Antibiotic Indications

▶ *Quick Reference Guide for Hospital Pharmacists*

Intermountain® Healthcare

This quick reference guide describes the purpose, process, and requirements for including indications in HELP1 for every antimicrobial prescription. All antibiotics, antifungals, and antivirals are in the scope of these procedures; this card focuses on antibiotics.

The goal

To ensure that antibiotics are prescribed correctly. Ask yourself, is this...

- The RIGHT patient — *Does the patient have an infection or need antibiotics based on an upcoming procedure?*
- The RIGHT drug — *Which antibiotic is most appropriate?*
- The RIGHT dose — *What dose is most appropriate?*
- The RIGHT route — *IV, oral, switch from IV to oral?*
- The RIGHT duration — *3 days, 7 days, 6 weeks?*

Key Point:

Knowing why the patient is receiving an antibiotic will enable you to assist the prescriber in providing the RIGHT care to the patient.

What is an antibiotic indication?

- An antibiotic indication is the reason for antibiotic use — either an infection being treated or prophylaxis against an infection.
- Every antibiotic needs to come with an indication for use (like radiology and PRN orders need indications).
- Indications should be as specific as possible — and they are **NOT symptoms** (like pain).
- The syndrome the antibiotic is treating, not the organism, is needed for an antibiotic indication.
- A list of appropriate indications is located on the Intermountain Antibiotic Stewardship home page: **intermountain.net/qpsafety/Pages/SCORE.aspx**.

Good indication examples:

- *Surgical prophylaxis*
- *Cellulitis*
- *Community acquired pneumonia*
- *Empiric sepsis*

Bad indication examples:

- *Cloudy urine*
- *Fever*
- *Pain*

Why are antibiotic indications important?

Reason 1: **It will help you as a pharmacist.**

What indications enable you to do:	For example:
Assess the dose based on the indication and the patient's renal function.	Ceftriaxone 1 gram IV daily is appropriate for community-acquired pneumonia, but not for meningitis.
Assess the spectrum of activity for the given indication.	Piperacillin/tazobactam is appropriate for a healthcare-associated pneumonia but is too broad for a urinary tract infection.
Assist with documenting SCIP compliance, and therefore reimbursement.	Levofloxacin for 7 days after a surgical procedure is appropriate if an infection is documented, but is a SCIP failure if an indication for use is not given.

Key Point:

Antibiotic indications help you validate the dose, spectrum, and documentation of antibiotic prescriptions.

Why are antibiotic indications important? (continued)

Reason 2: Including an antibiotic indication in the EMR is an upcoming CMS requirement.

CMS draft requirements[1]

1. C.2.a Facility has a multidisciplinary process in place to review antimicrobial utilization, local susceptibility patterns, and antimicrobial agents in the formulary and there is evidence the process is followed.

1. C.2.b Systems are in place to prompt clinicians to use appropriate antimicrobial agents (e.g., computerized physician order entry, comments in microbiology susceptibility reports, notifications from clinical pharmacists, formulary restrictions, evidence-based guidelines and recommendations).

1. C.2.c Antibiotic orders include an indication for use.

1. C.2.d There is a mechanism in place to prompt clinicians to review antibiotic courses of therapy after 72 hours of treatment.

1. C.2.e The facility has a system in place to identify patients currently receiving intravenous antibiotics who might be eligible to receive oral antibiotic treatment.

Key Point:

Knowing why the patient is receiving an antibiotic will meet upcoming CMS requirements.

Reference

1 Centers for Medicare & Medicaid Services. Pre-decisional surveyor worksheet: assessing hospital compliance with the condition of participation for Infection Control. Pilot draft. http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/Survey-and-Cert-Letter-12-32.pdf. Published May 18, 2012. Accessed November 13, 2013.

Where are antibiotic indications entered?
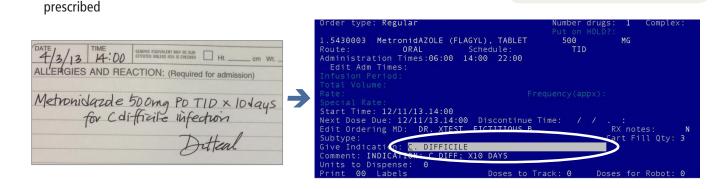
Every antibiotic order should have:

- Patient name
- Time and date
- Antibiotic prescribed
- Dose
- Route
- Frequency
- **Indication**
- Duration (optional)

Key Point:

The prescribing provider writes the indication in the order. The pharmacist enters the indication into HELP1 with the antibiotic.

What if there isn't an indication given?

Do not delay filling the order due to lack of indication!

- Contact the provider at a convenient time (don't call after service hours).
- Add a clarification to the paper chart and indication to the electronic order.
- If the provider gives an invalid indication, refer the provider to the Antimicrobial Prescribing Procedure at your facility.

Key Point:

Fill the prescription, even if an indication isn't provided. Work with the prescribing provider to add the indication to the patient record.