



Nursing Home

Antimicrobial Stewardship Guide

Educate & Engage Residents, Family

Toolkit To Educate and Engage Residents and Family Members

Tool 1. Talking With Residents

These talking points are presented in Q&A format to encourage an open and respectful dialogue between nurses or prescribing clinicians and residents about antibiotics and the risks involved with taking them. The talking points are designed to: (1) educate residents about antibiotics and the associated risks, and (2) help residents participate in their care by being informed and sharing information that they feel is important with their clinicians and nurses. These talking points can be tailored to reflect your conversations with residents. It is important to emphasize to residents that these principles come from *doctors*.

I. What are antibiotics?

- Antibiotics are medicines that fight infections caused by bacteria. Antibiotics work by targeting and killing harmful bacteria.
- Bacteria are different from viruses. Bacteria are single celled organisms that can live in a variety of environments. Viruses have no cell structure and require a living host to survive.
- Antibiotics work by breaking down the cell walls of the bacteria. Antibiotics do not work on viruses like those that cause colds, coughs, or flu.

II. How do people get bacterial infections?

- Bacteria are everywhere, even on people's skin and in their gut.
- Normally, your immune system helps control the bacteria in your gut and attacks bacteria that get into a wound in your skin. But, sometimes bacteria grow so quickly that your immune system can't keep up and then you may develop an infection that needs to be treated.



III. When are antibiotics used to treat urinary tract infections (UTIs)?

- A urinary tract infection (UTI) is an infection involving any part of the urinary system, including urethra, bladder, and kidney.
- Doctors, physician assistants, and nurse practitioners often use antibiotics to treat UTIs. The most common symptoms of UTIs are a burning feeling when you urinate, a strong urge to urinate often, and pain in your stomach.
- A urine sample is tested to determine if there are bacteria that may be causing a UTI and, most importantly, determine what kind of bacteria it is.
- If you are experiencing symptoms and bacteria are found, you will typically be prescribed an antibiotic.
- Your individual history is also taken into account (for example, your history of UTIs) when determining treatment.
- Antibiotics do not help when there are no UTI symptoms. In fact, taking antibiotics when they are not needed may cause health problems.
- If you do not have any symptoms, but your urine sample shows some bacteria, it may be better to wait one or two days and drink extra water or other beverages. Your doctor will request that nurses:
 - Check on you often to see how much you are drinking
 - Take your temperature
 - Ask if you are experiencing any changes or symptoms

This is called monitoring or “watchful waiting,” and it may be a better choice than taking an antibiotic. Watchful waiting may last for up to a few days.

- Watchful waiting is still caring for and treating you.
- I understand that it may be difficult to wait. However, watchful waiting is a good way to make sure that you avoid the risks of antibiotics when they aren’t needed and won’t help. Watchful waiting also means that if any symptoms of infection develop, antibiotic treatment can still begin.

IV. When are antibiotics used to treat lower respiratory tract infections or LRTI?

- There are many different kinds of respiratory tract infections, such as colds and coughs, the flu, pneumonia, and bronchitis.
- Not all respiratory tract infections need to be treated with an antibiotic.
 - Some of them, like a cold or the flu, will go away on their own or can be helped with over-the-counter medicines.
- Doctors, physician assistants, and nurse practitioners often use antibiotics to treat some lower respiratory tract infections like pneumonia and bronchitis.
- The most common symptoms of a respiratory infection needing an antibiotic are a fever with a bad cough.
 - A cough alone is typically not treated with an antibiotic.
- If you are experiencing these symptoms, a nurse might check your heart rate, temperature, and oxygen levels.
- If you are experiencing a bad cough and a fever, you will typically be prescribed an antibiotic.
- Antibiotics do not help if it is a virus.
 - Taking antibiotics when they are not needed may cause health problems.
- If you are only experiencing a cough, but you do not have a fever or any other symptoms, it is often better to wait. Your doctor will request that nurses check on you often to see how you are feeling, take your temperature, take other assessments, and ask if you are experiencing any other symptoms. They may also give you acetaminophen (Tylenol) and/or a cough suppressant to make you feel better. They may also ask you to drink more fluids and raise your head with pillows. This is called monitoring or “watchful waiting,” and it may be a better choice than taking an antibiotic. Watchful waiting may last for up to a few days.
 - Watchful waiting is still caring for and treating you.
 - I understand that it may be difficult to wait. However, watchful waiting is a good way to make sure that you avoid the risks of antibiotics when they aren’t needed and won’t help. Watchful waiting also means that if any symptoms of infection develop, antibiotic treatment can still begin.

V. What are the risks—or harms—of antibiotics?

- Antibiotics are important for treating you when you definitely have an infection.
- It is crucial that you take your antibiotics as prescribed to ensure that your infection is effectively treated.
- Unneeded antibiotics can do more harm than good.
- Before taking an antibiotic, it is important to understand how antibiotics could harm or hurt you.

- Although we cannot be certain that any of these harms or problems will occur, it is important for you to be aware of them and understand how they may affect you. Knowing this information will also help you recognize any changes in how you feel.
- There are five potential health problems that occur as a result of taking an antibiotic.
 1. The first are allergic reactions, like a rash or swelling. An allergic reaction doesn't often happen, but sometimes it does.
 2. Another problem can be side effects, such as a stomach upset. This happens sometimes, and usually isn't too much of a problem. Most commonly used antibiotics cause very few side effects. But, side effects vary a lot from person to person, and from antibiotic to antibiotic.
 3. If you take other medications, sometimes the antibiotic might interact with certain drugs. Medications such as antacids, Coumadin (warfarin), blood pressure medications, or anti-diabetic medications can interact with antibiotics. Interactions can interfere with the effectiveness of either the antibiotic or the medication. Some interactions can be harmful, for example by causing organ damage.
 4. Once in a while, an antibiotic can lead to an infection called *Clostridium difficile* or *C. diff*.
 - *C. diff* is bacteria that can cause severe and lengthy illness. It can be life-threatening, particularly for older adults. Symptoms of *C. diff* include painful diarrhea, pain or cramping in the stomach, weight loss, fever, and dehydration.
 - You have lots of bacteria in your body; some are good, and some are bad. Good bacteria protect your body from bad bacteria. Antibiotics destroy all bacteria, good or bad. Killing good bacteria can leave you vulnerable for other bad bacteria to infect you. *C. Diff* is a type of bad bacteria that can infect you when your good bacteria can't fight as hard to protect you.
 - As many as half of nursing home residents have *C. diff*, although they may not get sick from it. But, when you take an antibiotic, it can kill off the good bacteria and let *C. diff* grow and cause an infection, making you sick. Someone is much more likely to get a *C. diff* infection after taking antibiotics.
 - Finally, *C. diff* can spread easily in a nursing home, mainly on hands from person to person, but also on cart handles, bedrails, bedside tables, toilets, sinks, thermometers—even telephones and remote controls.
 - In recent years, *C. diff* infections have become more common, severe, and difficult to treat. Once a person has *C. diff*, he or she can get it again more easily.

5. The last problem is called antibiotic resistance.
 - Antibiotics normally work by killing bacteria or germs. Sometimes not all of the bacteria are killed. The bacteria that were not killed learn how to “resist” the antibiotic so it will have no effect on them. This means a person can get sick again, and this time the bacteria will be harder to kill because the antibiotics no longer work. This is called antibiotic resistance. In other words, the more often you use an antibiotic, the greater the chance that the antibiotic won’t kill the bacteria.
 - When resistance develops, your doctor will need to prescribe a different antibiotic to fight your infection. You may have to be tested to see which antibiotic will be most effective for your infection. A sample from your infection will be sent to a lab and tested against a panel of antibiotics to find which treatment is likely to work best for you.
 - In some cases, antibiotics may not clear up an infection completely and follow-up or additional treatment may be necessary

VI. What is our nursing home doing to decrease the chance of these risks?

- Improving the way we use antibiotics for our residents is one way we can protect your health and ensure the safety of your care.
- Our nursing home is taking action in two ways to make sure that you and other residents get the right care at the right time.
 - First, we are having conversations with you and your family—just like we are doing now—to share information and help you understand the risks of antibiotics. This helps to ensure that you know about both the benefits and the potential harms of these drugs and are able to make an informed decision about your treatment.
 - Second, we have a program to—
 - Make sure you get antibiotics only when absolutely necessary—when you have a bacterial infection.
 - Make sure that you get the right antibiotic, at the right time, for the right length of time.
 - Decrease your risk of experiencing any harm, including C. diff infections and antibiotic resistance.

VII. What can you do to get the best care for yourself?

Before Taking an Antibiotic

- Ask your doctor or a nurse about the benefits and risks.
- Tell someone, including myself or another nurse, if you want more information—or have concerns—about antibiotics and their risks.
- Let your doctor and nurses, including myself, know that you want an antibiotic only if it is absolutely necessary.

Note: For a number of reasons, it may be difficult for some residents to ask questions or talk to the doctor and nurses about antibiotics. For these residents, it will be important to close the loop to make sure they understand the information that you have shared with them. This can be done by asking a few simple questions such as—

- How do you feel about taking an antibiotic?
 - What are you most worried about?
- How do you feel about not taking an antibiotic?
 - What are you most worried about?
- What else would you like to know about antibiotics?
- Would you like to talk with someone else (such as a family member or doctor) about taking an antibiotic?
- Would you like to talk about other options?
- Are you confident in my assessment that you have a bacterial infection and that the use of an antibiotic is necessary in this case? What would make you feel more comfortable with this assessment?

When Taking an Antibiotic

- When you take an antibiotic, you may experience several side effects such as a rash, diarrhea, nausea, vomiting, and headaches.
- If you are (or think you may be) experiencing any of these side effects—or just feel different—let a nurse know immediately. This will help us work together to make sure you are getting the care you need.

VIII. Additional questions about antibiotics

Some residents may want additional information about antibiotics to help them be better informed and able to discuss treatment. If you sense that they want more information, but are not sure what questions to ask, you can provide them with any of the following questions to ask a nurse or doctor:

- Why am I being prescribed an antibiotic?
- What is this particular antibiotic supposed to do?
- Is this drug likely to cause any side effects? Is there anything I should watch for?
- Is there anything that we can do to prevent these side effects?
- Does this drug interfere with the effectiveness of other medications that I take?

Also, be sure your doctor knows about any—

- Allergies
- Bad reactions to previous antibiotics (and which ones if possible)
- Previous antibiotic-resistant infections
- Other drugs that you take, such as Coumadin®
- Health problems, such as diabetes or COPD

IX. Where can you get more information?

You can get more information about antibiotics from the

- U.S. Food and Drug Administration at <http://www.fda.gov/Drugs/ResourcesForYou/Consumers/BuyingUsingMedicineSafely/AntibioticsandAntibioticResistance/default.htm>
- Centers for Disease Control and Prevention at <http://www.cdc.gov/getsmart/community/for-patients/index.html>

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