



ALASKA NATIVE
TRIBAL HEALTH
CONSORTIUM

Alaska ID ECHO: Ambulatory Antibiotic Stewardship

March 12, 2024

This project is funded by the Minority HIV/AIDS Fund through the Indian Health Service.

AK ID ECHO (Extension for Community Healthcare Outcomes)

- Recorded ECHO didactics and presentation slides are made available on our AK ID ECHO page.
- Patient case presentations are not posted online.
- Presentation slides will be sent via email with the evaluation link to claim CEs.
- Questions? Email akidecho@anthc.org or call 907-729-4596

anthc.org/ak-id-echo

Welcome to Alaska ID ECHO: HCV, HIV, PrEP, STIs

Approved Provider Statements:



JOINTLY ACCREDITED PROVIDER™
INTERPROFESSIONAL CONTINUING EDUCATION

In support of improving patient care, Alaska Native Medical Center (ANMC) is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

CPE Credit will be posted to the online CPE Monitor system within 60 days following completion of each activity when applicable.

The ANMC Joint Accreditation CE Program Portfolio additionally supports Behavioral Health (APA), Social Work (ASWB-ACE), and Dietitians (CPEU).

Contact Hours:

ANMC designates this activity for a maximum of 12 contact hours, including 3 total pharmacotherapeutics contact hours, commensurate with participation.

Financial Disclosures:

Youssef Barbour, MD and Lisa Townshend-Bulson, APRN / faculty for this educational event, are primary investigators in an ANTHC sponsored hepatitis C study funded in part by Gilead Sciences. All of the relevant financial relationships listed have been mitigated.

Requirements for Successful Completion:

To receive CE credit please make sure you have actively engaged in the entire activity, your attendance is recorded by the facilitator, and complete the course evaluation form found here: <https://forms.gle/18t4EgyN2WdnM4P77>



For more information contact
jfielder@anthc.org or (907) 229-1185



ALASKA NATIVE
MEDICAL CENTER



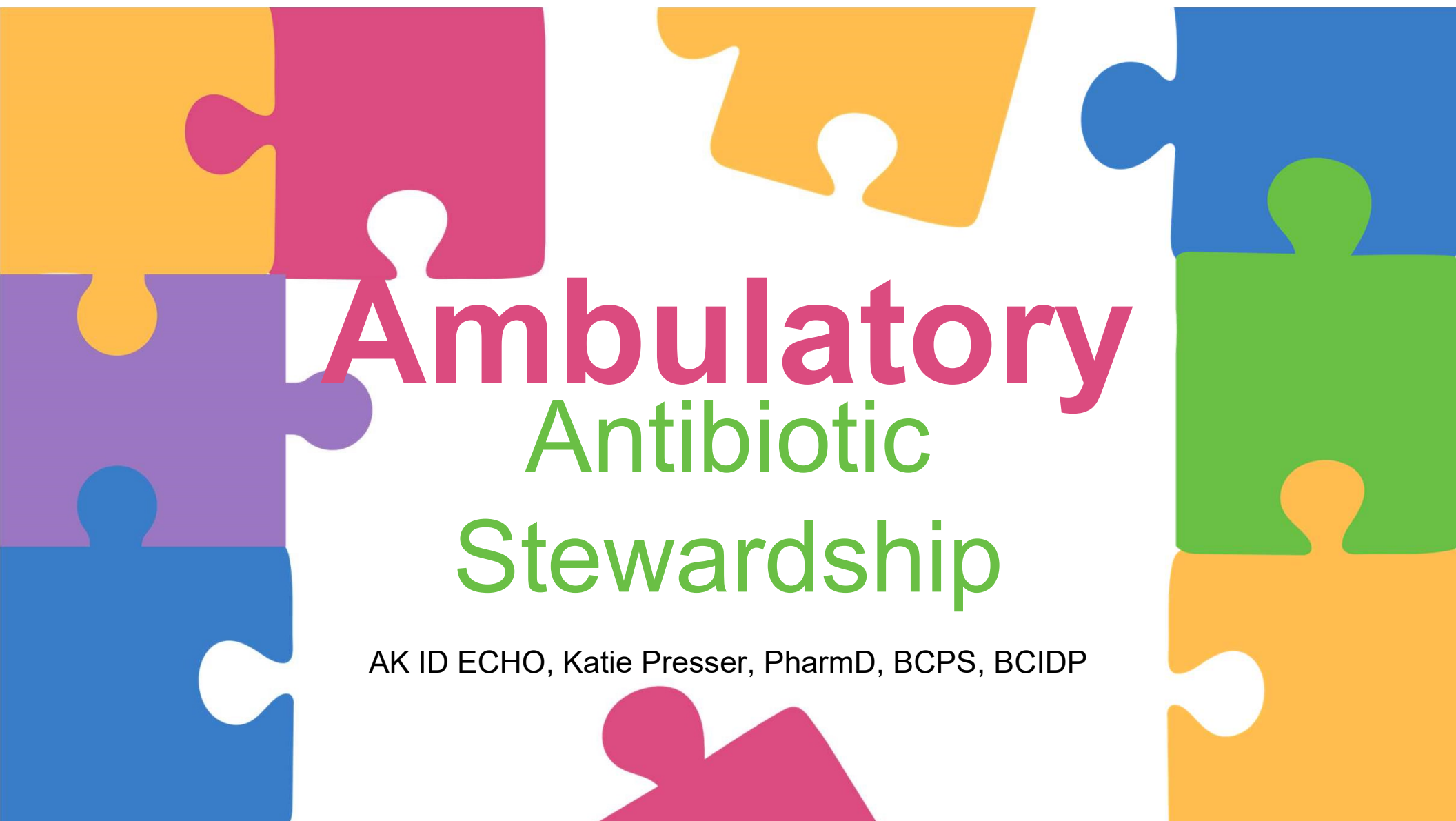
Participants

Consultant team

- Please share where you're joining from in the chat.

- Youssef Barbour, MD Hepatologist
- Leah Besh, PA-C HIV/Hepatology Provider
- Rod Gordon, R.Ph. AAHIVP Pharmacist
- Jacob Gray, MD Infectious Disease Provider
- Annette Hewitt, ANP Hepatology Provider
- Brian McMahon, MD Hepatologist
- Lisa Rea, RN HIV/STI Case Manager
- Lisa Townshend, ANP Hepatology Provider





Ambulatory Antibiotic Stewardship

AK ID ECHO, Katie Presser, PharmD, BCPS, BCIDP



Objectives

1

Illustrate the role of antimicrobial stewardship in the ambulatory setting

2

Integrate antimicrobial stewardship in your practice setting.

3

Identify barriers to establishing and/or maintaining antimicrobial stewardship in your practice setting.



OVERVIEW



Stewardship Aims to:

Measure antibiotic prescribing

Improve antibiotic prescribing by clinicians and use by patients so that antibiotics are only prescribed when needed

Minimize misdiagnoses or delayed diagnoses leading to underuse of antibiotics

Ensure that the right drug, dose, and duration are selected when an antibiotic is needed



CDC Core Elements of Outpatient Antibiotic Stewardship

COMMITMENT

1. **Can your facility demonstrate dedication to and accountability for optimizing antibiotic prescribing and patient safety related to antibiotics?** Yes No

If yes, indicate which of the following are in place. (Select all that apply.)

- Identify a single leader to direct antibiotic stewardship activities within a facility.
- Include antibiotic stewardship-related duties in position descriptions or job evaluation criteria.
- Communicate with all clinic staff members to set patient expectations.

ACTION

2. **Has your facility implemented at least one policy or practice to improve antibiotic prescribing?** Yes No

If yes, indicate which interventions are in place. (Select all that apply.)

- Provide communications skills training for clinicians.
- Require explicit written justification in the medical record for nonrecommended antibiotic prescribing.
- Provide support for clinical decisions.
- Use call centers, nurse hotlines, or pharmacist consultations as triage systems to prevent unnecessary visits.

CDC Core Elements of Outpatient Antibiotic Stewardship

TRACKING AND REPORTING

3. **Does your facility monitor at least one aspect of antibiotic prescribing?**

Yes No

If yes, indicate which of the following are being tracked. (Select all that apply.)

- Track and report antibiotic prescribing for one or more high-priority conditions.
- Track and report the percentage of all visits leading to antibiotic prescriptions.
- (If already tracking and reporting one of the above) Track and report, at the level of a health care system, complications of antibiotic use and antibiotic resistance trends among common outpatient bacterial pathogens.
- Assess and share performance on quality measures and established reduction goals addressing appropriate antibiotic prescribing from health care plans and payers.

EDUCATION AND EXPERTISE

4. **Does your facility provide resources to clinicians and patients on evidence-based antibiotic prescribing?**

Yes No

If yes, indicate how your facility provides antibiotic stewardship education. (Select all that apply.)

- Provide face-to-face educational training (academic detailing).
- Provide continuing education activities for clinicians.
- Ensure timely access to persons with expertise.

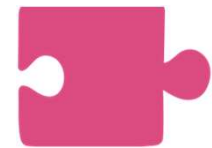
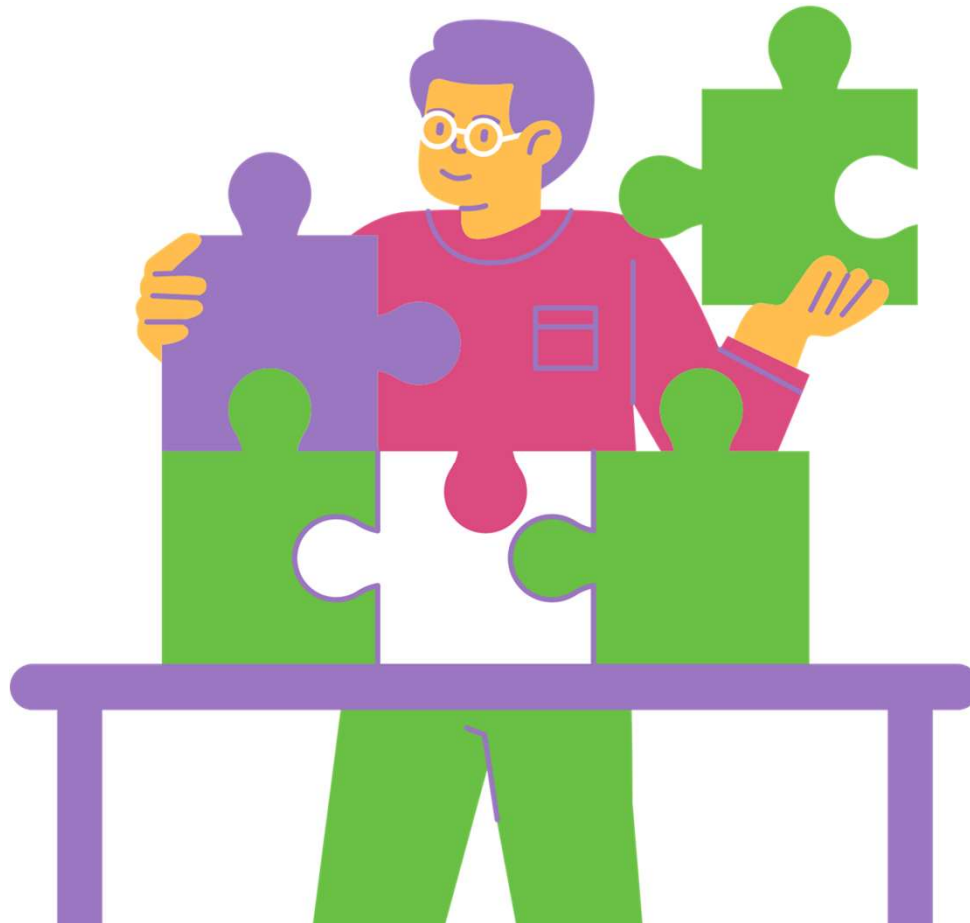
Day to Day Strategies



Local guidelines for common disease states



% of visits resulting in an antibiotic prescription



Add disease states to prescription to aide in verifying drug, dose, duration



Clear expectations for patients on when antibiotics will not be prescribed

ANMC Non-occupational Post-exposure Prophylaxis (nPEP) – Adults and Adolescents

Recommended Populations	Testing before and following nPEP			
<ul style="list-style-type: none"> • Within 72 hours of an isolated incident of high risk HIV exposure, treatment should be initiated as soon as possible • Potential exposures to consider and recommend nPEP: <ul style="list-style-type: none"> ○ Sexual assault ○ Unprotected sex with new partner of unknown HIV status ○ Use or injury with needle or syringe used previously by another person • Not generally recommended for: <ul style="list-style-type: none"> ○ History of sustained active injection drug use (discuss PrEP) ○ Frequent recent high risk sexual exposures (discuss PrEP) 		Baseline	4-6 weeks	4 months
	HIV Ag/Ab	X	X	X
	Hep B surface Ag	X		
	Hep B surface Ab			
	Hep B core Ab			
	Hep C Ab ^a	X		
	Syphilis ^b	X	X	
	Gonorrhea ^b	X		
	Chlamydia ^b	X		
	Pregnancy ^b	X	X	
	Renal Function (Serum Creatinine)	X		
Liver Function (AST/ALT)	X			
a – If blood exposure repeat Hepatitis C Ab at 6 months b – If sexual exposure				

Treatment Recommendations

Preferred Regimen		Education
Adults and adolescents ≥13 yo with normal renal function including pregnant females	<ul style="list-style-type: none"> • Tenofovir disoproxil fumarate/Emtricitabine 300mg/200mg PO daily x 28 days PLUS • Dolutegravir 50 mg PO daily x 28 days 	<ul style="list-style-type: none"> • Treatment should not be delayed if waiting on non-rapid HIV Ag/Ab testing results • Follow up with ID, EIS, or Primary Care within 3-5 days for continuation of prescription and arrangement of appropriate follow up plan • Preventive treatment is discontinued after 28 days
Adults and adolescents ≥13 yo with renal dysfunction (CrCl <60 mL/min)	<ul style="list-style-type: none"> • Zidovudine and Lamivudine dose adjust to renal function x 28 days PLUS • Dolutegravir 50 mg PO daily x 28 days 	

ANMC Associated Powerplans: Orders for Sexual Assault Response, AMB HIV and STI Post-exposure Prophylaxis Antimicrobial Stewardship Program Approved April 2023

References: Updated Guidelines for Antiretroviral Postexposure Prophylaxis After Sexual, Injection Drug Use, or Other Nonoccupational Exposure to HIV—United States, 2016. CDC/HHS. Accessed March 4, 2021.

Clinical Guidelines

- [Anmc.org/clinical-guidelines/](https://anmc.org/clinical-guidelines/)
- Plan to move to a new system, details to be determined on access levels
- Guidelines developed per request or on common topics
 - National Guidelines
 - Prominent new practice changing articles
 - Expert opinion

The screenshot shows the website for the Alaska Native Medical Center's Clinical Guidelines. The header includes the center's logo and name, a search bar, and a navigation menu with links for Customer-Owners, Patients & Visitors, Services, Medical Professionals, Contact Us, Volunteering, Careers, and Safety & Quality at ANMC. Below the navigation is a breadcrumb trail: HOME > CLINICAL GUIDELINES. The main content area is titled "Clinical Guidelines" and features a sidebar with a list of guideline categories: All Guidelines, Emergency and Urgent Care, Antimicrobial Stewardship Program (ASP), Inpatient Hospital, Newborn / NICU, Patient Education, Pediatrics, Primary Care / Preventative, Referral Guidelines, Specialty Outpatient, Support Services, Surgery, Trauma, and Women's Health. A search bar is positioned above the list. To the right of the list, there are three featured guideline entries, each with a document icon, a title, a URL, a date, and a "Download" button. The first entry is "Sexually Transmitted Disease Screening And Treatment" (dated January 24, 2024). The second is "Cervical Cancer Screening and Colposcopy Management" (dated January 24, 2024). The third is "Prenatal Worksheet / Timeline" (dated January 24, 2024). A fourth entry, "Perinatal Palliative Care for Families and their Newborns at ANMC", is partially visible at the bottom.

ALASKA NATIVE MEDICAL CENTER

Search

CUSTOMER-OWNERS, PATIENTS & VISITORS SERVICES MEDICAL PROFESSIONALS CONTACT US VOLUNTEERING CAREERS SAFETY & QUALITY AT ANMC

HOME > CLINICAL GUIDELINES

Clinical Guidelines

CLINICAL GUIDELINES


All Guidelines *New* Educational resources for providers who are new to practicing in the Alaska Tribal Health System can be found [here](#).

Emergency and Urgent Care


Antimicrobial Stewardship Program (ASP)

Inpatient Hospital


Newborn / NICU

Patient Education  [Sexually Transmitted Disease Screening And Treatment](https://anmc.org/files/stdScreening-1.pdf) [Download](#)
https://anmc.org/files/stdScreening-1.pdf
January 24, 2024

Pediatrics


Primary Care / Preventative  [Cervical Cancer Screening and Colposcopy Management](https://anmc.org/files/CervCaScreening.pdf) [Download](#)
https://anmc.org/files/CervCaScreening.pdf
January 24, 2024

Referral Guidelines

Specialty Outpatient  [Prenatal Worksheet / Timeline](https://anmc.org/files/PrenatalWorksheet.pdf) [Download](#)
https://anmc.org/files/PrenatalWorksheet.pdf
January 24, 2024

Support Services

Surgery

Trauma  [Perinatal Palliative Care for Families and their Newborns at ANMC](https://anmc.org/files/Perinatal_Palliative_Care_Newborns.pdf) [Download](#)
https://anmc.org/files/Perinatal_Palliative_Care_Newborns.pdf

Women's Health

Strategies



Can we create a local guideline to solve the issue?

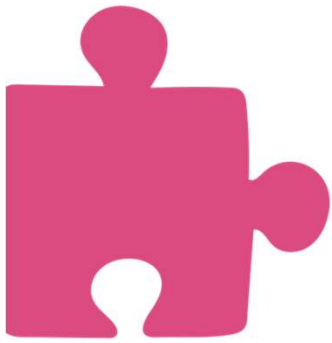
Are providers asking for something specific?

Is there something happening at a national, regional, local level to piggyback off of?

Is there a reoccurring issue with something?

- Order entry errors
- Administration errors
- Availability issues

Areas for Opportunity



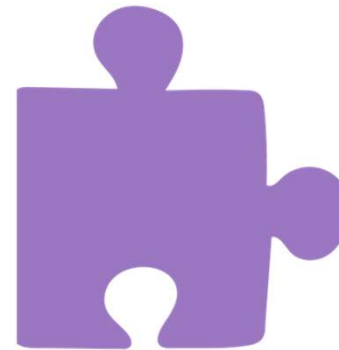
Information

Diagnosis, Drug, Dose,
Duration



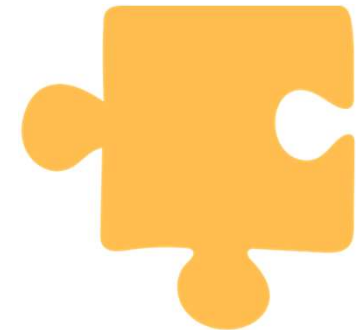
Knowledge

Gaps
Spectrum of coverage,
Antibiograms



Perception

Decreased patient
satisfaction, Quick visits,
Telemedicine



Standardize

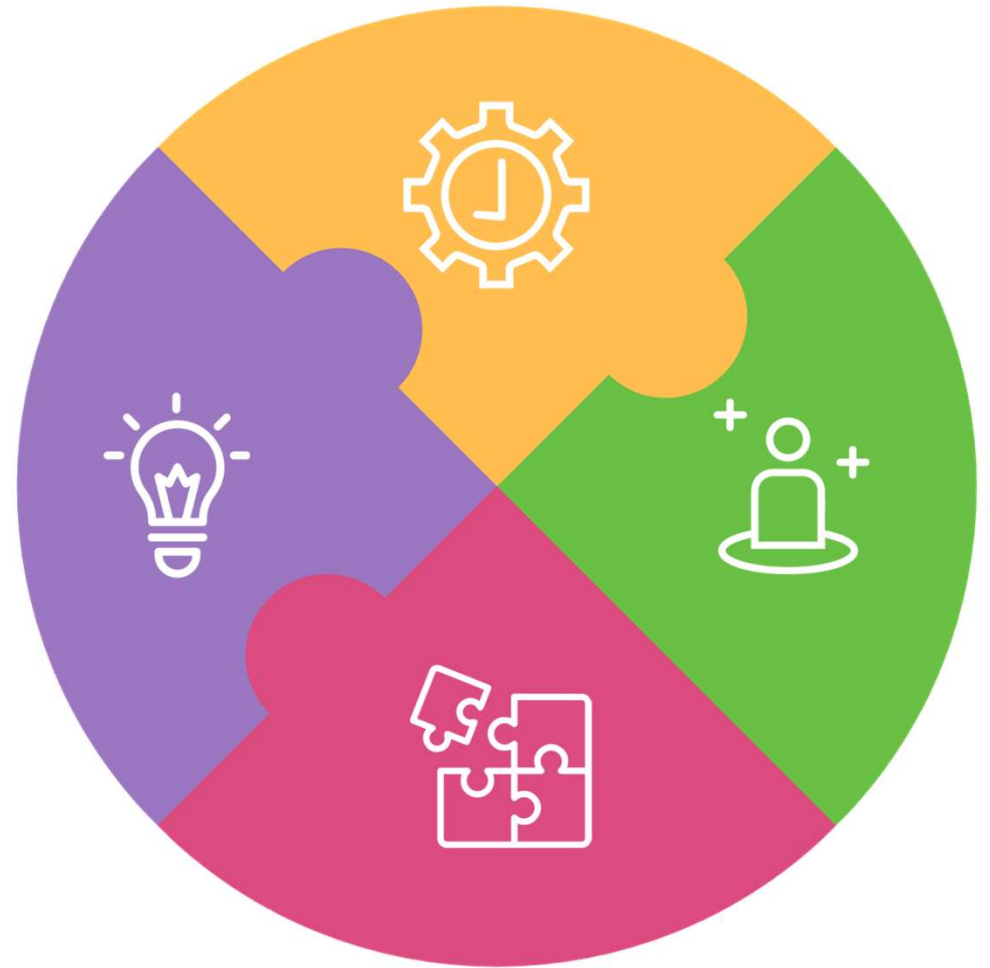
Work to set facility/system
practice guidelines to
establish clear expectations

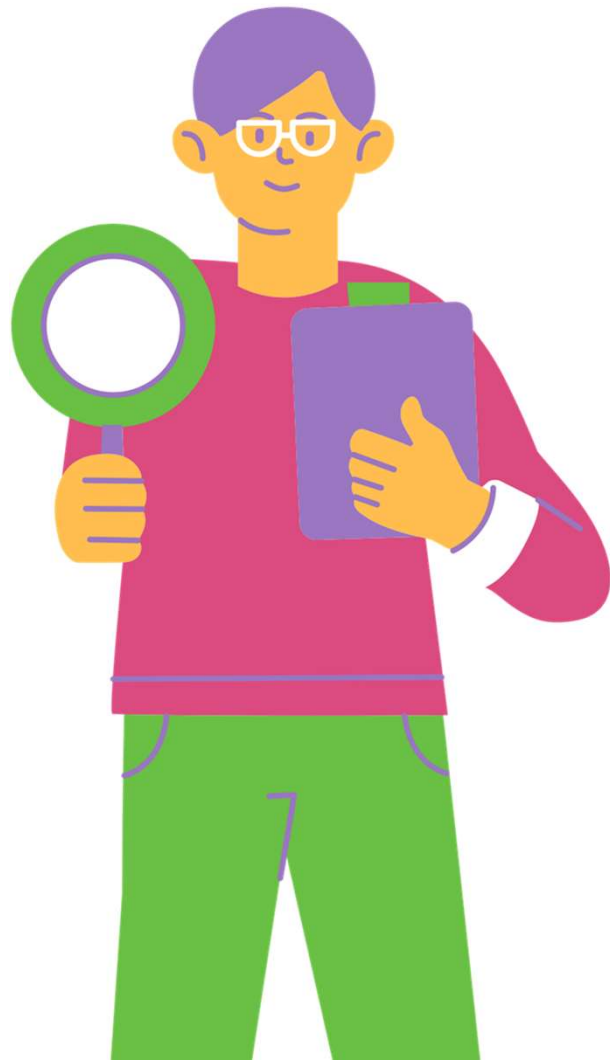
Reach out to state/local health departments

- In AK we have a stewardship collaborative called A2SC (Alaska Antimicrobial Stewardship Collaborative)
- Statewide antibiogram if local unavailable (Department of Epidemiology)
- Resistance trends
 - Gonorrhea not tracked locally (+/- type of testing vs susceptibility often done)
- Testing options beyond locally available
- Health fairs to partner with

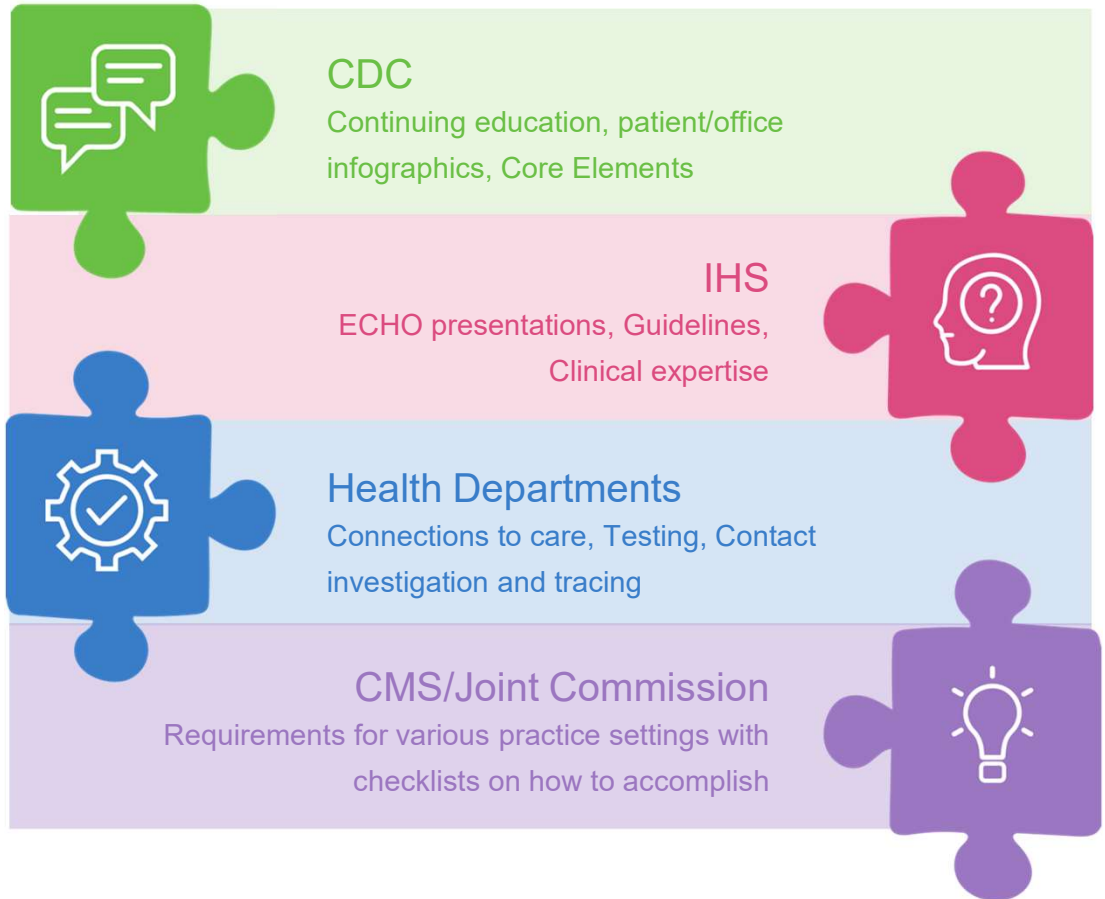
Local Examples

Anyone want to share things they are doing locally?





Resources





CREDITS

Slides Carnival

This presentation template is free for everyone to use thanks to the following:

SlidesCarnival

for the presentation template

Pexels

for the photos





ALASKA NATIVE
TRIBAL HEALTH
CONSORTIUM

Questions?

AK ID ECHO

Alaska Infectious Disease ECHO:
HCV, HIV, PrEP and common STIs

Second Tuesday of every month from noon-1 PM AKST

Upcoming sessions

- April 9: Hepatitis C Update
- May 14: Hepatitis A in Alaska - has it disappeared or will it come back?
- June 11: HIV Update

www.anthc.org/ak-id-echo // akidecho@anthc.org



ALASKA NATIVE
TRIBAL HEALTH
CONSORTIUM

LiverConnect ECHO

Fourth Tuesday of every month from 8-9 a.m. AKST

Upcoming sessions

- March 23: Alcohol Liver Disease including MetALD
- April 23: Hepatorenal Syndrome

www.anthc.org/hep // liverconnect@anthc.org

Indian Country ECHOs

- www.IndianCountryECHO.org
 - Multiple ECHOs hosted by the Northwest Portland Area Indian Health Board



ALASKA NATIVE
TRIBAL HEALTH
CONSORTIUM

AK ID ECHO Contacts

ANTHC Staff

- Leah Besh PA-C, Program Director: labesh@anthc.org
- Lisa Rea RN, Case Manager: ldrea@anthc.org
- Jennifer Williamson, Program Coordinator: jjwilliamson@anthc.org

ANTHC Early Intervention Services/HIV Program: 907-729-2907

ANTHC Liver Disease and Hepatitis Program: 907-729-1560

Northwest Portland Area Indian Health Board // www.indiancountryecho.org

- David Stephens, Director Indian Country ECHO: dstephens@npaihb.org
- Jessica Leston, Clinical Programs Director: jleston@npaihb.org



Evaluation and Continuing Education Credit

Approved Provider Statements:



JOINTLY ACCREDITED PROVIDER™
INTERPROFESSIONAL CONTINUING EDUCATION

In support of improving patient care, Alaska Native Medical Center (ANMC) is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

The ANMC Joint Accreditation CE Program Portfolio additionally supports Behavioral Health (APA), Social Work (ASWB-ACE), and Dietitians (CPEU).

To claim Continuing Education credit:



- The QR code will connect to the electronic evaluation to claim the CE credit certificate for today's AK ID ECHO.
- A PDF certificate of credit will be automatically emailed to the address provided in the electronic evaluation form.
- The evaluation link will be sent out via email to all registered participants.
- <https://forms.gle/18t4EgvN2WdnM4P77>



ALASKA NATIVE
TRIBAL HEALTH
CONSORTIUM

Thank you!

AK ID ECHO is funded by the Minority HIV/AIDS Fund through the Indian Health Service.