Impact of a City-Wide Collaborative Antimicrobial Management Program Involving All Acute Care Hospitals in Savannah, Georgia

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Methods

Savannah’s six adult infectious disease (ID) physicians see patients at each of the facilities, which share patient populations, and participate in the AMP by rotating on a weekly basis. The program achieved early success reviewing patients on carbapenems and daptomycin and rapidly incorporated patients receiving one of sixteen targeted anti-infectives medications, those on >4 anti-infectives, or with bug-drug mismatches. After comprehensive review by a clinical pharmacist and an ID physician, recommendations are communicated to the responsible prescriber, including other ID physicians.

Background

In January 2012, the major health care facilities in Savannah, Georgia collaborated to create a unique city-wide Antimicrobial Management Program (AMP). Memorial University Medical Center and St. Joseph's/Candler Health System were later joined by Select Specialty Hospital (long term acute care).

Conclusions

A city-wide antimicrobial management program is able to optimize anti-infective usage to improve patient care, generate regional metrics, expand and improve microbiology procedures, promote research, and provide educational opportunities, without negatively impacting local infectious disease practices.

Outcomes

The integration of competing health systems, all ID physicians, and peer review bolstered the program’s credibility and allowed for effective collegial interaction. The growth and influence of the AMP led to shared initiatives across facilities (Fig.1); inter-facility research, including comparisons of lab susceptibility systems (Fig.2); development of city-wide metrics; grant awards; and education, including travel to national meetings for microbiologists to evaluate new technologies and address deficiencies. All activities occurred without a negative impact on consultation volume for the ID physicians (Fig.3).