Nursing Home
Antimicrobial Stewardship Guide
Help Clinicians Choose the Right Antibiotic

Toolkit 1. Working With a Lab To Improve Antibiotic Prescribing

Tool 5. Sample Policy Letter

[NAME OF NURSING HOME]
RE: Antibiogram Policy

[DATE]

Antibiotics are among the most commonly prescribed pharmaceuticals in long-term care settings, yet reports indicate that a high proportion of antibiotic prescriptions are unnecessary. The adverse consequences of unnecessary antibiotic use include adverse drug reactions or interactions, the development of Clostridium difficile infections, the emergence of multi-drug resistant organisms, antibiotic failure, increased mortality, and greatly increased costs. The Centers for Disease Control and Prevention characterizes antibiotic resistance as “one of the world’s most pressing public health threats.” Unnecessary prescribing practices by clinicians and overuse of newer, broad-spectrum antibiotics when either no antibiotic or an older narrow-spectrum drug would suffice are believed to be the primary contributors to this problem. As a result of the above complexities, nursing homes are increasingly recognized as reservoirs of antibiotic-resistant bacteria.

Antibiograms aggregate information for a nursing home over a period of a year or more. They display the organisms present in clinical specimens sent for laboratory testing and the susceptibility of each organism to an array of antibiotics. Use of antibiograms helps reduce reliance on broad-spectrum antibiotics as initial therapy and leads to fewer clinical failures of antibiotics that are first prescribed.

To improve appropriate antibiotic use for the residents at [NAME OF NURSING HOME], we will begin providing an antibiogram for our facility to all prescribing clinicians starting on [DATE]. We expect that prescribing clinicians will take the antibiogram into account when they are choosing therapy for their residents.

[OPTIONAL: DESCRIBE HOW ANTIBIOGRAM WILL BE PROVIDED (IN PRINT BY MAIL OR FAX, BY EMAIL) AND WHETHER IT WILL BE SENT WITH COMMUNICATIONS ABOUT RESIDENTS SUSPECTED OF HAVING AN INFECTION.]

[NAME AND TITLE OF AUTHORIZING OFFICER]  [DATE]