

STATEMENT OF LEADERSHIP COMMITMENT FOR ANTIMICROBIAL STEWARDSHIP

The staff members at this dental office are committed to improving antibiotic use in our facility. We are committed to embracing, implementing, and executing the Centers for Disease Control and Prevention's (CDC) Core Elements of Antibiotic Stewardship for Outpatient Settings, in conjunction with the New Jersey Department of Health. The four elements of antimicrobial stewardship include leadership commitment, action, tracking and reporting, and education and expertise.

Our administration has identified an Antimicrobial Stewardship (AS) Leadership Team as referenced, working towards the appropriate use of antimicrobial agents, minimizing adverse effects associated with them, and decreasing the advent of antimicrobial resistance by adhering to the following commitments:

- 1. We are dedicated to supporting efforts that improve antibiotic use in our practice.
- We understand that antimicrobial stewardship is a community activity, involving the collective
 efforts of all our staff members and patients, for the purposes of improving the selection of
 antibiotic therapy (correct drug, dose, duration, and diagnosis) and realizing the need to use
 such agents only when necessary.
- 3. We will communicate with dental hygienists, prescribing dentists, and staff regarding the administration's expectations about antibiotic use, monitoring, and related stewardship policies.
- 4. We will assist our prescribers in developing antibiotic use protocols that ensure appropriateness of therapy when necessary for treatment.
- 5. We will work with our prescribers and hygienists to create a system that monitors and shares reports regarding antibiotic use (consumption) within our practice.
- We ultimately commit to creating a culture which promotes antimicrobial stewardship within our organization, through education, messaging, and promoting responsible use of the referenced agents.

Dental Director/Administrator (Printed Name and Signature) Dental Hygienist/AS Champion (Printed Name and Signature)	Date	
	Date	