Antimicrobial stewardship: 7a-Review of patients prescribed broad-spectrum antibiotics

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Antimicrobial stewardship: 7a-Review of patients prescribed broad-spectrum antibiotics

Identifying and definitional attributes

Metadata item type: Indicator Indicator type: Indicator

Short name: Indicator 7a-Review of patients prescribed broad-spectrum antibiotics

METEOR identifier: 612226

Registration status: Australian Commission on Safety and Quality in Health Care, Retired 25/01/2022

Health, Standard 12/09/2016

Description: Proportion of admitted patients who were prescribed a broad-spectrum antibiotic

and for whom a medical review is documented within 48 hours from the first

prescription.

Rationale: Unnecessary continuation of broad-spectrum antibiotics is associated with

antimicrobial resistance.

Culture results, including identification and antibiotic susceptibility test results, are usually available 24–48 hours after specimen collection. The results of these tests should be used to reassess the appropriateness of the initial therapy prescribed, along with the patient's clinical progress and other investigation results (ACSQHC

2014a).

Indicator set: Clinical care standard indicators: antimicrobial stewardship

Australian Commission on Safety and Quality in Health Care, Retired

25/01/2022

Health, Standard 12/09/2016

Outcome area: Use of broad-spectrum antibiotics

Health, Standard 12/09/2016

Collection and usage attributes

Computation description: For the numerator, 'reviewed' means that the clinician initials the microbiology

result report (or in an electronic environment, there is evidence that the clinician has reviewed the result), and a treatment decision is documented within 48 hours from the first prescription. For the purposes of this indicator, 'documented' means there is a note about the treatment decision in the patient's prescription or medical

record, which may be paper-based or electronic.

For the numerator and denominator 'broad-spectrum antibiotics' refers to antibiotics that are active against a wide range of organisms (ACSQHC 2014b) and includes one or more of: meropenem, vancomycin, ciprofloxacin, ceftriaxone or

piperacillin and tazobactam.

Presented as a percentage.

Computation: (Numerator ÷ denominator) x 100

Numerator: Number of admitted patients for whom one or more broad-spectrum antibiotics

were prescribed and for whom the microbiology results were reviewed.

Denominator: Number of admitted patients for whom one or more broad-spectrum antibiotics

were prescribed.

Representational attributes

Representation class: Percentage

Data type: Real

Unit of measure: Service event

Format: N[NN]

Source and reference attributes

Submitting organisation: Australian Commission on Safety and Quality in Health Care

Reference documents: ACSQHC (Australian Commission on Safety and Quality in Health Care) 2014a.

Action 4: Review and assess antibiotics at 48 hours–Fact sheet. Sydney:

ACSQHC.

ACSQHC (Australian Commission on Safety and Quality in Health Care) 2014b.

Antimicrobial Stewardship Clinical Care Standard. Sydney: ACSQHC.