



ANTIBIOTIC TIME-OUT ✓ CHECKLIST

How to use this checklist:

- Review the need for antibiotics on each patient on antibiotics daily. This review allows you to evaluate new information, such as clinical improvement and new culture results, to update your treatment plan. At a minimum, there are two key times to review antibiotic treatment:
 - ✓ 48-72 hours after admission
 - A lot of diagnostic information has likely returned by now and the patient has likely either improved (or deteriorated) on current therapy. It's therefore time to reassess all information
 - ✓ At hospital discharge
 - Patients being discharged are often less sick and recovering but not completely better. Sometimes they need to continue antibiotics to treat the infection for which they were hospitalized. This is a great time to make sure the rest of their treatment is guidelines appropriate
 - ✓ Other useful times include: any transition of care, change in status, or handoff between providers.

ANTIBIOTIC TIME-OUT CHECKLIST

Do we still think this patient has a bacterial infection or is another diagnosis more likely?

If the patient has a bacterial infection, can we de-escalate antibiotics?

Can the patient be switched to an oral antibiotic?

How long should the patient receive antibiotics?

Is the antibiotic prescribed at the right dose?

**Have we documented dose, duration and indication for all antibiotics?
In DC Summary, include total planned duration with start/stop dates.**

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