# **Sample Annual Antimicrobial Stewardship Program Report**

**Highlights of Antimicrobial Stewardship Program (ASP) Initiatives in 20xx**

* Implemented use of SBAR tool for suspected UTI *(completed)*
* Revised contract with laboratory to include production of facility-specific antibiogram *(completed)*
* Revised contract with consultant pharmacy to review all antimicrobial use *(completed)*
* Provided mandatory antimicrobial stewardship education to all facility staff *(completed)*
* Successfully surveyed by CMS on IPCP and ASP without receiving an F-tag *(completed)*
* Implementing use of SBAR tool for suspected respiratory tract infections *(ongoing)*
* Collaborating with Nebraska ASAP to further augment ASP *(ongoing)*

**Antimicrobial Stewardship Program-Related Outcomes in 20xx**

* 1. *Process Measures*
     1. Compliance with antimicrobial prescribing documentations
        1. 250 prescriptions written
        2. 80% with all the required information (dose, duration, indication)
     2. Compliance with use of SBAR for suspected UTI
        1. 200 SBAR was used and 160 (80%) were fully completed
  2. *Antimicrobial Use Measures*
     1. Antimicrobial starts/1000 resident-day is 5% lower compared to 20ww
     2. Antimicrobial days of therapy/1000 resident-day is by 7% lower compared to 20ww
     3. Antimicrobial appropriateness was decreased by 10% compared to 20ww
     4. Use of SBAR for suspected UTI may have resulted in avoidance of 25 antimicrobial prescriptions

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| --- | --- | --- | --- | --- |
|  | Antibiotic Starts / 1000 Resident-Day | | Days of Therapy / 1000 Resident-Day | |
|  | **20xx** | **20ww** | **20xx** | **20ww** |
| All antimicrobials | 14.17 | 14.88 | 121.68 | 130.20 |
| Most frequently prescribed antimicrobials | | | | |
| *Levofloxacin* | 1.96 | 1.98 | 32.54 | 31.00 |
| *Ciprofloxacin* | 1.59 | 1.57 | 12.88 | 12.90 |
| *Cephalexin* | 1.38 | 1.40 | 13.62 | 11.05 |

* 1. *Outcome Measures*

1. *Clostridium difficile* infection rate
   1. 8.5 cases/10,000 resident-days (unchanged from 20ww)
2. Antimicrobial-associated adverse drug reactions
   1. 2% of residents who received antimicrobials developed an adverse events
   2. The most severe adverse reaction resulted in hypoglycemia after administration of levofloxacin,   
      requiring hospital admission
3. Antimicrobial resistance
   1. *E coli* was the most commonly isolated pathogen with the following antimicrobial susceptibilities
      1. Ciprofloxacin: 50% (10% lower compared to 20ww)
      2. Nitrofurantoin: 89% (unchanged from 20ww)
      3. Cephalexin: 85% (unchanged from 20ww)
4. The rates of MRSA, VRE, ESBL *E coli* infections were generally stable or lower compared to previous years

**Proposed ASP Activities for 20yy**

* Continue implementation of SBAR for suspected respiratory tract infections
* Continue collaboration with Nebraska ASAP with live and direct videoconferencing during ASP meetings
* Improve completion rate for UTI SBAR to 95% or more
* Track compliance rate for respiratory tract infection SBAR once implementation has been completed
* Reduce antimicrobial prescriptions with missing required documentation to 10% or lower
* Decrease levofloxacin use by 10% (either starts or days of therapy/1000 resident-days)