

## 6.2 ANTIMICROBIAL STEWARDSHIP



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Intervention Type	1 <sup>st</sup> Q22	2 <sup>nd</sup> Q22	3 <sup>rd</sup> Q22	4 <sup>th</sup> Q22	CY Total
De-escalation	276	249	306	321	<b>1,152</b>
Dose adjustment	2,765	2,425	2,705	2,979	<b>10,874</b>
Bug-Drug mismatch	90	91	85	97	<b>363</b>
IV to PO conversion	424	420	280	336	<b>1,460</b>
Therapeutic duplication	69	62	70	73	<b>274</b>
<b>Totals</b>	<b>3,624</b>	<b>3,247</b>	<b>3,446</b>	<b>3,806</b>	<b>14,123</b>

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Lab- New Vitek Cards Forthcoming to include updated CLSI standards for MICs

MRSA ICU Decolonization Protocol

Implementation of Disease State Specific Powerplans to Align with Joint Commission Standards: PNA, H. Pylori, Sepsis

Optimization of Procalcitonin laboratory based reporting

Leveraging Cerner to default duration of antibiotics within select powerplans

CDiff Infection Interdisciplinary Process Improvement Team Approaching one year benchmark

Surgical Site Infection Interdisciplinary Process Improvement Team-Updated Antibiotic Guidance

Standardization of Restriction Process for Antimicrobials

Continual Evaluation of Utilization of Restricted Antimicrobials

Joint Commission Updated Standards Gap Analysis Inpatient-Education Requirement Live

Joint Commission Updated Standards Gap Analysis Ambulatory- Investigating Ways to Capture Data