



Antibiotic stewardship: A process improvement in long-term care

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Abstract

The problem: There is an increase in antibiotic prescribing on patients in the long-term care unit without adherence to specimen collection of culture prior to antibiotic prescribing. There is an increase of misuse of antibiotics in the case of viral infections, minor infections, and ineffective dosing of antibiotics

The purpose: Education and teaching of nurses and physicians about proper adherence to specimen collection of culture prior to antibiotic prescription And Optimal use of antibiotic prescription

Collection of data from the pre-intervention phase shows significant trend indicating patients are often prescribed antibiotics without any specimen collection, resulting in inappropriate treatment to bacterial infections. The trend places patients at risks for superinfections. The purpose of the project is to implement the antibiotic stewardship program in a long-term care unit and promote a steadfast resolution to optimize use of antibiotics and adhere to specimen collection of culture prior to antibiotic prescribing. For the antibiotic stewardship project, the PICOT states: For nursing staff in a long-term care unit, does the implementation of an evidence-based antibiotic stewardship program, versus current practice of improper adherence of collection of cultures prior to antibiotic prescribing, improve the adherence of specimen collection for culture prior to antibiotic prescribing, in an 8-10-week timeframe? Two-way percentage table was used to cross-tabulate the adherence of specimen collection for culture prior to antibiotic prescribing before and after implementation. Kai-square test of independence was used to determine if there was a relationship between adherence of specimen collection for culture prior to antibiotic prescribing. The percentage of YES to collection of specimen of culture for pre-intervention is 30.3%. The percentage of YES to collection of specimen of culture for post-intervention is 67.6%. The adherence to specimen collection of culture has shown significant improvement from pre-intervention to post intervention.



Biography:

In her years of professional nursing experience, Dr. Wilson developed the skills to deliver impeccable health care services towards patients; thus, making the same exemplary effort to deliver exquisite services to nursing students, nurses, and patients. Dr. Wilson likes to express her level of resilience, keen attention to detail, flexibility, and adaptability. Dr. Wilson's knowledge in research and education fosters a learning environment for nurses. She is also competent in her current role as an educator. She is prepared to critically analyze policy/laws/ethics to develop, evaluate, and advocate for, regulation, and delivery of nursing and health care services

Speaker Publications:

1. "Antibiotic stewardship: A process improvement in long-term care J. gyn. / 2018 / 30(8) /pp 1731-1735
2. "Antibiotic stewardship: A process improvement in long-term care/ Vol 151 (2018) 199-211
3. "Antibiotic stewardship: A process improvement in long-term care"; Journal of medicine/ Vol 271, 2020, 110961.



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