

A PROSPECTIVE ANALYSIS OF ANTIBIOTIC-SUSCEPTIBILITY MISMATCH AND ANTIBIOTIC DE-ESCALATION WITH THE IMPLEMENTATION OF AN ANTIBIOTIC STEWARDSHIP PROGRAM (A1), John Chang. Desert Regional Medical Center, Palm Springs, CA (jfc92773.chang@tenethealth.com) IRB Approval Not Needed

The growing concern of antimicrobial resistance has led to an intense focus on optimization of antibiotic use, with simultaneous goals of assuring adequate therapy to the individual patient while minimizing the public health consequences of overuse. Recent research has validated the benefit of initial broad-spectrum empirical antimicrobial therapy followed by streamlining or de-escalation of therapy when microbiological and clinical data becomes available. The main objectives of this study were to prospectively audit the appropriateness of initial antibiotic coverage (as antibiotic susceptibility mismatches [ASMs]) and capture opportunities where potential existed for antibiotic de-escalation, both involving direct interaction and feedback to the prescriber. All hospitalized patients with positive bacterial cultures isolated from sterile body sites or fluids were included in this study and actively monitored from date of admission to discharge (or death). ASMs were evaluated twice: once for initial therapy (after organism identification but before susceptibility results) and once for directed therapy (after the release of susceptibility results). The overall incidence and type of ASMs will be reported which will serve as a target for ongoing quality improvement efforts. The percentage of

cases where the antibiotic spectrum was reduced after susceptibilities became available was assessed to determine the impact of an antimicrobial stewardship program on institutional prescribing patterns. As timeliness of de-escalation often proves difficult in practice, the actual mean time to de-escalation was also measured. Implementation of an Antibiotic Stewardship Program (ASP) within a Community-Based Hospital and preliminary findings will be presented.