

Nine Common Areas For Improving Antimicrobial Stewardship

- 1 Overprescribing** - Antibiotics are prescribed when not needed (e.g. fever, asymptomatic urinary tract colonisation, viral infections, malaria)
- 2 Overly broad spectrum** - More broad-spectrum antibiotics are prescribed than are necessary (e.g. surgical prophylaxis)
- 3 Wrong antibiotic choice** - Wrong antibiotic(s) are prescribed for indications/infections
- 4 Wrong dose** - Antibiotics are prescribed with the wrong dose (over or underdosing)
- 5 Wrong dose interval** - Antibiotics are prescribed with the wrong dose interval (too much time between doses)
- 6 Wrong route** - Antibiotics are prescribed by the wrong route (e.g. IV instead of oral)
- 7 Wrong duration** - Duration of antibiotic treatment should be optimised (e.g. antibiotics prescribed for too long a period, prolonged surgical prophylaxis)
- 8 Delayed administration** - Administration of antibiotic(s) is delayed from the time of prescription. Repeat doses are not administered in a timely manner, which is critical in the case of septic shock or other serious infections
- 9 Unnecessary combination therapy, including certain fixed dose combination** - Multiple antibiotics are used, particularly with overlapping spectra and in combinations that have not been shown to improve clinical outcomes