***Sample email for suboptimal or unnecessary carbapenem use***

Dear Dr. XXXX:

Below are the details of your carbapenem usage in days of therapy (DOTs) at Iowa Methodist Medical Center.

During the months of \*\* you used: DOTs.

Usage breakdown:

Adequate:

Suboptimal:

Unnecessary:

Inappropriate:

**How you compare to your peers ():**

Your percentage of adequate carbapenem use: %

\*\* average percentage of adequate carbapenem use: %

***Use of carbapenems is considered adequate in the following cases:***

-Patient presenting with severe sepsis or septic shock (while awaiting culture results)

-Patient with SIRS + known history of colonization or infection with ESBL-producing bacteria (while awaiting culture results)

-Patient with suspected infection and history of severe penicillin or cephalosporin allergy

***Use of carbapenems is considered suboptimal in the following cases:***

-Use of carbapenems to treat an infection due to bacteria susceptible to a narrower agent

-Use of carbapenems for surgical prophylaxis

-Use of carbapenems in a patient with penicillin allergy who has tolerated cephalosporins

***Use of carbapenems is considered unnecessary in the following cases:***

-Use of carbapenems for the treatment of asymptomatic bacteriuria

-Use of carbapenems for the treatment of upper respiratory infections

-Use of carbapenems for the treatment of chronic venous stasis ulcers

-Continuous use of carbapenems after cultures return negative (beyond 72h)

-Use of carbapenems for the treatment of an infection beyond the standard duration of therapy

\*Hospital-acquired pneumonia or ventilator associated pneumonia- 8 days

\*Complicated urinary tract infection- 10 days

\*Bacteremia – 14 days

\*Intra-abdominal infection- 5 days after adequate source control

***Use of carbapenems is considered inappropriate in the following cases:***

-Use of carbapenems in treatment of an infection due to bacteria non-susceptible to carbapenems

Please feel free to contact us if you have further questions.

Thank you!

Rossana Rosa, MD Amanda Bushman, PharmD,BCPS

Infectious Diseases/Antimicrobial Support Team

***Sample email for adequate use:***

Dear Dr. XXXX:

Below are the details of your carbapenem usage in days of therapy (DOTs) at Iowa Methodist Medical Center.

During the months of \*\* you used: DOTs.

**Usage breakdown:**

Adequate: DOTs

Suboptimal: 0

Unnecessary: 0

Inappropriate: 0

**How you compare to your peers (\*\*):**

Your percentage of adequate carbapenem use: %

\*\* average percentage of adequate carbapenem use: %

***Use of carbapenems is considered adequate in the following cases:***

-Patient presenting with severe sepsis or septic shock (while awaiting culture results)

-Patient with SIRS + known history of colonization or infection with ESBL-producing bacteria (while awaiting culture results)

-Patient with suspected infection and history of severe penicillin or cephalosporin allergy.

Please feel free to contact us if you have further questions.

Thank you for being an antibiotic steward!

Rossana Rosa, MD Amanda Bushman, PharmD,BCPS

Infectious Diseases/Antimicrobial Support Team

Supplemental Figure 1.

