

ANTIBIOTICS: COMMUNICATION STRATEGIES FOR HEALTH CARE PROVIDERS AND NURSING STAFF IN LONG-TERM CARE SETTINGS

1. Provide a specific diagnosis

Why is this strategy useful?	How can I use this strategy?	Example:
<ul style="list-style-type: none"> Labeling an illness as “just a virus” may be perceived as minimizing a resident’s illness and suffering. 	<ul style="list-style-type: none"> During discussion of the diagnosis provide the resident/family member with a more specific diagnosis when possible, using a specific name. 	<ul style="list-style-type: none"> Instead of saying “You just have a virus,” try saying, “You have pharyngitis which is a type of viral throat infection.”

2. Discuss a differential diagnosis

Why is this strategy useful?	How can I use this strategy?	Example:
<ul style="list-style-type: none"> If the resident/family member has a specific diagnosis in mind, mentioning this in the differential and why this is not your diagnosis can be helpful and ensures you are being thorough. 	<ul style="list-style-type: none"> Inform residents/family members why the illness does not require an antibiotic and why they do not have the specific illness. 	<ul style="list-style-type: none"> “You do not have a fever and do not seem to have any significant swelling of your nasal cavity. I do not think you have a bacterial infection. You do have some post nasal drip and the lining of your nose looks red, leading me to diagnose a viral sinus infection. But if you start feeling much worse, or are just not improving in five days, I want to hear from you.”

3. Discuss expected course of illness

Why is this strategy useful?	How can I use this strategy?	Example:
<ul style="list-style-type: none">Knowing what to expect can be very helpful to the resident/family member and may help avoid unnecessary follow-up and worry that a diagnosis requiring antibiotics was missed.	<ul style="list-style-type: none">Explain the likely symptoms the resident may experience as his or her illness runs its course.	<ul style="list-style-type: none">“You will likely still have a cough for another week and could also experience a runny nose as your body clears the infection. All of this is completely normal.”

4. Provide a contingency plan

Why is this strategy useful?	How can I use this strategy?	Example:
<ul style="list-style-type: none">Providing a contingency plan allows residents/family members to feel reassured and empowered when they know what to do if symptoms change, become worse or continue beyond an expected time period.This strategy also provides reassurance that you are willing to provide an antibiotic should it become medically necessary.	<ul style="list-style-type: none">Providing a contingency plan can be done at the same time as a discussion about the expected course of illness.Suggest the resident/family member notify the staff in the next few days if there is no improvement or feel their symptoms are worsening.	<ul style="list-style-type: none">“At this time I do not think you would benefit from an antibiotic. I understand you are concerned you may feel worse in the next few days, so why don’t you let the staff know if you are not feeling better within 3 -4 days, or feel much worse and then we can discuss other options.”

5. Provide symptomatic treatment recommendations

Why is this strategy useful?	How can I use this strategy?	Example:
<ul style="list-style-type: none"> Often a resident's/family member's primary opposition to not getting an antibiotic is that they just want to feel better. The resident/family member may not realize there can be effective medications for symptomatic relief. 	<ul style="list-style-type: none"> Using discussion tools, such as a viral prescription pad can be effective for this type of discussion. (See below) 	<ul style="list-style-type: none"> "I don't think an antibiotic will help treat your illness, but I can give you some recommendations to help ease your discomfort." "I don't think antibiotics will help treat your illness, but there is another medication that will help ease your discomfort."

Tools available at the CDC's antibiotic use website: <https://www.cdc.gov/antibiotic-use/community/materials-references/print-materials/hcp/index.html>

6. Discuss potential side effects

Why is this strategy useful?	How can I use this strategy?	Example:
<ul style="list-style-type: none"> A discussion of the potential side effects of antibiotic use and overuse may be helpful. Some residents/family members do not realize that there are reasons not to use antibiotics unless necessary. 	<ul style="list-style-type: none"> This strategy can be used during treatment discussions with the resident/family member. You can explain why taking an antibiotic when it is not indicated can lead to antibiotic resistance or potential complications. This may or may not include a discussion on population-level antibiotic resistance, and may include discussions about complications including <i>C. diff</i>. 	<ul style="list-style-type: none"> "Antibiotics can have side effects, such as diarrhea or <i>C. diff</i> that may be uncomfortable or dangerous". "If you take antibiotics when not needed, the bacteria in your body can build up a resistance to that antibiotic. In the future, when you may <i>really</i> need to take one, it may not work for you because the bacteria that infect you have become resistant."

7. Communicate normal exam findings

Why is this strategy useful?	How can I use this strategy?	Example:
<ul style="list-style-type: none"> This strategy can provide reassurance to residents/family members during the exam. 	<ul style="list-style-type: none"> During an exam, communicate with the resident/family member any normal exam findings that you notice. This strategy is provider and resident/family member dependent. 	<ul style="list-style-type: none"> Tell the patient “Your lungs sound clear” if you notice this during lung auscultation.

8. Understand the role of language

Why is this strategy useful?	How can I use this strategy?	Example:
<ul style="list-style-type: none"> Residents/family members can have different expectations on whether or not the illness requires an antibiotic depending on the name you give their condition. 	<ul style="list-style-type: none"> When discussing diagnosis, choose your words carefully. The term “bronchitis” may not require antibiotics in your mind, but may be perceived as requiring an antibiotic in many residents’/family members’ minds. “A chest cold” is an example of an alternative diagnosis for “bronchitis” that may be useful. 	<ul style="list-style-type: none"> “Based on your symptoms and my examination, I think you have a chest cold that is likely due to a viral infection.”

9. Understand the role of culture

Why is this strategy useful?	How can I use this strategy?	Example:
<ul style="list-style-type: none"> The use and value of medicines, and antibiotics specifically, differs among and within cultures. For example, antibiotics are available without a prescription in Mexico and many Central and South American countries. Residents with ties to these countries are used to unrestricted antibiotic access for a variety of conditions. 	<ul style="list-style-type: none"> Recognizing the influences of culture on a resident's/family member's expectations for antibiotics may assist with treatment discussions. You may have to phrase treatment decisions differently in order to enhance the resident's/family member's understanding. Using the terms "virus" and "bacteria" do not always hold meanings in other cultures as both are considered "germs." 	<ul style="list-style-type: none"> "Antibiotics don't work on colds and most sinus infections and sore throats. Your body can fight a cold on its own and taking an antibiotic now may not be good for you."

Many education tools can be found on the CDC's antibiotic awareness website at <https://www.cdc.gov/antibiotic-use/community/materials-references/print-materials/index.html>

10. Countering resident objections

Why is this strategy useful?	How can I use this strategy?	Example:
<ul style="list-style-type: none"> Residents have many reasons why they believe they need an antibiotic, often expect to receive a prescription and will present a "case" about why they should take antibiotics. 	<ul style="list-style-type: none"> Reiterate points from the exam which led you to diagnose a viral infection. Emphasize the importance of taking antibiotics only for bacterial infections. 	<ul style="list-style-type: none"> "I understand that you may have received antibiotics in the past for this condition, but what I noted during your exam appears to be caused by a virus. Antibiotics are not appropriate for treating a viral infection."

11. Explaining positive urine cultures

Why is this strategy useful?	How can I use this strategy?	Example:
<ul style="list-style-type: none"> Family members may not understand why the resident is not receiving an antibiotic when they have a positive urine culture. 	<ul style="list-style-type: none"> Help the patient or family members to understand that a positive urine culture does not always require antibiotic treatment. 	<ul style="list-style-type: none"> “I understand that you may have received antibiotics in the past for this condition, but several things can cause a positive urine culture. The specimen could have been contaminated, or you may naturally have bacteria living near your urethra. You do not seem to have additional symptoms of a urinary tract infection.”

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