

ANTIMICROBIAL STEWARDSHIP AND SEPSIS

ANTIMICROBIAL INDICATION AND FOLLOW-UP

Background

Sepsis is an entity in which is necessary the timely use of antimicrobials in the first hour in order to reduce mortality. Therefore the proper election of the antimicrobial depends on several patients' factors that lead us to choose a broad-spectrum antimicrobial over the lack of cultures results. Nevertheless the overuse of antimicrobials has prompted an alarming resistance nowadays. This two opposite needs leaves us in a troublesome scenario: the rightful and timely antimicrobial indication in a proper length versus the overuse when receiving cultures results.

Aim

Give patients, timely and appropriate antimicrobials backed up by cultures and clinical outcomes.

CLÍNICA San Felipe		HORA DE ORO - EMERGENCIA		STICKER DE IDENTIFICACION	
FECHA INICIO		HORA INICIO			
ALERTA CLAVE SEPSIS					
1 Qsofa	Frecuencia Respiratoria >22 Presión Arterial Sistólica < 100 Escala Glasgow < 15	<input type="checkbox"/>	<input type="checkbox"/>	:	
2 Sospecha de Infección	Pulmonar Tracto Urinario Abdominal Piel/herida operatoria SNC Desconocido	<input type="checkbox"/>	<input type="checkbox"/>	:	
3 Laboratorio	Paquete Sepsis Hemocultivo Otro cultivo Otros	<input type="checkbox"/>	<input type="checkbox"/>	:	
4 Imágenes	Rx Tórax portátil TEM Ecografía	<input type="checkbox"/>	<input type="checkbox"/>	:	
5 Oxigenoterapia		<input type="checkbox"/>	<input type="checkbox"/>	:	
6 Fluidos		<input type="checkbox"/>	<input type="checkbox"/>	:	
7 Lactato		<input type="checkbox"/>	<input type="checkbox"/>	:	
8 Antibióticos		<input type="checkbox"/>	<input type="checkbox"/>	:	
9 Evaluación UCI		<input type="checkbox"/>	<input type="checkbox"/>	:	
10 Destino	UCI <input type="checkbox"/> HOSPITALIZACIÓN GENERAL <input type="checkbox"/> UCIN I (59) <input type="checkbox"/> SALA DE OPERACIONES <input type="checkbox"/> UCIN II (48) <input type="checkbox"/> TRANSFERENCIA <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	:	

COMPLETAR EN MENOS DE 1 HORA

Conclusion

A close follow up by infectious disease physicians in septic patients assure avoidance of high spectrum antimicrobial overuse.

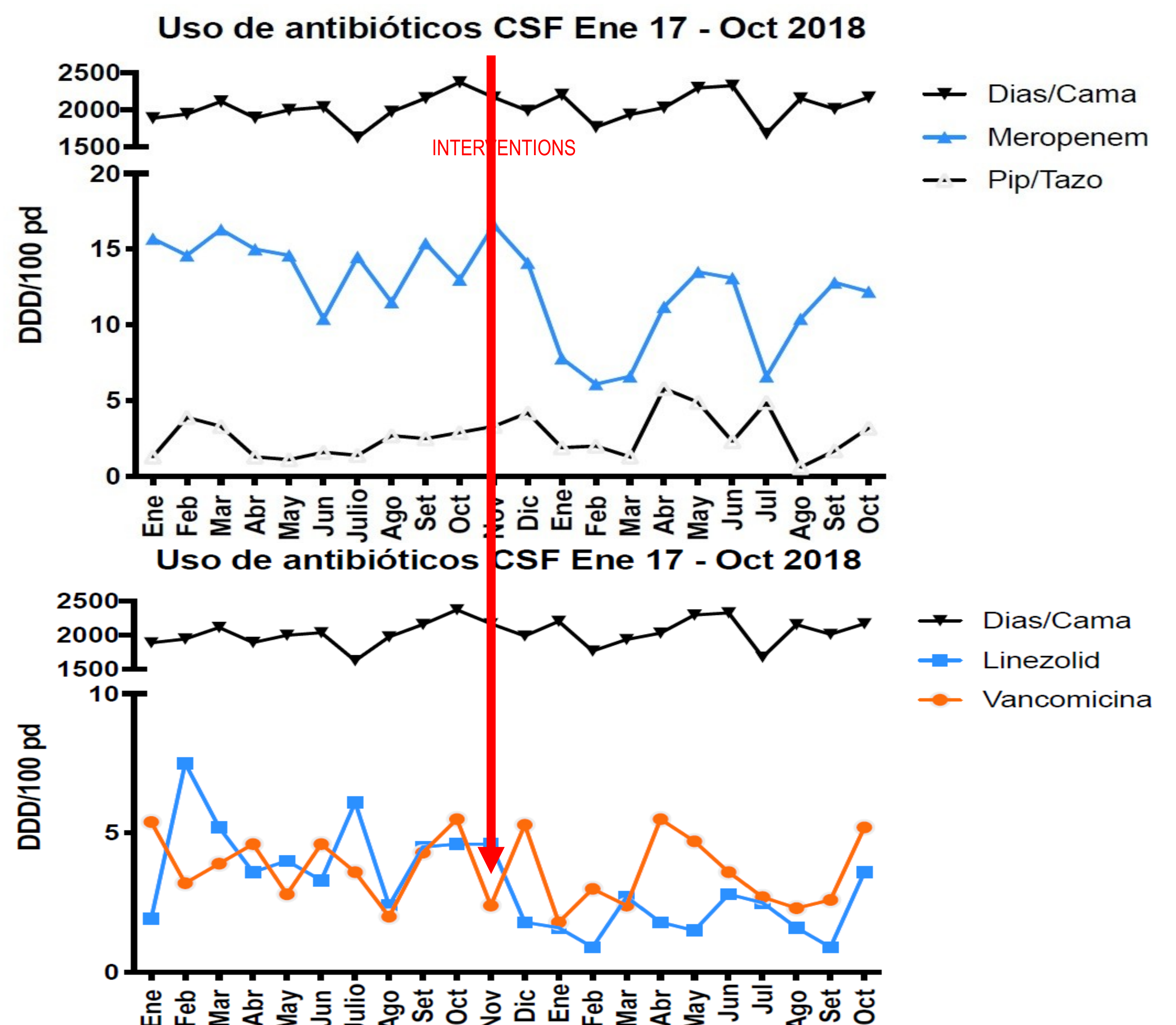
CLÍNICA San Felipe		Identificación	
PROGRAMA DE USO DE ANTIMICROBIANOS INTERCONSULTA			
Fecha: DD/MM/AAAA:	____/____/____		
Hora: HH:MM	____:____		
Antimicrobiano iniciado:			
Dosis y vía de administración:			
RESPUESTA DEL PROGRAMA:			
Diagnóstico:			
Recomendaciones:			
() Continuar con dosis y vía de administración iniciados:			
() Alternativa de cobertura antimicrobiana:			
Laboratorios adicionales:			
Firma y Sello Médico Infectólogo			
[La recomendaciones del programa están sujetas a la decisión final del médico tratante]			

Actions Taken

Antimicrobial stewardship was developed by experts in infectious disease who select broad-spectrum antimicrobial, that must be kept for the best therapeutic measures. Additionally we develop a pathway to administrate antibiotics after the patients has been cultured during the first hour in the ER.

Summary of Results

We have two results, in one year we have achieve 80.76% of adherence to sepsis pathway with more intervention's needed in the group of those who not receive antibiotics in the first hour. The second result is related to a 95% follow-up in the antimicrobial stewardship program focused adult general ward and intensive care unit with significance decrease in the use of linezolid, meropenem and vancomicina in 12 month of it.



Comments

The main goals of these two programs is crucial to avoid increase in antimicrobial resistance in patients with sepsis and septic shock. We are starting an inpatient follow-up program for people receiving high spectrum antibiotics and check the pertinence of their use while measuring resistance in blood cultures and take the actions as needed.

Contact and Resources

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