p>-Pleural effusion: Presence of fluid in the pleural space between the lung and the thoracic wall.</p>
<b>Lung aeration ultrasound patterns</b> (Bouhamed B, Am J Resp Crit Care Med 2011;3:341-347)
<ol style="list-style-type: none"><li>1- Normal: A-lines with lung sliding and less than 2 isolated B-lines.</li><li>2- Moderate loss of aeration: Multiple, well-defined B-lines.</li><li>3- Severe loss of aeration: Multiple, coalescent B-lines.</li><li>4- Lung consolidation: Presence of tissue-like sign or shred sign.</li></ol>
<b>Lung pneumonia patterns</b> (Shah VP, JAMA Pediatr. 2013;167(2):119-125)
<ol style="list-style-type: none"><li>1. Bacterial pneumonia: Lung consolidation with bronchogram or small hypoechoic areas or subpleural consolidations with bronchogram.</li><li>2. Bronchograms are hyperechoic lineal areas inside lung consolidations.</li><li>3. Viral pneumonia: B-lines, confluent B-lines, small subpleural consolidations.</li><li>4. Pleural effusion: Anechoic space between parietal and visceral pleura or between the thoracic wall and diaphragm.</li><li>5. Atelectasis: Lung consolidation without bronchogram.</li><li>6. Pneumothorax: Presence of lung point.</li></ol>