Impact of Antimicrobial Stewardship in a Community Teaching Hospital

Brandon Olson¹, PharmD Candidate, Jared Sheley¹,², PharmD, BCPS, and Jena Foreman², PharmD, BCIDP

1. Southern Illinois University Edwardsville School of Pharmacy 2. HSHS St. Elizabeth’s Hospital

Table 1: Mean Monthly DOT/1000 PD

<table>
<thead>
<tr>
<th></th>
<th>Pre-PAF ± SD</th>
<th>Post-PAF ± SD</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>DOT/1000 PD</td>
<td>710.10 ± 22.4</td>
<td>780.73 ± 28.8</td>
<td>0.0082</td>
</tr>
</tbody>
</table>

Table 2: Mean HAI CDI rates

<table>
<thead>
<tr>
<th></th>
<th>Pre-PAF ± SD</th>
<th>Post-PAF ± SD</th>
<th>p-value</th>
</tr>
</thead>
<tbody>
<tr>
<td>CDI rate</td>
<td>0.5 ± 0.58</td>
<td>1.0 ± 0.82</td>
<td>0.3559</td>
</tr>
</tbody>
</table>

Discussion

- A statistically significant increase in antimicrobial use was observed after PAF was implemented even though discontinuation of drug was the second most frequent intervention type
- No statistically significant difference in HAI CDI rates

References


Author Contact and Disclosures

- Brandon Olson: braolso@siue.edu; Nothing to disclose
- Jared Sheley: jashele@siue.edu; Nothing to disclose
- Jena Foreman: jena.foreman@hshs.org; Nothing to disclose