Abbreviated Checklist for Implementation of Antifungal Stewardship Programs

Antifungal stewardship programs (SPs) are necessary implementations in health care facilities, to limit overuse or misuse of antifungals that were proven to be responsible for an increase in antifungal resistance. Antifungal SPs were indeed demonstrated to have an impact on antifungal consumption and antifungal expenditure. Thus, in line with the core elements edited by the Mycoses Study Group Education and Research Consortium and the Centers for Disease Control and Prevention, it is of utmost importance to establish a practical checklist that may be used at each health care facility level to implement antifungal SPs.

This checklist includes the following items: leadership support, actions to support optimal antifungal use, actions to monitor antifungal prescribing, use, and resistance, and educational programs.

Condensed Elements of an Antifungal Stewardship Program	**Recommended Practices**	
Does your facility leadership provide a formal statement that supports efforts to improve antifungal use (antifungal stewardship)?	❑ Yes	❑ No
Does your facility have a designated leader or co-leader(s) to manage antifungal SP activities?	❑ Yes	❑ No
Does your facility team have access to rapid diagnostic testing for any fungal pathogens, including the point of care?	❑ Yes	❑ No
Does your facility have access to the results of both fungal culture and non-culture-based tests? Some examples may include biomarkers and/or polymerase chain reaction (PCR) testing.	❑ Yes	❑ No
Are there preauthorization protocols for specified antifungal agents, requiring approval by a physician or pharmacist prior to dispensing as part of your program?	❑ Yes	❑ No
Are prospective audit and feedback protocols for antifungals in place, as part of your program?	❑ Yes	❑ No
Does your organization have facility-specific treatment recommendations, based on national guidelines, to assist with antifungal selection and optimization for common clinical conditions?	❑ Yes	❑ No
Does your facility team have access to antifungal susceptibility testing for fungal pathogens?	❑ Yes	❑ No
Are there alerts in situations where therapy might be reevaluated or discontinued? Such examples include but are not limited to intravenous-to-oral conversion and/or dose optimization (pharmacokinetics/pharmacodynamics) for certain disease states.	❑ Yes	❑ No
Does your facility have access to antifungal therapeutic drug monitoring?	❑ Yes	❑ No
Does your facility have access to an antibiogram and/or susceptibility reports to assist with antifungal selection for common clinical conditions?	❑ Yes	❑ No
Does your stewardship program monitor tracking aspects of prescribed antifungal therapy regimens?	❑ Yes	❑ No
Does your facility define outcome measures (i.e. antifungal consumption, antifungal resistance, or patient-level outcomes such as treatment efficacy, adverse effects occurrence, or hospital length of stay) to follow antifungal use from year to year?	❑ Yes	❑ No
Does your facility monitor site-specific antifungal use as part of the program? This may include monitoring at the unit level, facility-wide level, and/or individual specialty units such as hematology or pneumology.	❑ Yes	❑ No
Does your facility monitor quantitative aspects of antifungal therapy? This may include standardized antimicrobial administration rate (SAAR) data, drug counts, days of therapy, defined daily doses, expenditures, or similar accounting aspects for antifungal agents.	❑ Yes	❑ No
Is a current antifungal susceptibility profile available for distribution to prescribers at your facility?	❑ Yes	❑ No
Does your stewardship program share facility and/or prescriber-specific reports on antifungal use?	❑ Yes	❑ No
Does your stewardship program include a requirement to provide education to clinicians and other relevant staff members regarding improvement practices for antifungal prescribing?	❑ Yes	❑ No

This checklist is an adaptable framework that should be used in health care facilities on a periodic basis to assess key elements and actions to ensure optimal antifungal prescribing. This practical checklist is based on the core recommendations edited by the Mycoses Study Group Education and Research Consortium. Essential items needed to be implemented as a priority were defined in this checklist by the panel experts. To implement an antifungal stewardship program, facilities will be assisted by this checklist including essential items, whereas facilities which already have an antifungal stewardship program in place will use this checklist to develop new activities.

In conclusion, recommendations for implementing antifungal stewardship activities are as follows:

Define achievable objectives according to your facility and staff knowledge among the essential items of the checklist.
Define outcome measures.
Share reports with prescribers and facility leadership to make them involved in antifungal stewardship programs.
Define an improvement roadmap for the next period and new objectives connected with the roadmap.

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