



5 WAYS CONSULTANT PHARMACISTS CAN BE ANTIBIOTICS AWARE



1. Ensure Documentation of the Indication for Every Antibiotic Order

- Documentation of the indication for every antibiotic order can inform antibiotic selection and assist with determining the appropriate duration during an antibiotic review process.
- Alert the provider if the indication for an antibiotic order is not documented.



2. Use the Shortest Effective Antibiotic Duration

- Guidelines for treatment duration are available for common infectious diseases such as pneumonia, urinary tract infection (UTI), and skin and soft tissue infection.^{1,2,3}
- Contact the provider if the length of antibiotic therapy exceeds the recommended duration.



3. Improve Fluoroquinolone Prescribing Practices

- Due to risk of serious adverse events, the U.S. Food and Drug Administration issued a boxed warning to limit fluoroquinolone prescribing in specific conditions, such as acute bacterial sinusitis and uncomplicated UTI, where other treatment options are available.⁴
- When possible, discuss alternatives to fluoroquinolones with providers.



4. Avoid Treatment of Asymptomatic Bacteriuria

- Residents with asymptomatic bacteriuria should not be treated with antibiotics in most cases.^{5,6}
- Advocate for the use of protocols that help providers evaluate UTI signs and symptoms before testing for UTI and starting antibiotics.



5. Limit the Use of Prolonged Antibiotic Prophylaxis for UTI

- There is no clear evidence supporting prolonged antibiotic use for prevention of recurrent UTI in nursing home residents with asymptomatic bacteriuria.^{7,8} Antibiotic use can cause adverse drug events and contribute to antibiotic resistance.
- Identify residents on prolonged antibiotic therapy for prevention of UTI, and discuss with providers to ensure that the benefits outweigh the risks of adverse drug events.

The scenarios and recommendations are applicable to most nursing home residents. Prior to making recommendations, always assess the individual resident, review the documentation in the medical record, discuss with facility staff, and use your clinical judgment. Follow your facility's protocols and treatment guidelines when applicable.

References:

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www.cdc.gov/antibiotic-use