

# STRATEGIES TO REDUCE ANTIBIOTIC OVERUSE IN PRIMARY CARE: DOCUMENTING INDICATION

## ANTIMICROBIAL STEWARDSHIP STRATEGY DESCRIPTION



**Include an indication or reason for use every time you prescribe an antibiotic.**

This practice helps other health care professionals and patients understand the reason for use and facilitates assessment.

## RESOURCES & HOW TO INCORPORATE INTO PRACTICE

Best practices for implementation of antibiotic indications are outlined in [Antibiotic Documentation: death by a thousand clicks](#).<sup>1</sup>



- See this [visual abstract](#) for a summary of how to measure, implement, and evaluate antimicrobial indications for antibiotic prescribing.<sup>2</sup>
- Promote indication as the “sixth right” of information required for prescribing: right patient, drug, dose, route, duration, and indication.<sup>3</sup>

## IMPACT ON ANTIMICROBIAL USE



A randomized controlled trial of prompting clinicians to provide a reason when prescribing potentially inappropriate antibiotic prescriptions (“accountable justification”) found that this was associated with a significant reduction in antibiotic prescribing for **acute respiratory tract infections** with no evidence of harm.<sup>4</sup>



**18%  
Absolute  
reduction  
in antibiotic  
prescribing**

A scoping review found emerging evidence that antibiotic indication documentation is associated with improved prescribing and patient outcomes.<sup>2</sup>

### References

1. Ciarkowski C, Vaughn VM. Antibiotic documentation: death by a thousand clicks. *BMJ Qual Saf.* 2022 Sep 2 [Epub ahead of print]. Available from: <http://dx.doi.org/10.1136/bmjqs-2022-015020>
2. Saini S, Leung V, Si E, Ho C, Cheung A, Dalton D, et al. Documenting the indication for antimicrobial prescribing: a scoping review. *BMJ Qual Saf.* 2022 May 12 [Epub ahead of print]. Available from: <https://doi.org/10.1136/bmjqs-2021-014582>
3. Schiff GD, Seoane-Vazquez E, Wright A. Incorporating indications into medication ordering -- time to enter the age of reason. *N Engl J Med* 2016;375:306-9. Available from: <https://doi.org/10.1056/NEJMp1603964>
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