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 antibioticorders for current hospital stay.
- 2. Active transferring antibiotic orders containingall 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 ordersreviewed by a prescriber in a timely fashion?
- 3. Do you track pending lab results for acute caretransfers?
- 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)

www.hqin.org

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