

Pediatric Urgent Care Providers' Approach To Antibiotic Stewardship: A National Survey



Melody Fung, MPH
George Washington Milken Institute School of Public Health

Rana Hamdy, MD, MPH, MSCE
Children's National Hospital

Cindy Liu, MD, PhD
George Washington Milken Institute School of Public Health

Amanda Montalbano, MD, MPH
Children's Mercy Hospital

Amanda Nedved, MD
Children's Mercy Hospital

Jill Obremsky, MD
Society for Pediatric Urgent Care



Background

- A high proportion of urgent care visits are for acute infectious conditions.
- Outpatient antibiotic prescribing for acute respiratory conditions is higher in urgent care compared to other settings.
- Studies have shown management of acute respiratory tract infections by pediatricians more likely to be guideline-concordant compared to other physician specialties.
- Antibiotic prescribing in pediatric urgent cares has not been studied.

Objective

- To survey pediatric urgent care providers about their approach to antibiotic stewardship.

Methods

- Members of the Society for Pediatric Urgent Care were recruited via e-mail to participate in a quality improvement antibiotic stewardship project.
- A pre-implementation survey adapted from the CDC Toolkit on Antibiotic Stewardship by study investigators, piloted with pediatric urgent care physicians, and revised based on feedback.
- The finalized REDCap survey was sent to participants via e-mail in March 2019.
- Descriptive statistics were used to analyze the survey responses.

Characteristics of Respondents

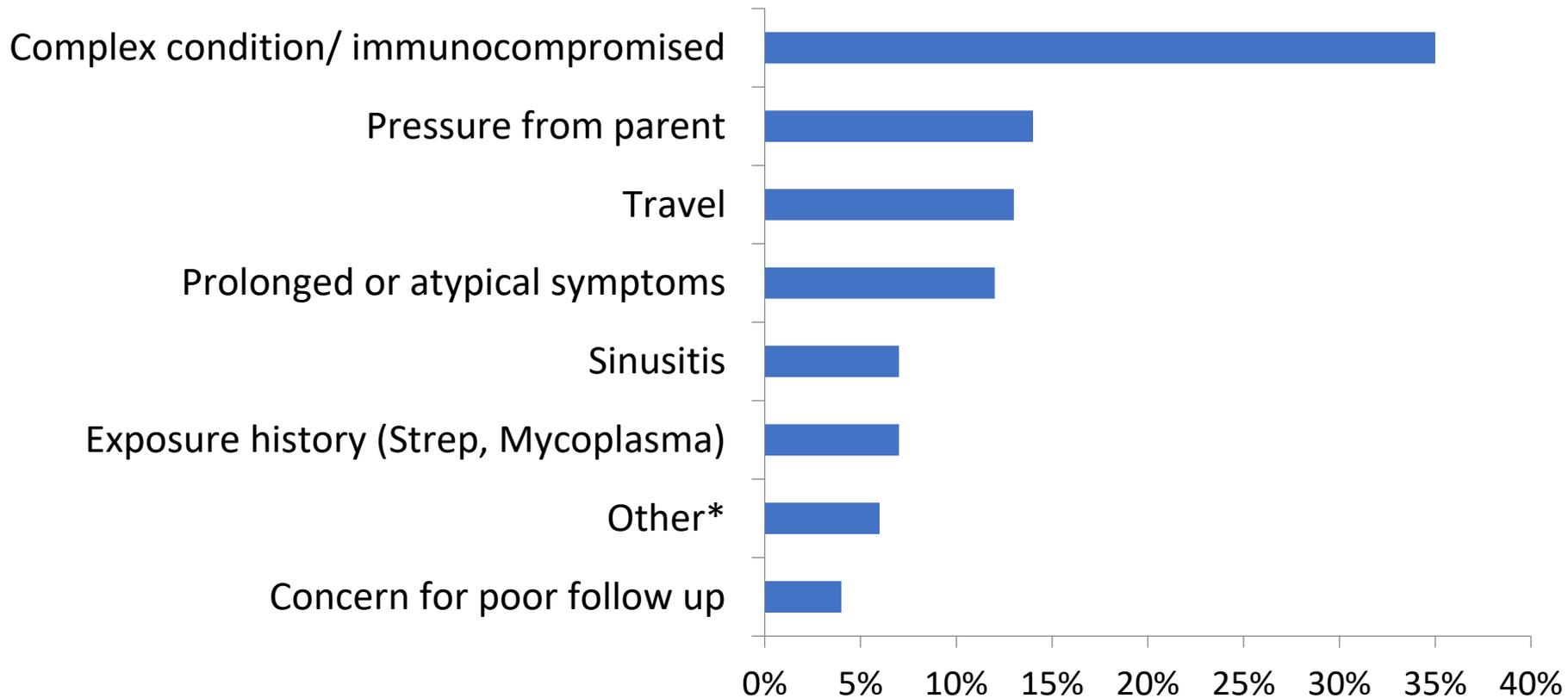
N=156

Clinical role, n (%)	
Board certified pediatrician	115 (73%)
Board certified pediatric EM physician	15 (10%)
Pediatric nurse practitioner	9 (6%)
Family medicine nurse practitioner	12 (8%)
Physician assistant	2 (1%)
Female gender, n (%)	118 (75%)
Years in position, mean (sd)	9.8 y (8.6)

Self-reported antibiotic prescribing practices

N=156

- 83 (53%) report their urgent care center provides guidelines for prescribing antibiotics for acute respiratory tract infections.
- Reasons reported for deviating from guidelines:



*Other included: uncertain diagnosis, medical parents, severe symptoms, clinical history consistent with Streptococcal pharyngitis

Attitudes/perceptions about antibiotic stewardship

- 98% agreed or strongly agreed that antibiotic stewardship programs are important to optimize antibiotic use in urgent care.
- 2% reported that an ASP would interfere with their usual approach to decision-making in treatment of infections.

Suggested strategies reported for decreasing inappropriate antibiotic use

N=156

Provider continuing education	131, 83%
Published local guidelines	126, 80%
Individual feedback for physicians	101, 65%
Clinical decision support via EHR	86, 54%
Patient education	14, 9%

Perceived barriers to appropriate antibiotic prescribing

N=156

Patient expectations	145 (93%)
Psychosocial barriers	63 (40%)
Lack of clear evidence-based recommendations	24 (15%)
Lack of access to guidelines on appropriate antibiotic prescribing	23 (15%)
Electronic Health Record	6 (3.8%)
Other*	14 (8.9%)

*Other included: Time constraints; Diagnostic uncertainty; Incentives based on patient satisfaction scores

Conclusions

- Most pediatric urgent care providers feel that antibiotic stewardship is important and would not impede their clinical approach.
- Parental expectations of receiving antibiotics were viewed as the most common barrier to appropriate prescribing.
- This work will be used to promote directed interventions to improve appropriateness of antibiotic prescribing for target diagnoses.