

# Partnership for Patients



ALASKA STATE HOSPITAL &  
NURSING HOME ASSOCIATION



Washington State  
Hospital Association

## Antimicrobial Stewardship Measure Definition Sheet

**Goal:** Identify areas of opportunity within specific antibiotic classes to optimize antimicrobial utilization and decrease antimicrobial resistance patterns, development of secondary infections and adverse medication effects.

### Data Definition – Antimicrobial Utilization

**Numerator:** Total days of therapy (DOT) of select antibiotics\*

A Day of Therapy (DOT) will be defined as at least one dose of a selected antibiotic given on a calendar day to a patient in an inpatient unit (Med/Surg, ICU/Tele, PICU, NICU, OB). A patient on multiple antibiotics on the selected list would be counted for each separate antibiotic given each calendar day. For medications with 48-hour dosing intervals, a day of therapy will be documented only on a calendar day in which the antibiotic was administered (for e.g. levofloxacin).

**Denominator:** Patient days (total acute inpatient, observation and rehab days)

#### **Penicillins**

- Piperacillin/Tazobactam (Zosyn)
- Ticarcillin/Clavulanate (Timentin)
- Ampicillin/Sulbactam (Unasyn)
- Amoxicillin/Clavulanate (Augmentin)

#### **Cephalosporins:**

- Ceftriaxone (Rocephin)
- Cefotaxime (Claforan)
- Ceftazidime (Fortaz)
- Cefepime (Maxipime)
- Ceftaroline (Teflaro)Pen

\***Suggested Antibiotic Focuses** (for full details, see [Report Writing Specifications<sup>1</sup>](#)):

1. Fluoroquinolones
2. Clindamycin
3. Penicillins (broad spectrum)
4. Cephalosporins (3<sup>rd</sup> and 4<sup>th</sup> generation, broad spectrum)
5. Carbapenems

### Inclusion Criteria

- Patients of all ages, who are admitted to hospital bed regardless of status (e.g. include observation, rehab and swing bed patients)
- All routes (oral, IV, IM)

### Exclusion Criteria

- Well newborns not admitted to a pediatric unit or NICU
- Doses given to patients in the Emergency Department or Ambulatory Surgery

### Data Submission:

1. Input data into WSHA Quality Benchmarking System (QBS). If you need access, contact Decision Support at [decisionsupport@wsha.org](mailto:decisionsupport@wsha.org). Current users may log in with their QBS credentials. For questions Meg Kilcup at [antimicrobialstewardship@wsha.org](mailto:antimicrobialstewardship@wsha.org).
2. Ongoing: Monthly data to be submitted to QBS by 45 days after the end of the prior month.

Data Month	January	February	March	April	July	August	September	October
Submit By	March 15 <sup>th</sup>	April 15 <sup>th</sup>	May 15 <sup>th</sup>	June 15 <sup>th</sup>	Sept. 15 <sup>th</sup>	Oct. 15 <sup>th</sup>	Nov. 15 <sup>th</sup>	Dec. 15 <sup>th</sup>

<sup>1</sup> [http://www.wsha.org/wp-content/uploads/RepWritSpec\\_ASP.pdf](http://www.wsha.org/wp-content/uploads/RepWritSpec_ASP.pdf)

If you have any questions, please contact [antimicrobialstewardship@wsha.org](mailto:antimicrobialstewardship@wsha.org).