

Do one thing differently:

Antibiotic Stewardship

When individuals are transferred from acute care settings, be sure to capture risk factors during the nurse-to-nurse hand off/assessment. Ensure you have the following information:

1. A list of all completed and active antibiotic orders for current hospital stay.
2. Active transferring antibiotic orders containing all elements of a proper order: name, dose, route, duration with stop and start dates, indication.
3. Recent and/or pending lab results.
4. History of adverse drug events (ADEs) related to antibiotics.

Take it a step further:

1. Do you know whether clinical components of the hospital electronic record are accessible to post-acute care providers?
2. Are all transferred active antibiotic orders reviewed by a prescriber in a timely fashion?
3. Do you track pending lab results for acute care transfers?
4. Do you assess antibiotic effectiveness three days post start?

Use these evidence-based clinical sources for practice guidance:

[Antimicrobial Stewardship Gap Analysis Tool \(Minnesota Department of Health\)](#)

[Antibiotic Stewardship Resource Bundles \(CDC\)](#)

[Core Elements of Antibiotic Stewardship for Nursing Homes \(CDC\)](#)

[Suspected Urinary Tract Infection \(UTI\) Action Tool \(HQIN\)](#)

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