

# Impact of the implementation of the Antimicrobial Stewardship Program (AMS) in a Victorian Regional Hospital

Clement Oguiche, B. Pharm M.Clin.Pharm<sup>1</sup>, Kim Comensoli, CICP-E<sup>1</sup>, Helen Haines, PhD, MPH<sup>2</sup>  
1.Northeast Health Wangaratta 2. University of Melbourne, Dept Rural Health



## Background

Antimicrobial resistance is an international problem

- Adverse effects
- Lengthy hospital stays
- Increased health expenditure

AMS promotes judicious use of antimicrobial agents

## Aim

To determine if implementation of AMS has led to improved prescribing practice in a sub –regional rural hospital

## Setting

A 200-bed sub- regional hospital  
AMS introduced in 2013  
AMS team comprising nurse and two pharmacists  
Visiting Medical Officer model of care  
No on-site Infectious Disease (ID)

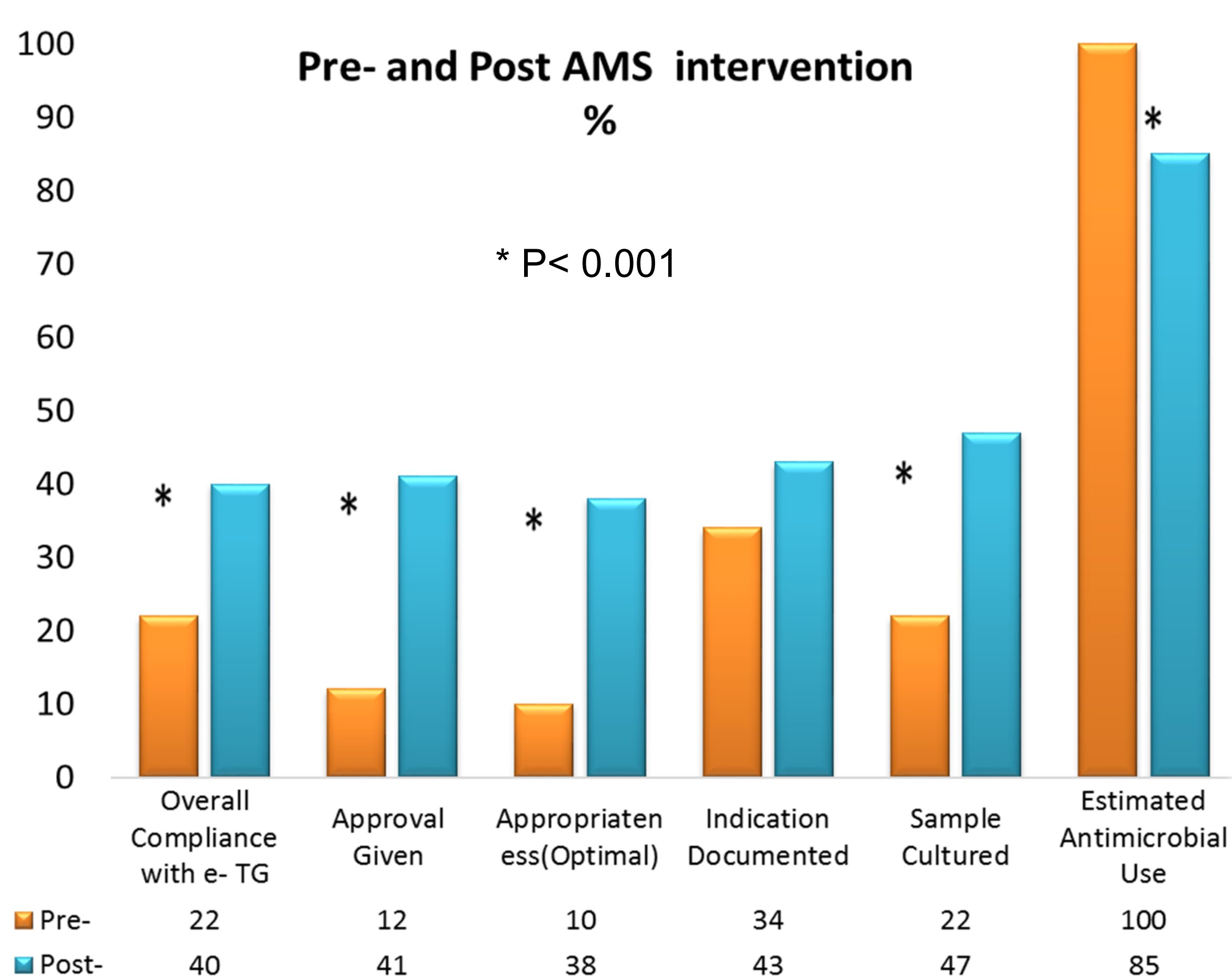
## Method

Retrospective observation study of 92 prescribing episodes pre- and post-AMS intervention (2012 & 2015)

Outcomes:

- 1.Appropriateness of selected agent
- 2.Compliance with local & national guidelines
- 3.Approval Status
- 4.Sample cultured
- 5.Documented indication
- 6.Estimated quantity antimicrobial use

## Results



## Conclusion

AMS was successfully implemented in a sub-regional hospital without access to ID specialist medical staff

AMS Program significantly improved prescribing practice across 5 out of 6 outcome measures

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