

A stylized illustration of a hand holding a pill dispenser. The hand is rendered in a dark red, textured style. The dispenser is orange and white, with a stream of black and white capsules falling from it. The background is a solid light red color.

# Using Antibiotics Wisely.

COMMUNICATIONS TOOLKIT

NOVEMBER 2018

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# ABOUT USING ANTIBIOTICS WISELY

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**Using Antibiotics Wisely** is a national campaign to help clinicians and patients engage in conversations about unnecessary antibiotic use. Current priorities for the campaign include addressing overuse in the community, where 92% of antibiotics are prescribed. This year, the campaign is focusing its efforts on antibiotics for acute upper respiratory tract infections in primary care, as well as asymptomatic bacteriuria in long-term care.

Since the launch of Using Antibiotics Wisely in 2017, Choosing Wisely Canada has worked with partners to produce a number of resources including posters, evidence-based tools, and patient materials. In addition to these resources, there are over 20 Choosing Wisely Canada [recommendations](#) that encourage judicious antibiotic use, created by over 15 national specialty societies.

Using Antibiotics Wisely is organized by Choosing Wisely Canada, with the support from the Public Health Agency of Canada, Health Canada as well as The College of Family Physicians of Canada, and aligns with the [Pan-Canadian Framework on Antimicrobial Resistance](#).

## NEW TOOLS AND RESOURCES

Using Antibiotics Wisely is releasing tools and resources for primary care on **November 1, 2018** during [Choosing Wisely Talks](#), a monthly webinar hosted by Choosing Wisely Canada. The webinar, taking place at 12:00 p.m. ET, will feature Dr. Guylène Thériault, Choosing Wisely Canada's Primary Care Co-Lead. The tools presented on the webinar have been developed and selected by the Using Antibiotic Wisely Working Group, consisting of family physicians, nurse practitioners, nurses, pharmacists, program managers and patients from across Canada. They have developed specific prescribing practice changes and curated evidence-based resources to help the Choosing Wisely community better manage respiratory infections in primary care. These tools can be found on [page 6](#), [page 7](#) and [page 8](#).

Using Antibiotics Wisely will also promote tools, resources and media content related to the campaign in conjunction with Antibiotic Awareness Week, taking place **November 12-18 2018**. Antibiotic Awareness Week is a global event, aiming to increase awareness of antibiotic resistance and encourage best practices among the public, patients and clinicians.

# ANTIBIOTIC RECOMMENDATIONS

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The below antibiotic recommendations have been developed by professional societies representing different clinical specialties in Canada. The recommendations are meant to spur conversation about what is appropriate and necessary treatment. Click on the specialty below for the full list of recommendations, rationales and supporting evidence.

SPECIALTY	RECOMMENDATIONS
<b>EMERGENCY MEDICINE</b>	<ul style="list-style-type: none"> <li>• Don't prescribe antibiotics in adults with bronchitis/asthma and children with bronchiolitis.</li> <li>• Don't prescribe antibiotics after incision and drainage of uncomplicated skin abscesses unless extensive cellulitis exists.</li> <li>• Don't use antibiotics in adults and children with uncomplicated sore throats.</li> <li>• Don't use antibiotics in adults and children with uncomplicated acute otitis media.</li> </ul>
<b>FAMILY MEDICINE</b>	<ul style="list-style-type: none"> <li>• Don't use antibiotics for upper respiratory infections that are likely viral in origin, such as influenza-like illness, or self-limiting, such as sinus infections of less than seven days of duration.</li> </ul>
<b>GERIATRICS</b>	<ul style="list-style-type: none"> <li>• Don't use antimicrobials to treat bacteriuria in older adults unless specific urinary tract symptoms are present.</li> </ul>
<b>HOSPITAL DENTISTRY</b>	<ul style="list-style-type: none"> <li>• Don't prescribe antibiotics for irreversible pulpitis (toothache).</li> <li>• Don't routinely prescribe antibiotics for acute dental abscess without signs of systemic involvement.</li> <li>• Don't give prophylactic antibiotics prior to dental procedures to patients with total joint replacement.</li> <li>• Don't give prophylactic antibiotics to patients with non-valvular cardiac or other indwelling devices.</li> </ul>
<b>HOSPITAL MEDICINE</b>	<ul style="list-style-type: none"> <li>• Don't prescribe antibiotics for asymptomatic bacteriuria (ASB) in non-pregnant patients.</li> </ul>
<b>INFECTIOUS DISEASE</b>	<ul style="list-style-type: none"> <li>• Don't routinely prescribe intravenous forms of highly bioavailable antimicrobial agents for patients who can reliably take and absorb oral medications.</li> <li>• Don't prescribe alternate second-line antimicrobials to patients reporting non-severe reactions to penicillin when beta-lactams are the recommended first-line therapy.</li> </ul>

SPECIALTY	RECOMMENDATIONS
<b>NURSE PRACTITIONER</b>	<ul style="list-style-type: none"> <li>Don't prescribe prophylactic antibiotics to prevent travellers' diarrhea.</li> </ul>
<b>NURSING</b>	<ul style="list-style-type: none"> <li>Don't recommend antimicrobials to treat bacteriuria in older adults unless specific urinary tract symptoms are present.</li> </ul>
<b>NURSING: GERONTOLOGY</b>	<ul style="list-style-type: none"> <li>Don't routinely suggest antimicrobial treatment for older persons unless they are consistent with their goals of care.</li> <li>Don't routinely use intravenous antimicrobials for older persons who can take and absorb oral medications.</li> </ul>
<b>NURSING: INFECTION AND PREVENTION CONTROL</b>	<ul style="list-style-type: none"> <li>Don't recommend antibiotics for infections that are likely viral in origin, such as an influenza-like illness.</li> </ul>
<b>OTOLARYNGOLOGY: HEAD &amp; NECK SURGERY</b>	<ul style="list-style-type: none"> <li>Don't use oral antibiotics as a first line treatment for patients with painless ear drainage associated with a tympanic membrane perforation or tympanostomy tube unless there is evidence of developing cellulitis in the external ear canal skin and pinna.</li> </ul>
<b>PEDIATRIC INFECTIOUS DISEASES AND MEDICAL MICROBIOLOGY</b>	<ul style="list-style-type: none"> <li>Don't routinely use antibiotics other than amoxicillin in the treatment of children with presumed community-acquired pneumonia (in the outpatient setting).</li> <li>Don't routinely treat uncomplicated acute hematogenous osteomyelitis with prolonged intravenous therapy.</li> </ul>
<b>PHYSICAL MEDICINE AND REHABILITATION</b>	<ul style="list-style-type: none"> <li>Do not treat asymptomatic urinary tract infections in catheterized patients.</li> </ul>
<b>RESPIRATORY MEDICINE</b>	<ul style="list-style-type: none"> <li>Don't treat adult cough with antibiotics even if it lasts more than 1 week, unless bacterial pneumonia is suspected (mean viral cough duration is 18 days).</li> <li>Don't use antibiotics for acute asthma exacerbations without clear signs of bacterial infection.</li> </ul>
<b>SPINE</b>	<ul style="list-style-type: none"> <li>Don't order peri-operative antibiotics beyond a 24-hour post-operative period for non-complicated instrumented cases in patients who are not at high risk for infection or wound contamination. Administration of a single pre-operative dose for spine cases without instrumentation is adequate.</li> </ul>
<b>UROLOGY</b>	<ul style="list-style-type: none"> <li>Don't use antimicrobials to treat asymptomatic bacteriuria in the elderly.</li> </ul>

# PRACTICE STATEMENTS

## FOR UPPER RESPIRATORY INFECTIONS

### IN PRIMARY CARE SETTINGS

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The below practice statements have been developed by the Using Antibiotics Wisely Working Group consisting of family physicians, nurse practitioners, nurses, pharmacists, program managers and patients across Canada.

The following specific prescribing practice changes were developed after an extensive review of barriers and enablers in existing clinical practice. Evidence-based resources were then curated to help the Choosing Wisely community better manage respiratory infections in primary care. These statements have been reviewed by experts in infectious diseases, respirology, pediatrics and are supported by the College of Family Physicians of Canada. The recommended tools will be available in paper and digital format to support clinical practice.

SYNDROME	KEY PRACTICE STATEMENT AND TOOLS
UNCOMPLICATED OTITIS MEDIA	<ul style="list-style-type: none"> <li>Don't prescribe antibiotics in vaccinated children more than 6 months old and adults in whom you suspect acute otitis media, unless there is either a perforated tympanic membrane with purulent discharge or a bulging tympanic membrane with one of the three following criteria: 1) Fever (<math>\geq 39^{\circ}\text{C}</math>) 2) Moderately or severely ill 3) Significant symptoms lasting &gt; 48 hours</li> </ul> <p><b>TOOLS TO SUPPORT PRACTICE:</b></p> <ul style="list-style-type: none"> <li><a href="#">1) Viral prescription pad</a></li> <li><a href="#">2) Delayed prescription pad</a></li> <li><a href="#">3) General information for kids</a></li> </ul>
UNCOMPLICATED PHARYNGITIS	<ul style="list-style-type: none"> <li>Don't routinely prescribe antibiotics unless the patient's modified Centor score is <math>\geq 2</math> AND throat swab culture (or rapid antigen test if available) confirms presence of Group A Streptococcus.</li> </ul> <p><b>TOOLS TO SUPPORT PRACTICE:</b></p> <ul style="list-style-type: none"> <li><a href="#">1) Viral prescription pad</a></li> <li><a href="#">2) General information for kids</a></li> </ul>
UNCOMPLICATED SINUSITIS	<ul style="list-style-type: none"> <li>Don't prescribe antibiotics unless symptoms have persisted for greater than 7-10 days without improvement.</li> </ul> <p><b>TOOLS TO SUPPORT PRACTICE:</b></p> <ul style="list-style-type: none"> <li><a href="#">1) Viral prescription pad</a></li> <li><a href="#">2) General information for kids</a></li> </ul>

SYNDROME	KEY PRACTICE STATEMENT AND TOOLS
<p><b>UPPER RESPIRATORY INFECTION (COMMON COLD)</b></p>	<ul style="list-style-type: none"> <li>• Don't prescribe antibiotics unless there is clear evidence of secondary bacterial infection (see the recommendations for otitis media, pharyngitis, sinusitis, pneumonia).</li> </ul> <p><b>TOOLS TO SUPPORT PRACTICE:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">1) Viral prescription pad</a></li> <li>• <a href="#">2) General information for kids</a></li> <li>• <a href="#">3) Information about symptoms duration</a></li> </ul>
<p><b>INFLUENZA LIKE ILLNESS</b></p>	<ul style="list-style-type: none"> <li>• Don't prescribe antibiotics unless there is clear evidence of secondary bacterial infection (see the recommendations for otitis media, pharyngitis, sinusitis, pneumonia).</li> </ul> <p><b>TOOLS TO SUPPORT PRACTICE:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">1) Viral prescription pad</a></li> <li>• <a href="#">2) General information for kids</a></li> </ul>
<p><b>PNEUMONIA</b></p>	<ul style="list-style-type: none"> <li>• Don't prescribe antibiotics for pneumonia unless there is objective evidence.</li> </ul> <p><b>TOOL TO SUPPORT PRACTICE:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">1) General information for kids</a></li> </ul>
<p><b>BRONCHITIS/ ASTHMA</b></p>	<ul style="list-style-type: none"> <li>• Don't prescribe antibiotics for bronchitis/asthma/bronchiolitis exacerbations.</li> </ul> <p><b>TOOL TO SUPPORT PRACTICE:</b></p> <ul style="list-style-type: none"> <li>• <a href="#">1) Viral prescription pad</a></li> </ul>
<p><b>ACUTE EXACERBATION OF CHRONIC OBSTRUCTIVE PULMONARY DISEASE</b></p>	<ul style="list-style-type: none"> <li>• Don't routinely prescribe antibiotics for exacerbations of Chronic Obstructive Pulmonary Disease <u>unless there is clear increase in sputum purulence with either increase in sputum volume and/or increased dyspnea</u></li> </ul>

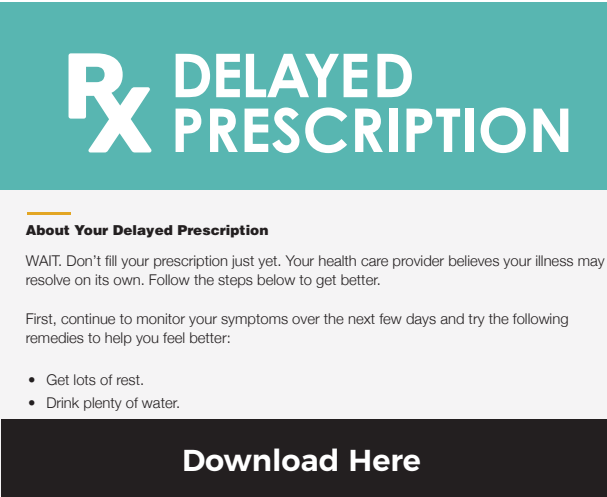
Visit [www.choosingwiselycanada.org/antibiotics](http://www.choosingwiselycanada.org/antibiotics) for the full list and rationale for each practice statement.

# PRIMARY CARE CLINICIAN TOOLS

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The Using Antibiotics Wisely campaign has developed the following evidence-based tools to help reduce unnecessary antibiotic prescribing. Many of the tools below can support the conversation between clinicians and patients about unnecessary antibiotic use.

## DELAYED PRESCRIPTION



**Rx DELAYED PRESCRIPTION**

**About Your Delayed Prescription**

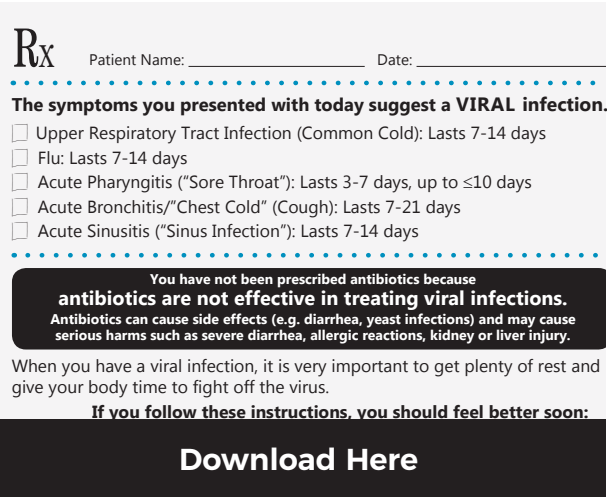
WAIT. Don't fill your prescription just yet. Your health care provider believes your illness may resolve on its own. Follow the steps below to get better.

First, continue to monitor your symptoms over the next few days and try the following remedies to help you feel better:

- Get lots of rest.
- Drink plenty of water.

**Download Here**

## VIRAL PRESCRIPTION PAD (RxFILES)



**Rx** Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

**The symptoms you presented with today suggest a VIRAL infection.**

- Upper Respiratory Tract Infection (Common Cold): Lasts 7-14 days
- Flu: Lasts 7-14 days
- Acute Pharyngitis ("Sore Throat"): Lasts 3-7 days, up to ≤10 days
- Acute Bronchitis/"Chest Cold" (Cough): Lasts 7-21 days
- Acute Sinusitis ("Sinus Infection"): Lasts 7-14 days

**You have not been prescribed antibiotics because antibiotics are not effective in treating viral infections. Antibiotics can cause side effects (e.g. diarrhea, yeast infections) and may cause serious harms such as severe diarrhea, allergic reactions, kidney or liver injury.**

When you have a viral infection, it is very important to get plenty of rest and give your body time to fight off the virus.

**If you follow these instructions, you should feel better soon:**

**Download Here**



# EMAIL TEMPLATE

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Below is a template email to send out to members of your community to help share the message about the Using Antibiotics Wisely campaign.

Dear \_\_\_\_\_ Membership,

It is estimated that up to half of all antibiotic prescriptions in Canada are unnecessary. The overuse of antibiotics is a major contributor to antibiotic resistance and is threatening our ability to treat common infectious diseases.

[insert organizational name] is a proud supporter of the Using Antibiotics Wisely campaign, led by Choosing Wisely Canada. This national campaign focuses on developing and disseminating resources for clinicians and patients to help reduce unnecessary antibiotic use.

The goal of the campaign is to raise awareness by providing clinicians with evidence-based tools and patient materials to support conversations about unnecessary antibiotic prescribing.

Clinician tools and patient materials can be accessed at:  
[www.choosingwiselycanada.org/antibiotics](http://www.choosingwiselycanada.org/antibiotics)

**[For the medical professional societies with Choosing Wisely recommendations related to antibiotics, consider adding the following:]**

**In particular, we would like to draw your attention to the antibiotic recommendation(s) developed by our own organization:**

**[(insert recommendation in bold text)]**

We encourage you to visit the website to view Using Antibiotic Wisely resources that can support your daily practice or work.

Regards,  
[name]





# SAMPLE SOCIAL MEDIA POSTS

Please use or adapt the following social media posts that promote the campaign's clinician tools. Use the hashtag **#AntibioticsWisely** when posting content related the campaign.

TWEET/POST	
	It's #AntibioticAwarenessWeek! @ChooseWiselyCA, with support from @GovCanHealth & @FamPhysCan, has developed resources to help clinicians & patients use antibiotics wisely! Posters, prescriber tools, & patient pamphlets are all available at: <a href="http://www.choosingwiselycanada.org/antibiotics">www.choosingwiselycanada.org/antibiotics</a> #AntibioticsWisely
	Over 90% of #antibiotics are prescribed in the community setting. Using Antibiotics Wisely has focused its efforts on developing new tools for primary & long-term care! See the new primary tools now available on the website - LTC coming soon! <a href="http://www.choosingwiselycanada.org/antibiotics">www.choosingwiselycanada.org/antibiotics</a>
	.@ChooseWiselyCA has 20+ recommendations on avoiding unnecessary #antibiotic prescribing created by over 15 national specialty societies. See the full list: <a href="http://www.choosingwiselycanada.org/antibiotics">www.choosingwiselycanada.org/antibiotics</a> #AntibioticAwarenessWeek #AntibioticsWisely
	A delayed prescription informs the patient to wait a certain amount of time before filling a script to see if their symptoms improve. Check out this resource & other tools related to the Using Antibiotics Wisely campaign: <a href="http://www.choosingwiselycanada.org/antibiotics">www.choosingwiselycanada.org/antibiotics</a> #AntibioticsWisely
	A viral prescription pad provides ways patients can relieve their cold & flu symptoms without #antibiotics & instructions on how to do so. @ChooseWiselyCA has a new viral prescription pad with RxFiles. See this resource & more at <a href="http://www.choosingwiselycanada.org/antibiotics">www.choosingwiselycanada.org/antibiotics</a> #AntibioticsWisely
	Using Antibiotics Wisely has developed a new practice change resource to help support clinical decisions related to #antibiotic prescribing in #primarycare for acute upper respiratory tract infections. Check out this resource and more at <a href="http://www.choosingwiselycanada.org/antibiotics">www.choosingwiselycanada.org/antibiotics</a>
	Using Antibiotics Wisely encourages clinicians and patients to engage in conversations about unnecessary #antibiotic use. See the @ChooseWiselyCA tools that can help support this conversation: <a href="http://www.choosingwiselycanada.org/antibiotics">www.choosingwiselycanada.org/antibiotics</a>

# SAMPLE SOCIAL MEDIA POSTS

Please use or adapt the following social media posts that promote the campaign's patient and public resources. Use the hashtag **#AntibioticsWisely** when posting content related the campaign.

TWEET/POST	
	<p>See the @ChooseWiselyCA 3 questions to ask your health care provider on #antibiotics:</p> <ul style="list-style-type: none"> <li>• Do I really need antibiotics?</li> <li>• What are the risks?</li> <li>• Are there simpler, safer options?</li> </ul> <p><a href="http://www.choosingwiselycanada.org/antibiotics">www.choosingwiselycanada.org/antibiotics</a></p>
	<p>Sorry, no amount of #antibiotics will get rid of your cold and flu. Check out the #ChoosingWisely patient pamphlet - Cold, flu &amp; other respiratory illnesses: don't rush to antibiotics: <a href="http://www.choosingwiselycanada.org/colds-flu-respiratory-illnesses-dont-rush-antibiotics">www.choosingwiselycanada.org/colds-flu-respiratory-illnesses-dont-rush-antibiotics</a></p>
	<p>Many older adults receive #antibiotics to treat UTIs even though they do not have UTI symptoms. See our #ChoosingWisely patient pamphlet for more info on antibiotics for UTIs in older people: when you need them &amp; when you don't: <a href="http://www.choosingwiselycanada.org/antibiotics-urinary-tract-infections">www.choosingwiselycanada.org/antibiotics-urinary-tract-infections</a> #AntibioticsWisely</p>
	<p>Sinus infections almost always stem from a viral infection, not a bacterial one—and #antibiotics don't work against viruses. Check out the #ChoosingWisely patient pamphlet on treating sinus infections - don't rush to antibiotics: <a href="http://www.choosingwiselycanada.org/treating-sinusitis">www.choosingwiselycanada.org/treating-sinusitis</a></p>

## MEDIA & PROFILES

Choosing Wisely Canada's national social media channels will be sharing profiles, opinion editorials (op-eds) and blogs written by experts and clinicians that will be published throughout November. Follow us on Twitter or Facebook for media and social media content to share throughout Antibiotic Awareness Week.

# SOCIAL MEDIA GRAPHICS

Use the following graphics on social media and tag @ChooseWiselyCA on Twitter or ChoosingWiselyCanada on Facebook with the hashtag **#AntibioticsWisely**.

**Sorry, but no amount of antibiotics will get rid of your cold.**

The best way to treat most colds, coughs or sore throats is with plenty of fluids and rest. Talk to your health care provider.

Choosing Wisely Canada

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**ANTIBIOTICS:**  
THREE QUESTIONS TO ASK YOUR HEALTH CARE PROVIDER

1) Do I really need antibiotics?

Antibiotics fight bacterial infections, like strep throat, whooping cough and bladder infections. But they don't fight viruses – like common colds, flu, or most sore throats and sinus infections. Ask if you have a bacterial infection.

Download Here

Download Here

Please use the following graphics with our patient pamphlet information. Links are provided below.

**Colds, Flu, & Other Respiratory Illnesses: Don't Rush to Antibiotics**

www.choosingwiselycanada.org/antibiotics

Choosing Wisely Canada

Download Here

Download Here

**Antibiotics for Urinary Tract Infections in Older People: When you need them and when you don't**

www.choosingwiselycanada.org/antibiotics

Choosing Wisely Canada

Download Here

Download Here

**Treating Sinus Infections: Don't rush to antibiotics**

www.choosingwiselycanada.org/antibiotics

Choosing Wisely Canada

Download Here

Download Here

**LINK:**  
[www.choosingwiselycanada.org/colds-flu-respiratory-illnesses-dont-rush-antibiotics](http://www.choosingwiselycanada.org/colds-flu-respiratory-illnesses-dont-rush-antibiotics)

**LINK:**  
[www.choosingwiselycanada.org/antibiotics-urinary-tract-infections](http://www.choosingwiselycanada.org/antibiotics-urinary-tract-infections)

**LINK:**  
[www.choosingwiselycanada.org/treating-sinusitis](http://www.choosingwiselycanada.org/treating-sinusitis)

# SOCIAL MEDIA GIF

**Sorry, but no amount of antibiotics will get rid of your cold.**

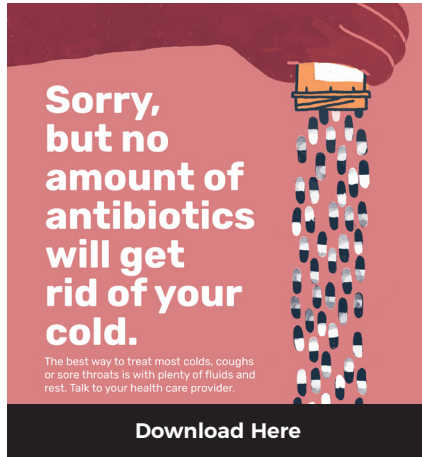
Download Here

# POSTERS FOR WAITING ROOMS

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Below are print-ready materials that you can share in your community.

Poster



Poster



## SHARE YOUR POSTER WITH US!

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If you have a Using Antibiotics Wisely poster posted in your clinic or office, share it with us on social media and use the hashtag #AntibioticsWisely.

# REGIONAL RESOURCES

Reducing unnecessary antibiotic use is a priority for many of our Choosing Wisely provincial and territorial affiliates. Check out their websites below for local resources or follow on social media throughout Antibiotic Awareness Week (November 12-18 2018).



🌐 [www.albertadoctors.org/leaders-partners/choosing-wisely-alberta](http://www.albertadoctors.org/leaders-partners/choosing-wisely-alberta)



🌐 [www.choosingwiselymanitoba.ca](http://www.choosingwiselymanitoba.ca)  
🐦 @ChooseWiselyMB



🌐 [www.choosingwiselynb.ca](http://www.choosingwiselynb.ca)  
🐦 @nb\_docs  
📘 /NBDocs



🌐 [www.qualityofcarenl.ca](http://www.qualityofcarenl.ca)  
🐦 @QualityofCareNL  
📘 /QualityofCareNL



🌐 [www.doctorsns.com/advocate/choosing-wisely-ns](http://www.doctorsns.com/advocate/choosing-wisely-ns)  
🐦 @ChooseWiselyNS



🌐 Choosing Wisely Nunavut has translated antibiotic posters into Inuktitut and Inuinnaqtun. To receive a copy, email [info@choosingwiselycanada.org](mailto:info@choosingwiselycanada.org)



🌐 [www.nthssa.ca/en/choosing-wisely](http://www.nthssa.ca/en/choosing-wisely)



🌐 [www.hqontario.ca/Quality-Improvement/Quality-Improvement-in-Action/Choosing-Wisely-Canada](http://www.hqontario.ca/Quality-Improvement/Quality-Improvement-in-Action/Choosing-Wisely-Canada)



🌐 Coming soon!



🌐 [www.amq.ca/en/choosing-wisely/198-a-propos-choisir-avec-soin](http://www.amq.ca/en/choosing-wisely/198-a-propos-choisir-avec-soin)  
🐦 @ChoisirAvecSoin



🌐 [www.hqc.sk.ca/what-we-do/ensuring-patients-get-appropriate-care](http://www.hqc.sk.ca/what-we-do/ensuring-patients-get-appropriate-care)  
🐦 @ChooseWiselySK



🌐 [www.yukondoctors.ca/choosing-wisely](http://www.yukondoctors.ca/choosing-wisely)



[www.choosingwiselycanada.org/antibiotics](http://www.choosingwiselycanada.org/antibiotics)

 @ChooseWiselyCA  ChoosingWiselyCanada

#AntibioticsWisely

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