

Policy/Procedure: DUHS Pharmacy: Adult and Pediatric Pharmacy Policy for Antimicrobial Duration of Therapy

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Approved By	Date Approved
DUHS Pharmacy & Medication Management Committee	01/06/2025

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Review History: January 2025		
Applicability:		
☐ Ambulatory Surgery Center Arringdon	☐ Duke University Hospital (DUH) (both campuses)	
☐ Davis Ambulatory Surgery Center (DASC)	☐ Durham Campus Only	
☐ Duke Health Integrated Practice (DHIP)	☐ Duke Raleigh Campus	
☐ Duke Health Technology Services (DHTS)	☐ Patient Revenue Management	•
☐ Duke HomeCare & Hospice (DHCH)	☐ Population Health Management Office (PHMO)	
☐ Duke Primary Care (DPC)	= 1 openation from the transgement	it office (Final)
☐ Duke Regional Hospital (DRH)		
Bone regional frospital (Biti)		
Purpose: To outline the process for pharmacists to as stop dates to optimize patient care for adult and pediate allows pharmacists to add and/or update stop dates in a the electronic medical record notes. Providers may estanot restricted to the procedures outlined in this policy.	ric patients in the inpatient setting. Speantimicrobial orders when clearly definablish duration of therapy as clinically	ecifically, this policy ned by prescribers in
Level:		
☑ Interdependent - asterisked [*] items re to prescribe medical therapy.	quire an order from a health care pr	ractitioner licensed
☐ Independent – no provider order require	ed.	
Personnel: DUHS Medical Staff and Inpatient Pharm	nacists	
Competencies/Skills: N/A		
Required Resources: N/A		

Policy Statement: Inappropriate durations of therapy can result in adverse outcomes for patients, including the development of antimicrobial resistance and secondary infections such as *C. difficile* and fungi. Appropriate use of antimicrobial therapy minimizes resistant infections, drug-related adverse events, and cost. This policy would allow pharmacists to add and/or update stop dates in antimicrobial orders when clearly defined by prescribers in the electronic medical record.

Procedure:

Definitions: N/A

a) Inclusion criteria (all criteria must be met for end dates to be entered into antimicrobial orders)



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- i) Patients hospitalized at DUH (Durham or Raleigh campus) or DRH
- ii) A specific stop date or definitive duration of any antimicrobial therapy is clearly documented by a primary team prescribing practitioner in the patient's medical record
 - (1) Acceptable documentation of a stop date in the medical record includes either of the following:
 - (a) Listed calendar end date
 - (b) Predefined length of therapy with a clearly designated first day of therapy
- iii) The duration of antimicrobial therapy documented in the patient's medical record is in line with national guidelines and/or the DUHS Targeted Duration of Antimicrobial Therapy Policy for Adults or Pediatrics
- b) *Order Entry
 - i) The pharmacist may edit the antimicrobial order to enter the specific stop date if the above inclusion criteria are met and notify the first call provider via the following:
 - (1) DUH Durham Campus The pharmacist will send a courtesy page or secure chat to the first call provider to notify them of this action.
 - (2) DUH Raleigh Campus The pharmacist will write a progress note documenting the antimicrobial stop date revision. In addition, the pharmacist will send a courtesy page or secure chat to the first call provider to notify them of the antimicrobial order revision.
 - (1) Duke Regional Hospital (DRH) The pharmacist will send a courtesy page or secure chat to the first call provider to notify them of this action. In addition, the pharmacist may amend orders and pend for provider signature.
 - ii) If there is uncertainty regarding the stop date, including a discrepancy between a primary team and a consultant team's recommended duration of therapy, the pharmacist must contact the first call provider prior to adding a stop date to the antimicrobial order
 - (1) For example, a start date for the agreed upon duration may need clarification with the clinical team prior to setting the planned stop date.

Notes about Start/Stop Days of Therapy

- 1. Day 1 should be considered the first day of therapy of an antibiotic to which the pathogen was susceptible (if results available) and ≥ 50% of the total daily dose was received. For patients requiring source control interventions, day 1 is the day of source control or first day of effective therapy, whichever came last.
- 2. When establishing "stop dates" clinicians should take into account completed 24-hour intervals of antibiotics to avoid abbreviated courses (eg. calculate the total doses of therapy needed to complete the course of therapy)

REFERENCES

References:

- 1. CustomID Adult Antimicrobial Duration Guidance. June 2024.
- 2. CustomID Pediatric Antimicrobial Duration Guidance. July 2023.

Authoritative Source: DUHS AS-FET and DUHS PMMC

Associated Policies:

DUHS Antimicrobial Stewardship Policy