



Antimicrobial Prescribing during End-of-Life Care

For the purposes of this survey, "end-of-life care" refers to the care of a patient whose goals of care do not include escalation, but comfort measures have not yet been implemented. The following case vignette illustrates "end-of-life care" to add context to the questionnaire:

"An 86 year-old woman on palliative chemotherapy is experiencing recurrent fevers in the intensive care unit. The chance of meaningful recovery has been deemed extraordinarily rare based on assessments from the primary team and consulting services. Based on medical record review, it appears the patient is unlikely to survive for more than one month after hospital discharge. Daily goals of care discussions are ongoing, but the patient, providers and family members have not yet agreed to pursue comfort measures only."

1. SRN ID (in **blue** on invitation email):

2. How many years have you been practicing?

- ☐ In training
- ☐ <5 years
- ☐ 5 to 15 years
- ☐ >15 years

3. Does your hospital have a dedicated palliative care nurse or palliative care physician?

- ☐ Yes (go to question 4)
- ☐ No (go to question 5)
- ☐ Don't know (go to question 5)

4. Has your antimicrobial stewardship program offered any education to the palliative care nurse or palliative care physician mentioned above?

- ☐ Yes
- ☐ No
- ☐ Don't know

Antimicrobial Use

5. Does your antimicrobial stewardship program provide recommendations in the medical record?

- ☐ Yes (go to question 6)
- ☐ No (go to question 7)
- ☐ Don't know (go to question 7)

6. How often do you believe these recommendations are followed?

- ☐ Never
- ☐ Rarely
- ☐ Some of the time
- ☐ Most of the time
- ☐ Always
- ☐ Don't know

7. Does your stewardship program continue to monitor patients at end of life?

- ☐ Yes
- ☐ No
- ☐ Don't know

8. Does your stewardship program provide guidelines for end-of-life care?

- ☐ Yes
- ☐ No
- ☐ Don't know

9. The patient described in the case vignette has now been placed under comfort measures only. Would your stewardship program provide specific guidance regarding antimicrobials at this time?

- ☐ Yes
- ☐ No
- ☐ Don't know

10. Does your institution program provide guidelines (e.g., comfort care order set, nursing end-of-life management guidelines) for end-of-life care?

- ☐ Yes (go to question 11)
- ☐ No (go to question 12)
- ☐ Don't know (go to question 12)

11. Do these practice guidelines address antimicrobial use?

- ☐ Yes
- ☐ No
- ☐ Don't know

12. Do you review patients receiving oral antimicrobial therapy at the end of life?

- ☐ Yes (go to question 13)
- ☐ No (go to question 13)
- ☐ Don't know (go to question 14)

13. Does your stewardship program provide recommendations on patients receiving intravenous antimicrobials more often than those receiving oral antimicrobials?

- ☐ Yes
- ☐ No
- ☐ Don't know

14. Do you find it more difficult to deny the start of restricted antimicrobials at the end of life?

- ☐ Yes
- ☐ No
- ☐ Don't know

15. Is your approval of restricted antimicrobials impacted by the following?

	Yes	No	Don't know
Code status of do not resuscitate and/or do not intubate	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Code status of comfort measures only	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Clinical status of "no escalation of care"	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

16. Do you think a randomized controlled trial of antimicrobials plus symptom management (e.g., antipyretics, oxygen, analgesics) versus symptom management alone (no antimicrobials) once a patient has opted for comfort care would be worthwhile?

- ☐ Yes
- ☐ No
- ☐ Don't know

17. In what capacity should stewardship programs support clinicians with end-of-life care?

