

NURSING HOME STAFF: BE ANTIBIOTICS AWARE

Improve Communication about Antibiotic Treatment with Residents and Families



SCENARIO

Mrs. Smith's daughter is concerned because her mother did not sound like herself on the phone. She is worried that her mother may have a urinary tract infection (UTI) and needs an antibiotic.

Resident and family preferences often play a significant role in treatment decisions in nursing homes. Engaging residents and families in educational efforts about appropriate antibiotic use is critical to ensure that clinicians have their support in making the best antibiotic treatment decisions.

Effective communication can improve interaction with residents and families, and address their expectations to receive an antibiotic. Communications skills training can help clinicians communicate effectively and make care more resident-centered.

Communication skills training significantly reduces antibiotic prescribing in the outpatient setting. The training involves a 4-part communication strategy to explain why an antibiotic is not needed. This strategy was developed and tested in the outpatient setting, but can be adapted to nursing homes.

Nursing home staff can improve communication about appropriate antibiotic use with residents and families by:



1. Reviewing findings:

Mrs. Smith is less conversant than usual today. She is not coughing or complaining of burning with urination, urgency, or other symptoms to suggest an infection. On examination, she does not have a fever. In addition, her lungs sound clear and she has no abdominal tenderness.



2. Delivering a clear diagnosis:

Her urine is darker, which seems most consistent with dehydration.



3. Providing a two-part, FIRST negative THEN positive treatment recommendation:

Since Mrs. Smith's clinical findings do not indicate a UTI, an antibiotic will not help and may cause side effects, such as diarrhea. Instead, we will give her fluids intravenously to treat her dehydration. Also, over the next 24 hours, we will closely monitor Mrs. Smith and measure her fluid intake.



4. Providing a contingency plan:

If she does not improve, starts to develop a fever, or any new symptoms consistent with an infection, we will do additional laboratory tests and reassess if antibiotics are needed.

The scenarios and recommendations are applicable to most nursing home residents. This document is meant as a general guidance and does not apply to all clinical scenarios. Always assess the individual resident, use your clinical judgment and follow your facility's protocols and treatment guidelines when applicable.



www.cdc.gov/antibiotic-use