Providence Mt. Carmel and St. Josephs Hospitals

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AMS lead pharmacist

Disclosures

- Nothing to disclose

Outline

- Our program
  - Structure
  - Policies
- Lowlights
- Specific projects/interventions
- Highlights

# Our program – Structure

- AMS committee
  - Pharmacist lead, Physician lead (hospitalist lead), Infection preventionist (RN), Lab director, Nurse department leaders, Information services, Quality Assurance
- Quarterly meetings
  - Discuss metrics, implement policies
- Pharmacy contract with ID specialist
  - Weekly calls

Policies

- IV to PO
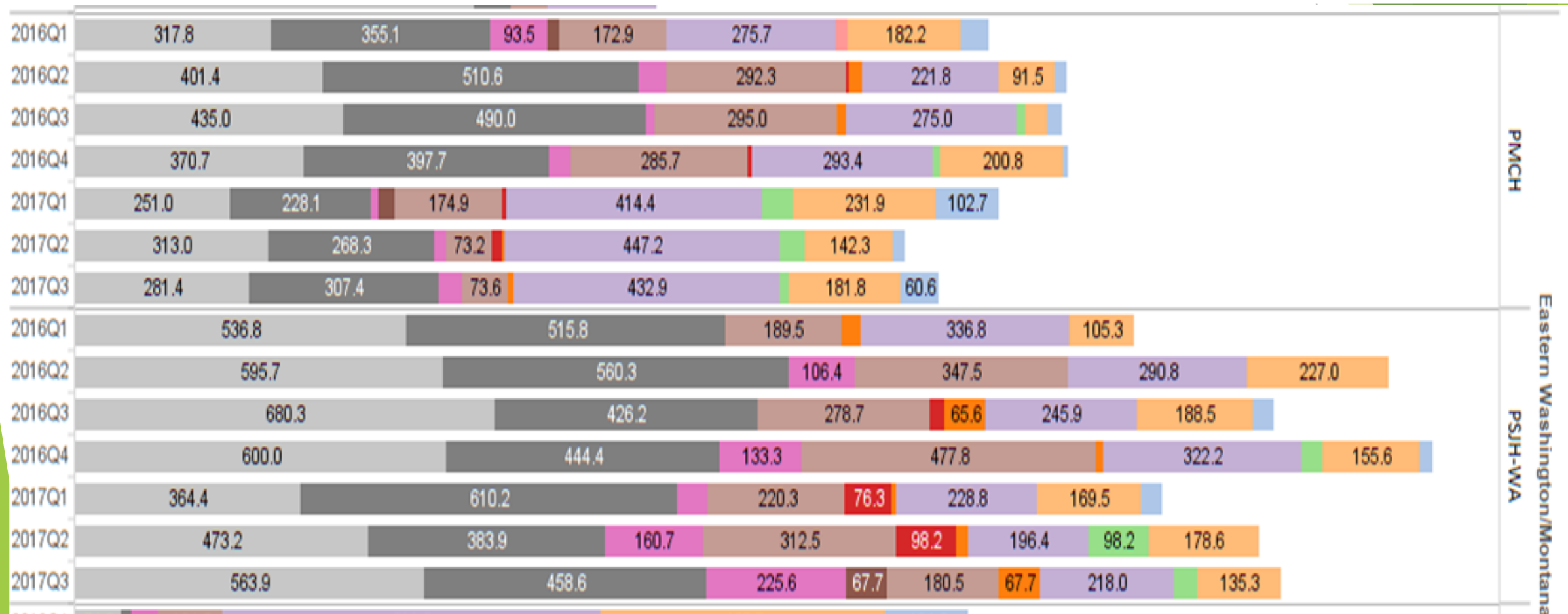- Vancomycin per pharmacy
- Formulary restrictions
- Epic order sets

Lowlights
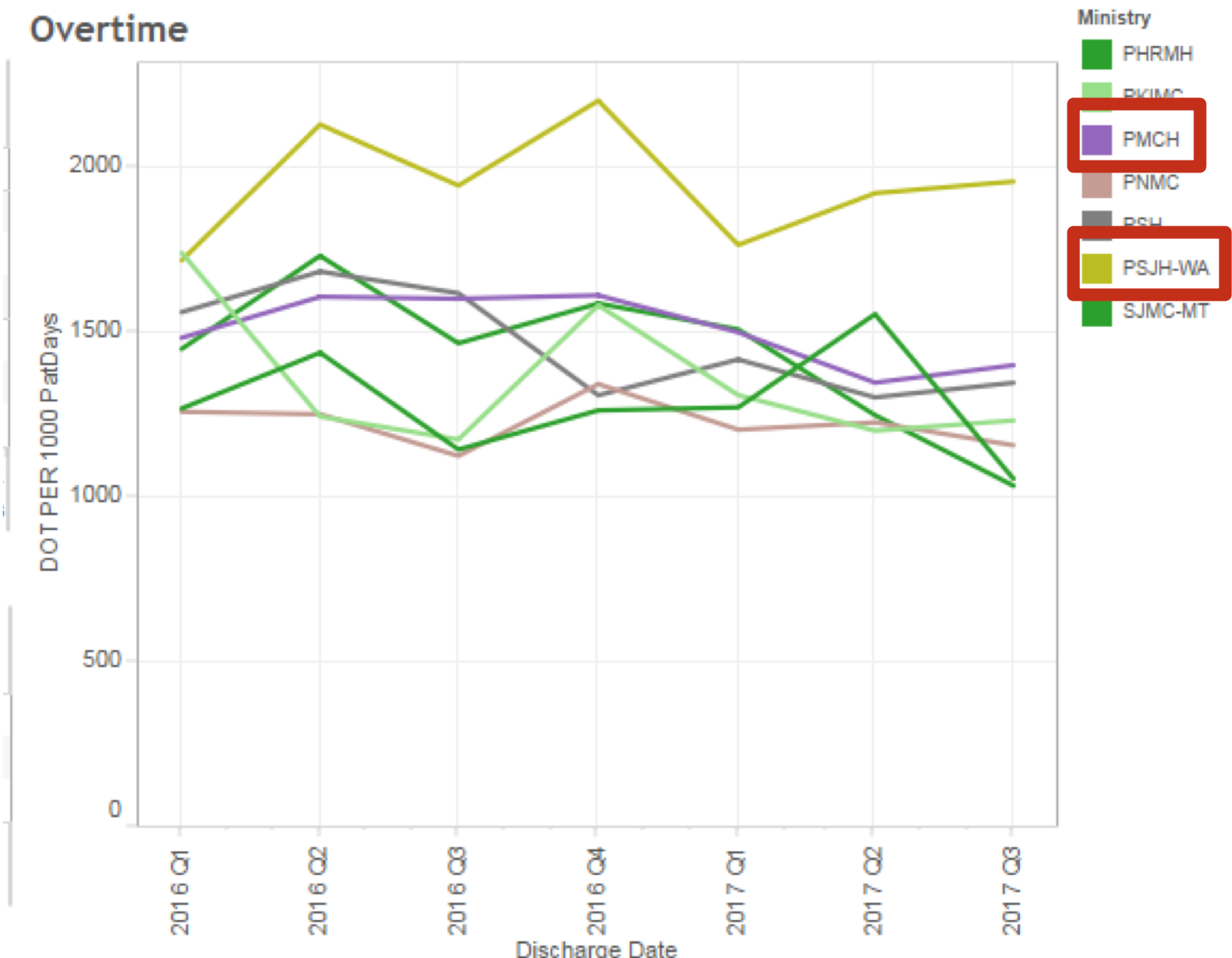
Lowlights

Interventions

- Procalcitonin on site
    - Lengthy process
    - Lab director took lead
- Antibiotic 48 timeout
    - Pharmacist driven conversation
    - Asking 3 questions
        - What infection are we treating?
        - What duration are we anticipating?
        - Are we on appropriate abx at this time?

48 hour timeout

Antibiotic Time outs

S – Pharmacy in conjunction with the AMS subgroup will be implementing a new antimicrobial stewardship initiative to have 48 hour antibiotic timeouts for patients admitted to our services.

B – Currently there is no set policy for how we track and determine appropriate antibiotic choice and duration.

A – An antibiotic timeout would give more structure to how pharmacist discuss antibiotic duration with other caregivers. By planning early, hopefully we can reduce the unnecessary usage of antibiotics as well as insure appropriate coverage is being given to our patients.

48 hour timeout

R – The details of the antibiotic timeout process are below.

1. Identification of appropriate patients to have antibiotic timeouts on
   a. Pharmacist will add a new column to their handoff list titled "AMS 2 day". This column shows an "Rx" symbol when a patient meets the criteria of being on antibiotics for at least 48 hours.
   b. The pharmacist will use this list when going to the 0830 (MCH) or 1000 (SJH) meetings.
2. Pharmacist will <u>initiate discussion</u> with other healthcare givers at the patient rounds
   a. When a patient is brought up during the meeting that has one of these icons, with no documentation of previous discussions, the pharmacist will ask the following questions
      i. What infection are we treating?
      ii. What duration of antimicrobial therapy are we anticipating?
      iii. Is the patient on the appropriate antibiotic(s) at this time?
   b. If the patient already had these questions answered then the Pharmacist shall give quick update to all providers on the answer to these questions during the meeting
   c. The pharmacist will note the given answers to the questions for later documentation
   d. If the answer to any of the questions is unknown at this time, the pharmacist will follow up on that question in another 48 hours or as appropriate
3. Documentation
   a. The pharmacist will open a new "AMS-Duration of Therapy" I-Vent
   b. They will use the Smartphrase ".rxtimeout" as a template and fill in the answers as appropriate
   c. This I-Vent will then be copied to a note so other caregivers can see the information
   d. The pharmacist will also document in the Handoff in the "To Do" these questions and answers for reference in future meetings.
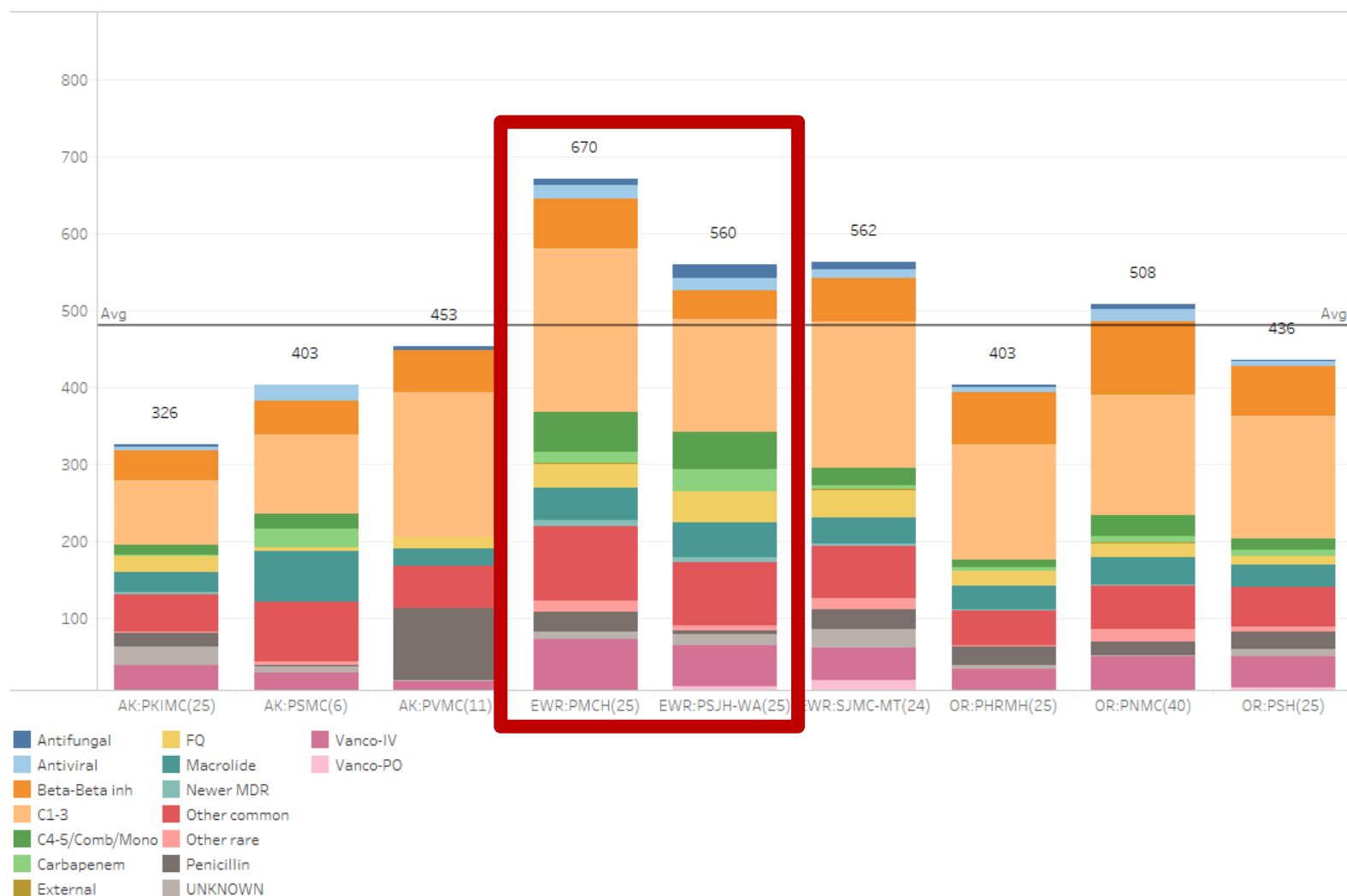
Biggest key to success

- Relationships!
- Take the small victories

Highlights Days of Therapy for 2020

Thanks for the opportunity to share!