



March 10, 2021

**Re: Executive Support for Antimicrobial Stewardship at Seattle Children's Hospital**

The Antimicrobial Stewardship Program (ASP) at Seattle Children's Hospital (SCH) began formal daily operations in January 2013. The hospital provides FTE support for an ASP pharmacist position Monday through Friday, staffed according to a team model by one of the program's two Antimicrobial Stewardship-certified **pharmacists**, one of whom serves as **lead pharmacist**, supported by two infectious disease **physicians** (the Medical Director and the recently-hired Associate Medical Director), as well as a **data analyst**, who is shared with Infection Prevention. Each weekday, the ASP pharmacist reviews courses of therapy for specified antibiotic agents according to the "prospective audit with feedback" model, and together, the pharmacist and one physician approach primary teams with recommendations, typically in-person ("handshake stewardship") but since the CoVID pandemic, by email, phone or "secure chat" within the electronic medical record. Additionally, non-formulary antibiotic agents are reviewed for approval daily by the ASP pharmacist prior to dispensing ("pre-authorization").

You have established key partnerships with multiple clinical subspecialties (including the Division of Infectious Disease) as well as with Infection Prevention, Quality Improvement, and Clinical Microbiology (who produces the annual institutional antibiogram), as well the Nephrotoxic Agent Subcommittee. These partnerships have served to support the creation, and enhance the implementation, of **core interventions** (defined by the Centers for Disease Control) and **enhanced interventions** to improve antibiotic prescribing at SCH. With the help of your data analyst, you are tracking and monitoring antibiotic use at the ward, clinical service, and facility-wide level, according to current best practices in the field (i.e., using the Days of Therapy/1000 patient days metric). You report data on number and types of ASP interventions (**process measures**), as well as antibiotic use (**outcome measures**), to the Pharmacy and Therapeutics Committee on an annual basis. You provide education to clinicians and other relevant staff on improving antibiotic use through an annual Grand Rounds lecture.

You have identified several key improvements that you would like to see the ASP implement, stabilize and disseminate at SCH.

- You established an Individualized Antibiotic Plan program for all patients undergoing hematopoietic cell transplant. You will now stabilize its operation within our new electronic medical record.
- You have launched a program to ensure optimal use of antibiotics by reviewing planned outpatient parenteral antibiotic therapy. You have begun to stabilize its operation within



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the Infectious Disease consult setting and will be engaging with General Surgery around the upcoming revision of the Appendicitis CSW pathway to reduce unnecessary PICC utilization in complicated appendicitis patients.

- You are participating in a multicenter study of stewardship interventions to reduce inappropriate perioperative antibiotic prophylaxis in surgical patients.
- You have partnered with Nursing stakeholders, creating a key opportunity for improvement in the area of beta-lactam allergy documentation.
- You have identified the ongoing profession-wide use of a problematic term describing infusion reactions to the antibiotic vancomycin and have begun an institution-wide campaign to support alternative terminology, which serves to make the hospital a safer, more inclusive, more welcoming place for our patient, families and staff.

Seattle Children's Hospital leadership is fully committed to dedicating the necessary human, financial and information technology resources to its Antimicrobial Stewardship Program, while also providing the necessary support to its many other important hospital-wide mandates and priorities. I appreciate the leadership shown by your Antimicrobial Stewardship team and the accountability that you have demonstrated as individuals and as a group for program outcomes at our hospital. As you know, I am always happy to discuss opportunities and address challenges with you.

Thank you for the hard work you do on behalf of our patients and their caregivers.

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