



HOSPITALISTS: BE ANTIBIOTICS AWARE

Perform an Antibiotic Time Out at Discharge

Clinicians should review antibiotic therapy at discharge and answer these key questions:

**Does this patient
have an infection
that will respond
to antibiotics?**

- ✓ Confirm the symptoms represent an infection and not an alternate, non-infectious diagnosis.



**Is the patient
on the
right antibiotic?**

- ✓ If medical record indicates penicillin allergy, determine if the patient is truly allergic.
- ✓ Use the recommended antibiotic for the infection.
- ✓ If the patient will be discharged on a fluoroquinolone, consider if there is a safer alternative, if appropriate.



**How long should
the patient be
treated?**

- ✓ Use the shortest recommended antibiotic therapy for patients with an uncomplicated clinical course and who responded appropriately to therapy.
- ✓ Document outpatient antibiotic duration in the discharge summary.
- ✓ Review inpatient antibiotic duration the patient received when determining post-discharge antibiotic therapy.



This document is meant to provide general guidance and does not apply to all clinical scenarios. Prior to making interventions, always assess the individual patient and use your clinical judgment. Follow your institution's treatment guidelines and protocols when applicable.

References:

- Centers for Disease Control and Prevention. Core Elements of Hospital Antibiotic Stewardship Programs 2014. Accessed at <https://www.cdc.gov/antibiotic-use/healthcare/implementation/core-elements.html> 11 March 2019
- Antibiotic Use at Discharge Pocket Card - Michigan Hospital Medicine Safety Consortium



www.cdc.gov/antibiotic-use

