

Letterkenny University Hospital - LUH Antimicrobial Prescribing Policy/Guidelines: Documentation of Antimicrobial Use (with example)

Documentation of Antimicrobial Use

Accurate documentation is a key component of appropriate antimicrobial prescribing. It improves communication between medical, nursing and pharmacy staff and between different medical practitioners who may review therapy throughout the prescribed course and subsequently. It also facilitates multidisciplinary audit of antimicrobial prescribing within and between hospitals, to inform and improve education and action plans to improve antimicrobial practices.

There is a dedicated section in the LUH drug kardex for antimicrobial prescriptions i.e. page 4 and page 5.

Key elements to consider and document when prescribing antimicrobials are:

R - Route : Please review all IV antimicrobials DAILY

I - Indication for the antimicrobial e.g. community acquired pneumonia or CAP

D - Duration/Review Date e.g. 7 days for hospital acquired pneumonia

Always document the treatment indication and treatment duration or review date in both the appropriate box in the antimicrobial section of the drug chart (example shown below) **AND** in the patient's medical notes.

Example of antimicrobial section of drug chart with indication and duration documented:

There should be a clear plan for REVIEW or if possible Stop date clearly defined. Remember START SMART, THEN FOCUS e.g. "Review IV to PO switch in 48hrs"

The frequency should be clearly filled out and the timings circled e.g. if an antimicrobial is 4hourly are the timings correct and actually 4hourly?

Indication should be clearly documented on the kardex (as well as the notes).

There is also a dedicated section for vancomycin & gentamicin dosing (specific antimicrobials which require therapeutic drug monitoring). This section facilitates recording of serum level results and modification of doses based on these levels if required.

Example of completed Vancomycin prescription as follows:

ANTIMICROBIAL THERAPEUTIC DRUG MONITORING (TDM)

VANCOMYCIN IV

Indication: MRSA bacteraemia (as per micro) Target level: 10-15mg/L 15-20mg/L

Max administration rate: 10mg/minute Max concentration: 5mg/mL

LOADING DOSE Recommended for critical care, haematology/oncology patients or if advised by microbiology

Date	Time	Dose (Max = 2g)	Frequency	Prescriber Signature & Reg. No.	Given by	Checked by	Time
8/3/24	10.00	2g	ONCE	A. Prescriber	EF	EK	11.00

Check first trough (pre-dose) level on day 3. Do not hold doses while awaiting levels, unless specifically advised.

MAINTENANCE

Date	Dose	Freq	Prescriber Signature & Reg. No.	Stop Date	TIME
8/3/24	1g	BD	A. Prescriber 1234567	10/3/24	06.00
10/3/24	1.25g	BD	A. Prescriber 1234567	(a) 12.00	10.00 ✓ 10 EF
					12.00
					14.00
					18.00
					22.00 EK EK

Time level taken: 09.00
Level: 12.3

The red square indicates when 1st level should be checked (i.e. 1 hour before the 4th or 5th dose – when the drug is expected to be at steady state).

It is very important to indicate the target level – more serious infections require a higher concentration of the drug. More information on monitoring can be found in the Vancomycin dosing section of the app.