

Antimicrobial Stewardship in Pediatric Hematology, Oncology and Bone

Welcome

Welcome to the PHOASIG survey of Antimicrobial Stewardship in Pediatric Hematology, Oncology and Bone Marrow Transplant Patients.

This is a short (**14 question**) survey for clinicians working in antimicrobial stewardship.

We are interested in understanding more about the current state of antimicrobial stewardship activities in the pediatric hematology, oncology and bone marrow transplant population.

The aim of the survey is to develop an understanding of the goals and challenges faced by stewardship clinicians working in this complex field.

We appreciate you taking the time to complete this survey. **After completion, you'll have the opportunity to enter a draw to win a \$50 iTunes gift card.**

Yours sincerely,

Josh Wolf, Jeffrey Gerber, Jason Newland, Christie Van Dyke, Saul Hymes, Diana Yu and Penelope Bryant on behalf of the Pediatric Hematology/Oncology Antimicrobial Stewardship Interest Group (PHOASIG).

Demographics

Please tell us about yourself and your workplace.

1. Which of the following best describes you?

- Pediatric infectious diseases physician
- Pediatric infectious diseases fellow
- General pediatrician
- Infectious diseases pharmacist
- Other clinical pharmacist
- Other (please specify)

2. Which of the following patients are cared for at your institution? (Select all that apply)

- Pediatric solid tumor
- Pediatric hematology (leukemia or lymphoma)
- Pediatric bone marrow transplant
- None of the above

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3. Does your hospital currently have an antimicrobial stewardship program (ASP) that includes pediatric patients?

This would encompass any program aimed at systematically improving antimicrobial use in the pediatric population. However, an infectious diseases consultation service alone would not qualify.

- Yes
- No

Antimicrobial Stewardship Program

Please tell us about your Antimicrobial Stewardship Program (ASP).

4. How long has your ASP been in existence?

- <1 year
- 1 – 3 years
- 3 – 5 years
- >5 years
- Not sure

5. Including all team members, how many funded 'full-time equivalent' positions are dedicated to antimicrobial stewardship at your institution?

- 0
- >0 – <0.25
- 0.25 – <0.5
- 0.5 – <1
- 1 – 2
- >2
- Not sure

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6. Which of the following individuals are represented in your antimicrobial stewardship team?

- Infectious diseases pharmacist
- Other clinical pharmacist
- Non-clinical pharmacist
- Infectious diseases physician
- Other physician
- Clinical microbiologist
- Data analyst
- Infection preventionist

Proportion of your effort for ASP

Proportion of your effort dedicated to antimicrobial stewardship

7. What proportion of your own overall work effort is dedicated to antimicrobial stewardship?

- <10%
- 10 - <25%
- 25 - <50%
- 50% - <75%
- 75%+

ASP activities in PHO

We are interested in the activities of your Antimicrobial Stewardship Program (ASP) in the pediatric hematology, oncology and bone marrow transplant population.

8. Which of these prescriber-directed antimicrobial stewardship activities does your institution currently undertake in the pediatric hematology (leukemia and lymphoma), oncology, or bone marrow transplant population? (Select all that apply)

- Formulary restriction with requirement for preauthorization (e.g. Prescriber must phone an ASP representative/ID Physician before prescribing a restricted drug)
- Prospective audit with immediate feedback to clinicians (e.g. Review of all patients receiving selected antimicrobials after 48 hours)
- Audit with delayed feedback to clinicians (e.g. Monthly reports of unit or physician antimicrobial prescribing)
- None of the above

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9. Which of these other antimicrobial stewardship activities does your institution currently undertake in the pediatric hematology (leukemia and lymphoma), oncology, or bone marrow transplant population? (Select all that apply)

- Dose optimization for antimicrobial agents
- Real-time monitoring of cultures to provide de-escalation/escalation advice
- Clinician education
- Antimicrobial cycling
- Development and use of clinical guidelines
- Monitoring of antimicrobial resistance patterns
- Identifying opportunities to switch to oral therapy
- None of the above
- Others (please specify)

Additional ASP interventions in other populations

10. Are there additional antimicrobial stewardship interventions that are used in other pediatric populations at your institution? (i.e. excluding hematology, oncology or bone marrow transplant)

- No
- Yes (please list any additional interventions in non-oncology patients)

Barriers

We are interested in your perception of barriers to effective antimicrobial stewardship in the pediatric hematology, oncology and bone marrow transplant population.

The following questions ask about barriers to effective antimicrobial stewardship that have been identified by other ASP clinicians.

'Oncology clinicians' refers to all hematology (leukemia and lymphoma), oncology and bone marrow transplant clinicians who influence antimicrobial prescribing.

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11. At your institution, how important are the following barriers to effective antimicrobial stewardship in the pediatric hematology, oncology and bone marrow transplant population? (Set 1)

	Not at all important barrier	Not very important barrier	Somewhat important barrier	Important barrier	Very important barrier
Insufficient data analysis resources	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Insufficient clinician-time assigned to antimicrobial stewardship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ASP does not have enough power or authority	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Not enough communication with oncology clinicians	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ASP does not have enough expertise in managing infections in immunocompromised hosts	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
ASP believes that other populations have higher priority	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What other ASP-related barriers do you perceive as important?

12. At your institution, how important are the following barriers to effective antimicrobial stewardship in the pediatric hematology, oncology and bone marrow transplant population? (Set 2)

	Not at all important	Not very important	Somewhat important	Quite important	Very important
Oncology clinicians are more motivated by fear of rare adverse outcomes than long-term risks of antimicrobial use	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oncology clinicians are confident in their antibiotic knowledge or current antimicrobial strategies	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oncology clinicians don't show confidence in ASP/ID clinicians	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oncology clinicians do not believe that their antimicrobial use leads to antimicrobial resistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oncology clinicians are not motivated by reducing financial costs (e.g. Use of expensive antibiotics)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Oncology clinicians are concerned about loss of autonomy	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

What other oncology clinician-related barriers do you perceive as important?

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13. Is inclusion of antimicrobial guidelines in oncology or bone marrow transplant treatment protocols an important barrier to effective stewardship at your institution? (Select all that apply)

- Yes, oncology clinicians follow externally derived protocols (e.g. COG or other collaborative group protocols)
- Yes, there is insufficient ASP or ID input into locally derived protocols (e.g. Unit-specific clinical practice guidelines)
- No

Goals of ASP in PHO

We are interested in your goals for antimicrobial stewardship in the pediatric hematology, oncology and bone marrow transplant population.

14. In the pediatric hematology, oncology and bone marrow transplant population, what are your current top 3 antimicrobial stewardship goals?

- Reduce time to effective antibiotic therapy in resistant infections (e.g. Earlier initiation of broad spectrum agents when appropriate)
- Reduce time to de-escalation when cultures are negative or susceptible to narrow-spectrum agents
- Avoid initiation of unnecessary antibiotics
- Reduce use of multidrug antimicrobial regimens with redundant antimicrobial coverage
- Improve clinician knowledge about appropriate antimicrobial use
- Develop evidence based guidelines for antimicrobial use
- Control costs of antimicrobial use
- Prevent adverse effects of antimicrobial agents (e.g. Nephrotoxicity or allergy)
- Increase use of oral antibiotic formulations
- Other (please specify)

Identity

Please tell us more about yourself. Respondent names will be used to ensure that each survey response is unique, and hospital names will be used to control for multiple responses from the same institution.

Information from this page will NOT be released to anyone or published. Individuals and hospitals will be assigned a code and will not be identifiable in publications or presentations.

15. Your hospital name

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16. Your name

17. If you prefer not to state your name, please check this box to confirm that you have not previously completed this survey.

I have not previously completed this survey

Thanks

Thank you for participating in this survey. If you have any questions or comments, please send an email to PHOASIG@stjude.org.

18. To enter a draw to win a \$50 iTunes gift card, please enter your email address below: