



Supplemental Resources

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Brief Supplement Overview

This supplement to the Inland Empire Health Plan Outpatient and Emergency Department Antimicrobial Stewardship Toolkit provides additional resources including:

- 1) A template for a brief stewardship plan
- 2) A template stewardship commitment statement for use within the organization
- 3) Stewardship education resources for patients and providers

For questions, concerns, or feedback about the toolkit, please email the Inland Empire Health Plan Regional Quality Team at DGRegionalQuality@iehp.org and/or the California Department of Public Health Antimicrobial Stewardship Team at HAI_AS@cdph.ca.gov. We welcome your suggestions. The California Department of Public Health Antimicrobial Stewardship Team also offers [one-on-one stewardship consultations](#) upon request.*

*[Antimicrobial Stewardship \(includes consultation link\) | CDPH](#)

(www.cdph.ca.gov/Programs/CHCQ/HAI/Pages/AntimicrobialStewardshipLandingPage.aspx)

Brief Stewardship Plan Template

Stewardship Team

Stewardship champion (name and title):

Facility leadership stewardship contact (name and title):

Other team members (e.g., physicians, pharmacists, nurses, managers, directors, information technologists):

Stewardship Goals

The most effective goals are specific, measurable, achievable, and time-bound. *Example: We aim to reduce inappropriate prescribing for bronchitis and bronchiolitis, as evidenced by the Healthcare Effectiveness Data and Information Set (HEDIS) metric for avoiding antibiotic treatment for acute bronchitis/bronchiolitis (AAB), by 25% over the next 12 months.*

- 1)
- 2)

Meetings and Communication

- 1) The stewardship team will meet _____ to evaluate antibiotic use data, discuss stewardship program barriers and feedback, and adapt our stewardship plan.
- 2) The stewardship team will update facility leadership on our stewardship plan and progress _____.
- 3) The stewardship team initially communicated goals and interventions with staff on _____.

We will update staff _____ to ensure consistent communication and patient-expectation setting.

Commitment

We will do the following to adhere to the commitment core element (*consider at least one method of commitment from the Stewardship Toolkit document, for example, displaying provider stewardship commitment posters in the waiting room*):

- 1)
- 2)

Action

We will do the following to adhere to the action core element (*consider at least one action from the Stewardship Toolkit document, for example, publicizing guidelines for common conditions or encouraging the Dialogue Around Respiratory Illness Treatment (DART) communication framework*):

- 1)
- 2)

Tracking and Reporting

We will do the following to adhere to the tracking and reporting core element (*in addition to tracking HEDIS AAB, consider if additional methods of tracking and reporting from the Stewardship Toolkit document would be practical, for example, tracking the proportion of visits leading to an antibiotic prescription*):

- 1) We will track HEDIS AAB quarterly, including reviewing overall trends and comparing our performance with IEHP and NCQA benchmarks.
- 2) We will report stewardship progress to staff and leadership at least annually.
- 3)
- 4)

Education

We will do the following to adhere to the education core element (*consider at least one method of education from the Stewardship Toolkit document, for example, displaying waiting room posters to educate patients on appropriate antimicrobial use*):

- 1)
- 2)

Other notes

Internal Stewardship Commitment Statement Template

The CDC estimates that half of outpatient antimicrobials prescribed in the United States may be inappropriate, and that at least 30% of outpatient antimicrobial prescriptions are unnecessary. Additionally, up to 70% of patients diagnosed with acute bronchitis are inappropriately prescribed antibiotics.[†]

_____ is committed to optimizing antimicrobial use through antimicrobial stewardship. In addition to limiting the threat of spreading antimicrobial resistance, these efforts will benefit our patients by reducing their risk of *Clostridioides difficile* colitis, adverse drug reactions, and resistant infections. A summary of our stewardship plan is available at _____.

Please reach out to _____

with any questions, ideas, and feedback.

Signature of Stewardship Leader:

Signature of Facility Leader:



[†] [Core Elements of Outpatient Antibiotic Stewardship | Antibiotic Prescribing and Use | CDC](https://www.cdc.gov/antibiotic-use/hcp/core-elements/outpatient-antibiotic-stewardship.html) (www.cdc.gov/antibiotic-use/hcp/core-elements/outpatient-antibiotic-stewardship.html)

Healthcare Effectiveness Data and Information Set (HEDIS) Metric: Avoiding Antibiotics for Acute Bronchitis/Bronchiolitis (AAB)

HEDIS (Healthcare Effectiveness Data and Information Set) metrics were created by the National Committee for Quality Assurance (NCQA) to evaluate and compare the quality of care across different health plans. HEDIS metrics are also used by many health plans, including the Inland Empire Health Plan (IEHP), to internally monitor care quality.

Of the more than 90 HEDIS metrics, four relate to antimicrobial stewardship. IEHP has chosen to emphasize the avoidance of antibiotic treatment for acute bronchitis/bronchiolitis (AAB) metric. AAB is calculated as the percentage of “episodes for members three months of age and older with a diagnosis of acute bronchitis/bronchiolitis that did not result in an antibiotic dispensing event”.¹ The target AAB is 100%, as antibiotics should not be prescribed solely for acute bronchitis/bronchiolitis. Patients with a secondary diagnosis requiring antibiotics are excluded from the calculation.

For additional information on AAB and other stewardship-related HEDIS metrics, please see the references below.¹⁻⁴

-
1. [HEDIS® High Performers in Antibiotic Stewardship Methodology \(PDF\) | NCQA](https://antibiotics.ncqa.org/static/media/HighPerformersMethodology.75fc0930d6c77f1f8f0f.pdf) (antibiotics.ncqa.org/static/media/HighPerformersMethodology.75fc0930d6c77f1f8f0f.pdf)
 2. [HEDIS Quality Measure Toolkit | Johns Hopkins Health Plans](https://www.hopkinsmedicine.org/johns-hopkins-health-plans/providers-physicians/health-care-performance-measures/hedis) (www.hopkinsmedicine.org/johns-hopkins-health-plans/providers-physicians/health-care-performance-measures/hedis)
 3. [Measurement and Evaluation Approaches to Improve Outpatient Antibiotic Prescribing in Health Systems \(PDF\) | CDC](https://www.cdc.gov/antibiotic-use/pdfs/measurement-evaluation-improve-outpatient-508.pdf) (www.cdc.gov/antibiotic-use/pdfs/measurement-evaluation-improve-outpatient-508.pdf)
 4. [Arena et al. Navigating performance measures for ambulatory antimicrobial stewardship: a review of HEDIS® and other metrics the steward should know. 2024 | ASHE](https://pubmed.ncbi.nlm.nih.gov/articles/PMC11696599/) (pmc.ncbi.nlm.nih.gov/articles/PMC11696599/)

Resource Collections and Toolkits

[CDC Publications on Demand | CDC](https://www.cdc.gov/pubs/) (wwwn.cdc.gov/pubs/)

Searchable collection of downloadable CDC resources. Resources available in multiple languages.

[Antibiotic Stewardship Resource Bundles | Antibiotic Prescribing and Use | CDC](https://www.cdc.gov/antibiotic-use/hcp/educational-resources/stewardship/index.html)

(www.cdc.gov/antibiotic-use/hcp/educational-resources/stewardship/index.html)

CDC bundle of stewardship resources.

[Antibiotic Prescribing and Use | Antibiotic Prescribing and Use | CDC](https://www.cdc.gov/antibiotic-use/)

(www.cdc.gov/antibiotic-use/)

Additional CDC stewardship resources and educational materials.

[Patient Education Resources | Antibiotic Prescribing and Use | CDC](https://www.cdc.gov/antibiotic-use/communication-resources/index.html)

(www.cdc.gov/antibiotic-use/communication-resources/index.html)

Large collection of CDC education resources targeted for patients. Includes handouts, brochures, posters, web images, graphics, and videos.

[Educational Materials for Healthcare Providers | Antibiotic Prescribing and Use | CDC](https://www.cdc.gov/antibiotic-use/hcp/educational-resources/index.html)

(www.cdc.gov/antibiotic-use/hcp/educational-resources/index.html)

Large collection of CDC stewardship education resources targeted for providers. Includes patient handouts, symptom prescription pads, posters, and videos.

[Improving Outpatient Antibiotic Prescribing: Toolkit for Healthcare Payers \(PDF\) | CDC](https://www.cdc.gov/antibiotic-use/core-elements/pdfs/AU-Outpatient-Payer-Toolkit-508.pdf)

(www.cdc.gov/antibiotic-use/core-elements/pdfs/AU-Outpatient-Payer-Toolkit-508.pdf)

CDC toolkit to guide health plans in implementing antimicrobial stewardship. Includes commitment letters, peer comparison letters, and project examples.

[Toolkit To Improve Antibiotic Use in Ambulatory Care | Agency for Healthcare Research and Quality](https://www.ahrq.gov/antibiotic-use/ambulatory-care/index.html)

(www.ahrq.gov/antibiotic-use/ambulatory-care/index.html)

Agency for Healthcare Research and Quality (AHRQ) toolkit on implementing antimicrobial stewardship in ambulatory settings. Includes a large collection of educational materials and presentations.

[How to Guide: Starting an Outpatient ASP – Pediatric Infectious Diseases Society](https://pids.org/pediatric-asp-toolkit/outpatient-settings/how-to-guide-starting-an-outpatient-asp/)

(pids.org/pediatric-asp-toolkit/outpatient-settings/how-to-guide-starting-an-outpatient-asp/)

Pediatric Infectious Diseases Society (PIDS) stewardship toolkit with educational materials.

[Urgent Care Antibiotic Stewardship Toolkit | College of Urgent Care Medicine \(PDF\)](https://urgentcareassociation.org/wp-content/uploads/2023/04/Antibiotic-Stewardship-Toolkit-updated-20230417.pdf)
(urgentcareassociation.org/wp-content/uploads/2023/04/Antibiotic-Stewardship-Toolkit-updated-20230417.pdf)

College of Urgent Care Medicine stewardship toolkit including internal commitment letters.

[MITIGATE antimicrobial stewardship toolkit: a guide for practical implementation in adult and pediatric emergency department and urgent care settings | CDC](https://stacks.cdc.gov/view/cdc/80653)

(stacks.cdc.gov/view/cdc/80653)

Frequently referenced comprehensive toolkit on initiating stewardship in emergency department and urgent care settings.

[Minnesota Antimicrobial Stewardship Program Toolkit for Outpatient Clinics - MN Dept. of Health](https://www.health.state.mn.us/diseases/antibioticresistance/hcp/asp/out/index.html)

(www.health.state.mn.us/diseases/antibioticresistance/hcp/asp/out/index.html)

Minnesota Department of Public Health stewardship toolkit with resources including commitment posters and waiting room materials.

[TAPOUT Playbook \(PDF\) | LA County](https://publichealth.lacounty.gov/acd/docs/TAPOUT_Playbook.pdf)

(publichealth.lacounty.gov/acd/docs/TAPOUT_Playbook.pdf)

Los Angeles County toolkit with resources and education on outpatient antimicrobial stewardship.

[Antibiotic Stewardship | Urgent Care Association](https://urgentcareassociation.org/about/antibiotic-stewardship/)

(urgentcareassociation.org/about/antibiotic-stewardship/)

Resources and education from the Urgent Care Association including a toolkit

Sampling of Available Resources and Educational Materials

CDC Provider Commitment Office Poster (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/Commitment-Poster-P.pdf)



Antibiotics are powerful, lifesaving medications. We are **dedicated** to prescribing antibiotics when they are needed, and we will avoid prescribing antibiotics when they are not needed as they may do harm. When your healthcare professional prescribes antibiotics, take them as directed.

Antibiotics fight infections caused by **bacteria**. Antibiotics don't work against **viruses** that cause the common cold, most coughs, and sore throats.

You can experience side effects while taking antibiotics. Common side effects could include a skin rash, diarrhea, or a yeast infection. More serious side effects could include a *C. diff* infection, which causes severe diarrhea that can lead to severe colon damage and death.

Using antibiotics also gives bacteria a chance to become more resistant to them. This can make future infections harder to treat, which means that antibiotics might not work when you really do need them.

Taking antibiotics only when needed helps keep you healthy, helps fight antibiotic resistance, and ensures that these life-saving drugs will be available for future generations.

We will answer any questions about the role of antibiotics in your treatment.

Sincerely,



To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use or call 1-800-CDC-INFO.



CS224363K

CDC Provider Commitment Office Poster-Spanish (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/es/CommitmentLetter-11by17-ES-P.pdf)



Un compromiso para mejorar el uso de antibióticos

Los antibióticos son medicamentos poderosos que salvan vidas. Estamos **comprometidos** a recetar antibióticos cuando sean necesarios, y evitaremos recetarlos cuando no sean necesarios ya que podrían causar daños. Cuando un profesional de atención médica le recete antibióticos, tómelos según las indicaciones.

Los antibióticos combaten las infecciones causadas por **bacterias**. No funcionan contra los **virus** que causan el resfriado común, la mayoría de los casos de tos y los dolores de garganta.

Usted puede presentar efectos secundarios cuando tome antibióticos. Los efectos secundarios comunes podrían incluir sarpullido, diarrea o infección por hongos. Los efectos secundarios más graves podrían incluir infección por *C. diff*, que causa diarrea intensa que puede provocar daños graves al colon y la muerte.

Usar antibióticos también les da a las bacterias la oportunidad de volverse más resistentes a ellos. Esto puede hacer que las infecciones futuras sean más difíciles de tratar, lo cual significa que los antibióticos podrían no funcionar cuando realmente los necesite.

Tomar antibióticos solo cuando son necesarios ayuda a mantenerlo sano y a combatir la resistencia a los antibióticos, y garantiza que estos medicamentos que salvan vidas estén disponibles para las futuras generaciones.

Contestaremos todas las preguntas sobre el rol de los antibióticos en su tratamiento.

Atentamente,



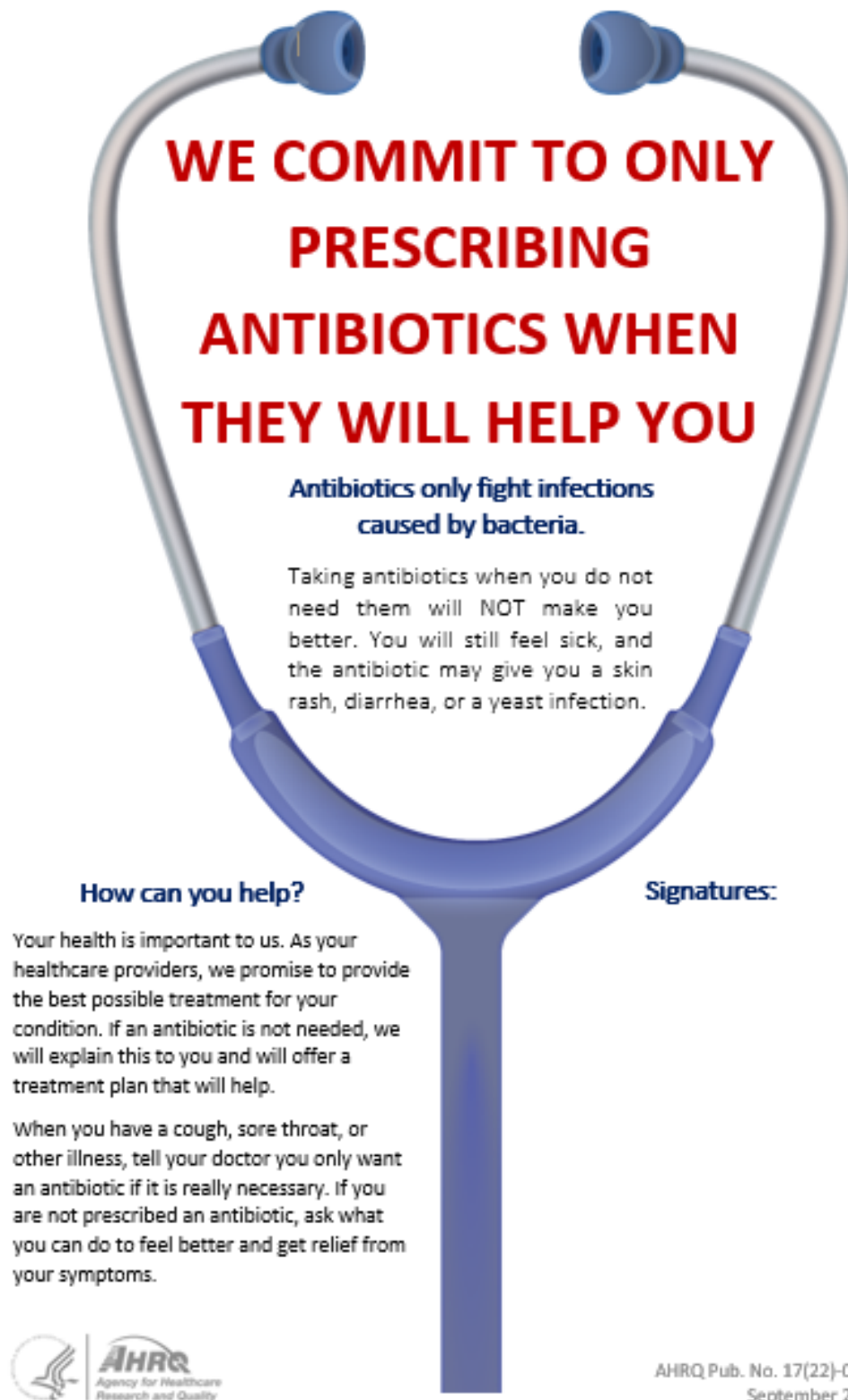
Para saber más sobre cómo recetar y usar antibióticos, visite www.cdc.gov/antibiotic-use/sp o llame al 1-800-CDC-INFO.



CS220363 ML 9-24-18

AHRQ Provider Commitment Office Poster (English and Spanish)

(www.ahrq.gov/antibiotic-use/ambulatory-care/strategies/index.html)





NOS COMPROMETEMOS A RECETARLE ANTIBIÓTICOS ÚNICAMENTE CUANDO LE VAN A SERVIR

**Los antibióticos solamente
combaten las infecciones
ocasionadas por bacterias.**

Tomar antibióticos cuando no los
necesita NO lo hará sentirse mejor.

Seguirá sintiéndose enfermo y el
antibiótico puede causarle salpullido,
diarrea o una infección por candida.

¿Cómo puede ayudar?

Su salud es importante para nosotros. Como personal de atención médica, prometemos ofrecerle el mejor tratamiento disponible para su condición. Si no necesita un antibiótico, le explicaremos el motivo y le ofreceremos un plan de tratamiento que le ayudará.

Si tiene tos, dolor de garganta u otra condición, dígame a su médico que desea un antibiótico únicamente si es necesario. Si no le recetan un antibiótico, pregunte qué puede hacer para sentirse mejor y aliviar sus síntomas.

Firmas:



AHRQ Pub. No. 17(22)-0030
September 2022

AHRQ Commitment Poster Directions (Copied from AHRQ)

How to “sign” the document

Once the document is opened in Microsoft Word, click on the “Signatures” text (located on the bottom right side of the page). This word is in a text box.

Use this text box to insert the photographs and signatures of the individuals you believe are important to indicate your institution’s commitment to prescribing antibiotics responsibly. If the poster is being displayed in a general area of the clinic, consider having executive leadership and other influential leaders (e.g., medical, pharmacy, and nursing administrators) “sign” it. If it is being displayed in a specific clinic, consider having the physicians, nurses, and other staff sign it.

How to add a logo

If you choose to add a logo to this document, there are two placement options—in the signature text box or on the footer (next to the AHRQ logo).

Add logo to signature box

1. Click on the “Signatures” text (located on the bottom right side of the page). This word is in a text box. Make sure your cursor is where you want the logo to be inserted in the box.
2. Go to the “Insert” tab.
3. Click on “Pictures” from the Insert tab.
4. A window will pop up so you can search your computer for the logo. Select your logo (.jpg or .png format) and click the insert button.
5. Your logo will appear in the textbox.

Add logo to footer (next to AHRQ logo)

1. Open the footer section (either double click in the footer section of the document or go to the “Insert” tab-> select the drop-down menu for “Footer”-> and click on “Edit Footer”).
2. Follow the same steps 2–4 from “Add logo to signature box.”
3. Your logo will appear in your footer and will be moved around just as you move around text (in line). If you want to move the logo image around freely, click on the logo-> go to the “Format” tab -> click on the “Wrap Text” drop-down menu -> and select “In front of text.”
4. When you are satisfied with the placement of the logo, exit the footer section (either double click outside of the footer area or go to the “Design” tab-> and click the “Close header and footer” button).

CDC Delayed Antibiotic Prescribing Prescription Pad (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/RCx-Delayed-Prescribing-sm-v9-508.pdf)

What Is Delayed Prescribing?



WAIT. DO NOT FILL YOUR PRESCRIPTION JUST YET.

Your healthcare professional believes your illness may resolve on its own.

First, follow your healthcare professional's recommendations to help you feel better without antibiotics. Continue to monitor your own symptoms over the next few days.

- ☐ Rest.
- ☐ Drink extra water and fluids.
- ☐ Use a cool mist vaporizer or saline nasal spray to relieve congestion.
- ☐ For sore throats in adults and older children, try ice chips, sore throat spray, or lozenges.
- ☐ Use honey to relieve cough. Do not give honey to an infant younger than 1.

If you **do not feel better** in days/hours or feel worse, go ahead and fill your prescription.

If you **feel better**, you do not need the antibiotic, and do not have to risk the side effects.

Waiting to see if you really need an antibiotic can help you take antibiotics only when needed. When antibiotics aren't needed, they won't help you, and the side effects could still hurt you. Common side effects of antibiotics can include rash, dizziness, nausea, diarrhea, and yeast infections.

Antibiotics save lives, and when a patient needs antibiotics, the benefits outweigh the risks of side effects. You can protect yourself and others by learning when antibiotics are and are not needed.

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use.



CDC Delayed Antibiotic Prescribing Prescription Pad-Spanish (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/es/RX-Pad-DelayedPrescribing-S-ES-P.pdf)

¿Qué significa aplazar la receta?



**TOME CONCIENCIA
SOBRE LOS
ANTIBIÓTICOS**
BUEN USO, MEJOR TRATAMIENTO

ESPERE. NO COMPRA SU MEDICAMENTO RECETADO TODAVÍA.

El profesional de atención médica cree que su enfermedad puede desaparecer sola.

Primero, siga las recomendaciones del profesional de atención médica para ayudarlo a sentirse mejor sin antibióticos. Continúe monitoreando sus propios síntomas durante los días siguientes.

- ☐ Descanse.
- ☐ Beba más agua y otros líquidos de lo habitual.
- ☐ Use un humidificador de vapor frío o una solución salina nasal en aerosol para aliviar la congestión.
- ☐ Para el dolor de garganta en los adultos y niños mayores, pruebe con trocitos de hielo, aerosol para garganta irritada o pastillas para la garganta.
- ☐ Use miel para aliviar la tos. No le dé miel a un bebé de menos de un año de edad.

Si usted **no se siente mejor** en ____ días/horas o **se siente peor**, entonces compre el medicamento recetado.

Si usted **se siente mejor**, **no necesita el antibiótico** y no tiene que arriesgarse a tener los efectos secundarios.

Esperar para ver si verdaderamente necesita un antibiótico puede ayudarlo a tomar este tipo de medicamento solo cuando sea necesario. Los antibióticos no lo ayudarán si no los necesita y los efectos secundarios incluso podrían hacerle daño. Entre los efectos secundarios comunes de los antibióticos están el sarpullido, los mareos, las náuseas, la diarrea y las infecciones por hongos.

Los antibióticos salvan vidas, y cuando un paciente necesita este tipo de medicamentos, los beneficios superan los riesgos de los efectos secundarios. Usted puede protegerse y proteger a los demás al aprender cuándo los antibióticos son necesarios o no.

Para saber más sobre cómo recetar y usar antibióticos, visite www.cdc.gov/antibiotic-use/sp.

CS280031F MLS 325095



CDC Symptom Relief for Viral Illnesses Prescription Pad (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/RCx-Relief-Viral-Illness-Ig-v8-508.pdf)

Symptom Relief for Viral Illnesses



1. DIAGNOSIS

- ☐ Cold or cough
- ☐ Middle ear fluid (Otitis Media with Effusion, OME)
- ☒ Flu
- ☐ Viral sore throat
- ☐ Bronchitis
- ☐ Other:

You have been diagnosed with an illness caused by a virus. Antibiotics do not work on viruses. When antibiotics aren't needed, they won't help you, and the side effects could still hurt you. The treatments prescribed below will help you feel better while your body fights off the virus.

2. GENERAL INSTRUCTIONS

- ☐ Drink extra water and fluids.
- ☐ Use a cool mist vaporizer or saline nasal spray to relieve congestion.
- ☒ For sore throats in older children and adults, use ice chips, sore throat spray, or lozenges.
- ☐ Use honey to relieve cough. Do not give honey to an infant younger than 1.

3. SPECIFIC MEDICINES

- ☒ Fever or aches:
- ☐ Ear pain:
- ☐ Sore throat and congestion:

Use medicines according to the package instructions or as directed by your healthcare professional. Stop the medication when the symptoms get better.

4. FOLLOW UP

- ☒ If not improved in ___ days/hours, if new symptoms occur, or if you have other concerns, please call or return to the office for a recheck.
- ☐ Phone:
- ☐ Other:

Signed: _____

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use.



CDC Symptom Relief for Viral Illnesses Prescription Pad-Spanish (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/es/RX-Pad-ReliefViral-L-ES-P.pdf)

Alivio de los síntomas de enfermedades virales



**TOME CONCIENCIA
SOBRE LOS
ANTIBIÓTICOS**
BUEN USO, MEJOR TRATAMIENTO

1. DIAGNÓSTICO

- ☐ Resfriado o tos
- ☐ Líquido en el oído medio (otitis media exudativa, OME)
- ☐ Influenza (gripe)
- ☐ Dolor de garganta de origen viral
- ☐ Bronquitis
- ☐ Otro:

A usted se le ha diagnosticado una enfermedad causada por un virus. Los antibióticos no hacen efecto contra los virus. Los antibióticos no lo ayudarán si no los necesita y los efectos secundarios incluso podrían hacerle daño. Las medidas de tratamiento que se enumeran a continuación lo ayudarán a sentirse mejor mientras su cuerpo lucha contra el virus.

2. INSTRUCCIONES GENERALES

- ☐ Beba más agua y otros líquidos de lo habitual.
- ☐ Use un humidificador de vapor frío o una solución salina nasal en aerosol para aliviar la congestión.
- ☐ Para el dolor de garganta en los niños mayores y adultos, use trocitos de hielo, aerosol para garganta irritada o pastillas para la garganta.
- ☐ Use miel para aliviar la tos. No le dé miel a un bebé de menos de un año de edad.

3. MEDICAMENTOS ESPECÍFICOS

- ☐ Fiebre o dolores:
- ☐ Dolor de oído:
- ☐ Dolor de garganta y congestión:

Use los medicamentos según las instrucciones en el envase o como se lo haya indicado el profesional de atención médica. Deje de tomar el medicamento cuando los síntomas hayan disminuido.

4. SEGUIMIENTO

- ☐ Si no se ha mejorado en ____ días/horas, si tiene nuevos síntomas o si tiene otras inquietudes, llame o vuelva al consultorio para hacerse un nuevo chequeo.
- ☐ Teléfono:
- ☐ Otro:

Firmado: _____

Para saber más sobre cómo recetar y usar antibióticos, visite www.cdc.gov/antibiotic-use/sp.

CS280031G MLS 325095



CDC Symptom Relief for Cold and Cough Prescription Pad (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/HCP-Relief-Colds-Cough-85by11-P.pdf)

Relief for Common Symptoms of Colds and Cough



GENERAL INSTRUCTIONS

- Drink extra water and fluids.
- Use a cool mist vaporizer or saline nasal spray to relieve congestion.
- For sore throats, suck on ice chips, popsicles, or lozenges. (Do not give lozenges to children younger than two years old.)
- Use honey to relieve cough for adults and children at least 12 months old or older.
- Other:

SPECIFIC MEDICINES

☐ Fever or aches:

☐ Ear pain:

☐ Sore throat:

☐ Nasal congestion:

☐ Cough/chest congestion:

Use medicines according to the package instructions or as directed by your doctor or pharmacist. Stop the medication when the symptoms get better.

FOR CHILDREN YOUNGER THAN 4 YEARS OLD

Do not use over-the-counter cough and cold medicine in children younger than 4 years old unless directed by your doctor. Overuse and misuse of these medicines can result in serious and potentially life-threatening side effects.

To relieve a stuffy nose, parents can use:

- A rubber suction bulb
- Nose saline drops
- A clean humidifier
- A cool mist vaporizer

Call your doctor if the illness has not improved in a few days or if symptoms are severe or unusual.

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use or call 1-800-CDC-INFO.



CDC Symptom Relief for Cold and Cough Prescription Pad-Spanish (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/es/HCP-Relief-For-Colds-85by11-ES-P.pdf)

Alivio para los síntomas comunes de los resfriados y la tos



INSTRUCCIONES GENERALES

- Beba más agua y otros líquidos de lo habitual.
- Use un humidificador de vapor frío o una solución salina nasal en aerosol para aliviar la congestión.
- Para el dolor de garganta, chupe trocitos de hielo, paletas heladas (*popsicles*) o pastillas para el dolor de garganta. (No les dé pastillas a niños menores de dos años).
- Use miel para aliviar la tos en adultos y niños de al menos 12 meses o mayores.
- Otra: _____

MEDICAMENTOS ESPECÍFICOS

- ☐ Fiebre o dolores: _____
- ☐ Dolor de oído: _____
- ☐ Dolor de garganta: _____
- ☐ Congestión nasal: _____
- ☐ Tos/congestión en el pecho: _____

Use los medicamentos según las instrucciones en el envase o como se lo haya indicado el médico o el farmacéutico. Deje de tomar el medicamento cuando los síntomas hayan disminuido.

EN NIÑOS MENORES DE 4 AÑOS

No use medicamentos de venta libre para la tos y los resfriados en niños menores de 4 años, a menos que lo haya indicado su médico. El uso excesivo o inadecuado de estos medicamentos puede causar efectos secundarios graves y potencialmente mortales.

Para aliviar la congestión nasal, los padres pueden usar:

- Una perilla de succión _____
- Solución salina nasal en gotas _____
- Un humidificador limpio _____
- Un humidificador de vapor frío _____

Llame a su médico si la enfermedad no ha mejorado en unos días o si los síntomas son intensos o inusuales.

Para saber más sobre cómo recetar y usar antibióticos, visite www.cdc.gov/antibiotic-use/sp o llame al 1-800-CDC-INFO.



CS324363C MLS-324358

CDC Watchful Waiting Prescription Pad (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/Watchful-Waiting-Prescription-Pads_large-P.pdf)

What Is Watchful Waiting?



GOOD NEWS!

Your healthcare professional believes your illness will likely go away on its own.

You should watch and wait for ____ days/hours before deciding whether to take an antibiotic.

In the meantime, follow your healthcare professional's recommendations to help you feel better and continue to monitor your own symptoms over the next few days.

- ☐ Rest.
- ☐ Drink extra water and fluids.
- ☐ Use a cool mist vaporizer or saline nasal spray to relieve congestion.
- ☐ For sore throats in adults and older children, try ice chips, sore throat spray, or lozenges.
- ☐ Use honey to relieve cough. Do not give honey to an infant younger than 1.

If you **feel better**, no further action is necessary. You don't need antibiotics.

If you **do not feel better**, experience **new symptoms**, or have **other concerns**, call your healthcare professional _____. Discuss whether you need a recheck or antibiotics.

It may not be convenient to visit your healthcare professional multiple times, but it is critical to take antibiotics only when needed. When antibiotics aren't needed, they won't help you and the side effects could still hurt you. Common side effects of antibiotics can include rash, dizziness, nausea, diarrhea, and yeast infections.

Antibiotics save lives, and when a patient needs antibiotics, the benefits outweigh the risks of side effects. You can protect yourself and others by learning when antibiotics are and are not needed.

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use.



CDC Watchful Waiting Prescription Pad-Spanish (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/es/Rx-Pad-Watchful-Waiting-large-ES-508.pdf)

¿Qué significa esperar atentamente?



**TOME CONCIENCIA
SOBRE LOS
ANTIBIÓTICOS**
BUEN USO, MEJOR TRATAMIENTO

¡BUENAS NOTICIAS!

El profesional de atención médica cree que es probable que su enfermedad desaparezca sola.

Debe estar atento y esperar ____ días/horas antes de decidir si toma o no un antibiótico.

Mientras tanto, siga las recomendaciones del profesional de atención médica para ayudarlo a sentirse mejor y continúe monitoreando sus síntomas en los días siguientes.

- ☐ Descanse.
- ☐ Beba más agua y otros líquidos de lo habitual.
- ☐ Use un humidificador de vapor frío o una solución salina nasal en aerosol para aliviar la congestión.
- ☐ Para el dolor de garganta en los adultos y niños mayores, pruebe con trocitos de hielo, aerosol para garganta irritada o pastillas para la garganta.
- ☐ Use miel para aliviar la tos. No le dé miel a un bebé de menos de un año de edad.

Si usted **se siente mejor, no tiene que tomar ninguna otra medida. No necesita antibióticos.**

Si usted **no se siente mejor, tiene nuevos síntomas, o tiene otras inquietudes**, consulte al profesional de atención médica _____. **Pregúntele si debe hacerse un nuevo chequeo o tomar antibióticos.**

Tal vez no sea conveniente para usted ir varias veces a ver al profesional de atención médica, pero es esencial tomar antibióticos solo cuando sea necesario. Si no necesita antibióticos, no lo ayudarán a sentirse mejor, y los efectos secundarios aún pueden hacerle daño. Entre los efectos secundarios comunes de los antibióticos están el sarpullido, los mareos, las náuseas, la diarrea y las infecciones por hongos (candidiasis).

Los antibióticos salvan vidas, y cuando un paciente necesita este tipo de medicamentos, los beneficios superan los riesgos de los efectos secundarios. Puede protegerse usted y a otros al aprender cuándo los antibióticos son necesarios o no.

Para saber más sobre cómo recetar y usar antibióticos, visite <https://www.cdc.gov/antibiotic-use/community/sp/index.html>.



CS280031K



Antibiotics and Adverse Events Provider Education (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/AntibioticSafety-HCP-P.pdf)

FOR HEALTHCARE PROFESSIONALS

Antibiotics and Adverse Events



Antibiotics are responsible for almost **1 out of 5** emergency department visits for adverse drug events.¹



Antibiotics are **the most common cause** of emergency department visits for adverse drug events in children under 18 years of age.¹

Anytime antibiotics are prescribed, they can cause adverse events. Only prescribe antibiotics when clinically indicated.

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use.

¹Shehab N, et al. JAMA. 2016 Nov;316(20):2115-25



CS324608-A

[CDC: Do Antibiotics Have Side Effects? \(PDF\)](https://www.cdc.gov/antibiotic-use/media/pdfs/Do-Antibiotics-Have-Side-Effects-508.pdf)

(www.cdc.gov/antibiotic-use/media/pdfs/Do-Antibiotics-Have-Side-Effects-508.pdf)

Do antibiotics have side effects?



Any time antibiotics are used, they can cause side effects. However, antibiotics can save lives. When you need antibiotics, the benefits outweigh the risks of side effects. If you don't need antibiotics, you shouldn't take them because they can cause harm.

Common side effects of antibiotics include:



Rash



Dizziness



Nausea



Yeast Infection



Diarrhea

Get immediate medical help if you experience severe diarrhea. It could be a symptom of a ***C. difficile* infection** (also called ***C. diff***), which can lead to severe colon damage and death. People can also have severe and life-threatening allergic reactions.

If you experience side effects, follow up with your healthcare professional.

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use or call 1-800-CDC-INFO.

1 out of 5

medication-related visits to the emergency room are from reactions to antibiotics.



CS332406-B

[CDC: Taking Your Antibiotics \(PDF\)](#)

(www.cdc.gov/antibiotic-use/media/pdfs/Taking-Your-Antibiotics-RxPad-Lg-P.pdf)

Taking Your Antibiotics



You have just filled a prescription for antibiotics.

READ AND FOLLOW THIS IMPORTANT INFORMATION.

- Take your antibiotic as prescribed by your healthcare professional.
- Do not share it with others.
- Talk to your pharmacist about safely discarding leftover medicines.

WHY IS THIS CHECKLIST SO IMPORTANT?

All medicines have side effects. Common side effects of antibiotics can include:



Rash



Dizziness



Nausea



Yeast Infection



Diarrhea

More serious side effects include:

- Severe diarrhea, which could be a *C. diff* infection and needs immediate treatment.
- Severe and life-threatening allergic reactions, such as wheezing, hives, shortness of breath, and anaphylaxis (which also includes feeling that your throat is closing or choking, or your voice is changing).

Antibiotics can save lives. **When you need an antibiotic, the benefits outweigh the risks of side effects.** Talk with your healthcare professional if you have questions about your antibiotics, including interactions with other medications, or if you develop side effects.

1 out of 5
medication-related
visits to the emergency
room are from reactions
to antibiotics.

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use or call 1-800-CDC-INFO.



CS200451-B

CDC: Taking Your Antibiotics-Spanish (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/es/Taking-your-Abx-Rx-Pad-85by11-ES-P.pdf)

Cómo tomar los antibióticos



**TOME CONCIENCIA
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BUEN USO, MEJOR TRATAMIENTO

Después de haber comprado antibióticos con su receta médica...

LEA Y SIGA ESTA INFORMACIÓN IMPORTANTE.

- Tome su antibiótico tal como fue recetado por el profesional de atención médica.
- No lo comparta con nadie.
- Consulte al farmacéutico sobre cómo desechar de forma segura los medicamentos que sobren.

¿POR QUÉ ES TAN IMPORTANTE ESTA LISTA DE VERIFICACIÓN?

Todos los medicamentos tienen efectos secundarios. Los efectos secundarios comunes de los antibióticos pueden incluir:



Sarpullido



Mareos



Náuseas



Infección por hongos



Diarrea

Los efectos secundarios más graves incluyen:

- Diarrea intensa, que puede ser una infección por *C. diff* y necesita tratamiento de inmediato.
- Reacciones alérgicas graves y potencialmente mortales, como sibilancias, ronchas, dificultad para respirar y anafilaxia (que también incluye la sensación de que la garganta se cierra o de atragantamiento, o de que le está cambiando la voz).

Los antibióticos pueden salvar vidas. **Cuando usted necesita antibióticos, los beneficios superan los riesgos de los efectos secundarios.** Hable con un profesional de atención médica si tiene preguntas sobre los antibióticos, incluidas las interacciones con otros medicamentos, o si presenta efectos secundarios.

1 de cada 5

visitas a salas de emergencias relacionadas con medicamentos son por reacciones a los antibióticos.

Para saber más sobre cómo recetar y usar antibióticos, visite www.cdc.gov/antibiotic-use/sp o llame al 1-800-CDC-INFO.



CS3.20-451-D MIL S-324 358



[CDC Viruses or Bacteria Patient Handout \(PDF\)](#)

(www.cdc.gov/antibiotic-use/media/pdfs/VirusOrBacteria-Original-P.pdf)

Viruses or Bacteria

What's got you sick?

Antibiotics are often prescribed when they are not needed for respiratory infections. Antibiotics are only needed for treating certain infections caused by bacteria. Viral illnesses cannot be treated with antibiotics. When an antibiotic is not prescribed, ask your healthcare professional for tips on how to relieve symptoms.

Common Respiratory Infections	Common Cause			Are Antibiotics Needed?*
	Virus	Virus or Bacteria	Bacteria	
Common cold/runny nose	✓			No
Sore throat (except strep)	✓			No
COVID-19	✓			No
Flu	✓			No
Bronchitis/chest cold (in otherwise healthy children and adults)		✓		No**
Middle ear infection		✓		Maybe
Sinus infection		✓		Maybe
Strep throat			✓	Yes
Whooping cough			✓	Yes

*Antiviral drugs are available for some viral infections, such as COVID-19 or flu.

**Studies show that in otherwise healthy children and adults, antibiotics for bronchitis won't help patients feel better.



To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use.



CS328461-A

CDC Viruses or Bacteria Patient Handout-Spanish (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/es/Virus-Bacteria-Chart-ES-508.pdf)

Virus o bacterias ¿Qué lo enfermó?

A menudo se recetan antibióticos para las infecciones respiratorias cuando no se necesitan. Solo se necesitan antibióticos para tratar ciertas infecciones respiratorias que son causadas por bacterias. Las enfermedades virales no se pueden tratar con antibióticos. Cuando su proveedor de atención médica no le recete un antibiótico, pídale consejos de cómo aliviar los síntomas y sentirse mejor.

Infecciones respiratorias comunes	Causa común			¿Se necesitan antibióticos?
	Virus	Virus o bacterias	Bacterias	
Resfriado común o moqueo	✓			No
Dolor de garganta (que no sea por infección estreptocócica)	✓			No
COVID-19	✓			No
Influenza (gripe)	✓			No
Bronquitis o resfriado de pecho (en niños y adultos que excepto por la bronquitis están sanos)*		✓		No*
Infección del oído medio		✓		Tal vez
Sinusitis		✓		Tal vez
Infección de garganta por estreptococos			✓	Sí
Tosferina			✓	Sí

*Los estudios muestran que los antibióticos no ayudan a que se sientan mejor los niños y adultos que, excepto por la bronquitis, están sanos.



**TOME CONCIENCIA
SOBRE LOS
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BUEN USO, MEJOR TRATAMIENTO

Para obtener más información sobre la prescripción y el uso de antibióticos, visite www.cdc.gov/antibiotic-use/sp/.



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MLS-329376



CDC Antibiotics Aren't Always the Answer Trifold for Patients (PDF) Page 1

(www.cdc.gov/antibiotic-use/pdfs/AntibioticsArentAlwaysTheAnswer-H.pdf)

Why does taking antibiotics lead to antibiotic resistance?

Any time you take antibiotics, they can cause side effects and contribute to the development of antibiotic resistance. Antibiotic resistance is one of the most urgent threats to the public's health.

Always remember:

1. Antibiotic resistance does not mean the body is becoming resistant to antibiotics; it means bacteria are developing the ability to defeat the antibiotics designed to kill them.
2. When bacteria become resistant, antibiotics cannot fight them, and the bacteria multiply.
3. Some resistant bacteria can be harder to treat and can spread to other people.

More than 2.8 million antibiotic-resistant infections occur in the United States each year, and more than 35,000 people die as a result.



What is the right way to take antibiotics?

If you need antibiotics, take them exactly as prescribed. Never save your antibiotics for later use or share them with family or friends.

Taking antibiotics only when needed helps keep us healthy now, helps fight antibiotic resistance, and ensures that these life-saving drugs will be available for future generations.

Talk with your healthcare professional if you have any questions about your antibiotics, including how they could interact with other medications you are taking, or if you develop any side effects.

What are the side effects?

Common side effects range from minor to very severe health problems and can include:

- Rash
- Dizziness
- Nausea
- Diarrhea
- Yeast infections

Get immediate medical help if you experience:

- **Severe diarrhea**—it could be a symptom of a *C. diff* infection, which can lead to severe colon damage and death.
- **Severe and life-threatening allergic reactions**, such as wheezing, hives, shortness of breath, and anaphylaxis (which also includes feeling that your throat is closing or choking, or your voice is changing).

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use or call 1-800-CDC-INFO.



Accessible content:
<https://www.cdc.gov/antibiotic-use/data-research/facts-stats/>

Antibiotics Aren't Always the Answer.



**BE
ANTIBIOTICS
AWARE**
SMART USE, BEST CARE

CDC Antibiotics Aren't Always the Answer Trifold for Patients (PDF) Page 2



Why is it important to *Be Antibiotics Aware?*

Antibiotics are powerful, life-saving drugs. When your healthcare professional prescribes antibiotics, take them as directed. Patients can experience side effects while taking antibiotics. But remember, when antibiotics are needed, their benefits outweigh the risks of side effects and antibiotic resistance.

When antibiotics aren't needed, they won't help you, and the side effects could still cause harm. Reactions from antibiotics cause 1 out of 5 medication-related visits to the emergency room.

In children, reactions from antibiotics are the most common cause of medication-related emergency room visits.

What do antibiotics treat?

Antibiotics are only needed for treating certain infections caused by bacteria. Antibiotics are critical tools for treating life-threatening conditions such as pneumonia and sepsis, which is the body's extreme response to an infection.

What don't antibiotics treat?

Antibiotics do not work on viruses, such as those that cause colds, flu, bronchitis, or runny noses, even if the mucus is thick, yellow, or green. Antibiotics also won't help some common bacterial infections, including most cases of bronchitis, many sinus infections, and some ear infections.

How can I stay healthy?

You can stay healthy and keep others healthy by:

- Cleaning hands by washing with soap and water for 20 seconds or using a hand sanitizer that contains at least 60% alcohol
- Covering your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow
- Getting recommended vaccines, such as the flu vaccine

Talk to your healthcare professional about steps you can take to help prevent illness.



CDC Preventing and Treating Bronchitis Patient Handout (PDF)

Page 1

(www.cdc.gov/antibiotic-use/media/pdfs/Preventing-and-Treating-Bronchitis-508.pdf)

Preventing and Treating Bronchitis

Cough keeping you up at night? Soreness in your chest and feeling tired? You could have acute bronchitis, but be aware: an antibiotic will not help you get better.



What is Acute Bronchitis?

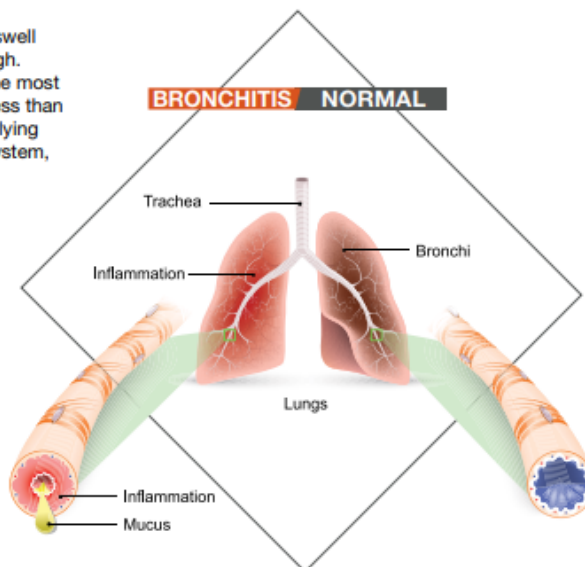
Bronchitis occurs when the airways of the lungs swell and produce mucus. That's what makes you cough. Acute bronchitis, often called a "chest cold," is the most common type of bronchitis. The symptoms last less than 3 weeks. If you're a healthy person without underlying heart or lung problems or a weakened immune system, this information is for you.

Symptoms

- ◆ Coughing with or without mucus production
- ◆ Soreness in the chest
- ◆ Fatigue (feeling tired)
- ◆ Mild headache
- ◆ Mild body aches
- ◆ Sore throat

Causes

- ◆ Acute bronchitis is usually caused by a virus.
- ◆ Bacteria can sometimes cause acute bronchitis, but even in these cases antibiotics are NOT recommended and will not help you get better.



When to Seek Medical Care

See a healthcare professional if you or your child have any of the following:

- ◆ Temperature of 100.4°F or higher
- ◆ Cough with bloody mucus
- ◆ Shortness of breath or trouble breathing
- ◆ Symptoms that last more than 3 weeks
- ◆ Repeated episodes of bronchitis



CDC Preventing and Treating Bronchitis Patient Handout (PDF)

Page 2



Treatment

Acute bronchitis usually gets better on its own—without antibiotics. **Antibiotics won't help you get better if you have acute bronchitis.**

When antibiotics aren't needed, they won't help you, and the side effects could still cause harm. Side effects can range from minor issues, like a rash, to very serious health problems, such as antimicrobial-resistant infections and *C. diff* infection, which causes diarrhea that can lead to severe colon damage and death.

If you have whooping cough (pertussis) or pneumonia, which can have similar symptoms to acute bronchitis, your doctor will most likely prescribe antibiotics.

How to Feel Better

- ◆ Get plenty of rest.
- ◆ Drink plenty of fluids.
- ◆ Use a clean humidifier, cool mist vaporizer, or saline nose drops to relieve a stuffy nose.
 - » For young children, use a rubber suction bulb to clear mucus.
- ◆ Breathe in steam from a bowl of hot water or shower.
- ◆ Use throat lozenges or cough drops. Do not give lozenges to children younger than 4 years old.
- ◆ Use honey to relieve cough for persons at least 1 year old.

Ask your doctor or pharmacist about over-the-counter medicines that can help you feel better. Always use over-the-counter medicines as directed. Remember, over-the-counter medicines may provide temporary relief of symptoms, but they will not cure your illness.

Remember, always use over-the-counter medicines as directed. **Be careful about giving over-the-counter medicines to children. Not all over-the-counter medicines are recommended for children of certain ages.**

- ◆ Pain relievers:
 - » Children younger than 6 months: only give acetaminophen.
 - » Children 6 months or older: it is OK to give acetaminophen or ibuprofen.
 - » Never give aspirin to children because it can cause Reye's syndrome, a rare but very serious illness that harms the liver and brain.
- ◆ Cough and cold medicines:
 - » Children younger than 4 years old: do not use unless a doctor specifically tells you to. Use of over-the-counter cough and cold medicines in young children can result in serious and potentially life-threatening side effects.
 - » Children 4 years or older: discuss with your child's doctor if over-the-counter cough and cold medicines are safe to give to your child for temporary symptom relief.

Prevention

- ◆ Wash your hands often with soap and water for at least 20 seconds or use a hand sanitizer that contains at least 60% alcohol.
- ◆ Make sure you and your child are up-to-date with all recommended vaccines.
- ◆ Don't smoke and avoid secondhand smoke, chemicals, dust, or air pollution.
- ◆ Always cover your mouth and nose when coughing or sneezing.
- ◆ Keep your distance from others when you are sick, if possible.
- ◆ Stay at home while you are sick and keep children out of school or daycare while they are sick.

Antibiotics will not treat acute bronchitis. Using antibiotics when not needed could do more harm than good.

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use.

[CDC Use the Right Tool Office Poster \(PDF\)](#)

(www.cdc.gov/antibiotic-use/media/pdfs/print-psa-right-tool-11by17-508.pdf)



AN ANTIBIOTIC IS THE WRONG TOOL TO TREAT A VIRUS.

Make sure you use the right tool for the job.

Antibiotics save lives by treating certain infections caused by bacteria, not viruses like colds or flu. When they're not needed, antibiotics won't help you, and the side effects could still hurt you. Ask your doctor when an antibiotic is the right tool for your illness and when it's not.

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use.



CDC Do You Need Antibiotics Office Poster (PDF)

(www.cdc.gov/antibiotic-use/media/pdfs/CDC-AU-Wait-Room-Poster-18by24-P.pdf)

DO YOU NEED ANTIBIOTICS?



You feel sick and miserable and want to get better fast. It could be a cold or even the flu. You're probably thinking you need antibiotics to knock out your illness and help you feel better. **Not so fast!** When antibiotics aren't needed, they won't help you, and the side effects could still hurt you.

8 WAYS TO BE ANTIBIOTICS AWARE

1 Antibiotics save lives, but they aren't always the answer when you're sick.

2 Antibiotics do not work on viruses.

3 Antibiotics are only needed for treating certain infections caused by bacteria.

4 An antibiotic will NOT make you feel better if you have a virus.

5 Any time antibiotics are used, they can cause side effects.

6 Taking antibiotics creates resistant bacteria.

7 If you need antibiotics, take them exactly as prescribed.

8 Stay healthy: clean hands, cover coughs, and get vaccinated, for the flu, for example.

Talk to your healthcare professional about the best way to feel better.

To learn more about antibiotic prescribing and use, visit www.cdc.gov/antibiotic-use.





IEHP Educational Materials

IEHP Antibiotics May NOT Always Be the Answer Handout (PDF)

(www.iehp.org/content/dam/iehp-org/en/documents/kids-and-teens/related-resources/2023/Antibiotics-Brochure_ENG.pdf)

Antibiotics: Know when to use them




Antibiotics may NOT always be the answer to treat you or your child.

What are antibiotics?

Antibiotics are a type of medicine that can treat certain infections caused by bacteria. Antibiotics do not work against viruses, such as those which cause bronchitis, colds, the flu, or runny noses. That's why your doctor may not always order antibiotics when you are sick.

Your doctor can tell what kind of infection is making you or your child sick and give advice about how to treat it.



Viruses or Bacteria?

What's got you sick?

Common Infections	Common Cause	Are Antibiotics Needed?
Cold/runny nose/upper respiratory infection	Virus	No
Sore throat (except strep)	Virus	No
COVID-19	Virus	No
Flu	Virus	No
Bronchitis/Chest Cold	Virus	No
Ear infection	Virus or bacteria	Maybe
Sinus infection	Virus or bacteria	Maybe
Strep throat	Bacteria	Yes

Source: CDC - Adapted from "Be Antibiotics Aware"

Did you know?

In children, a reaction to antibiotics is the most common cause of ER visits related to medicines.


If your doctor orders antibiotics:

Make sure you take your medicine the way your doctor tells you. Talk to your doctor about side effects or allergic reactions. These may include:

- Rash
- Dizziness
- Diarrhea
- Nausea

Get medical care right away if you have severe diarrhea or allergic reactions like hives, breathing problems, or a feeling like your throat is closing.

Are you insisting on antibiotics? Talk to your doctor about the best way for you or your child to get better. Taking antibiotics when you don't need them could cause more harm than good.




Get advice from a nurse:

Call our
24-Hour Nurse Advice Line at
1-888-244-4347 or
TTY **711**


Questions about benefits?

Give us a call at
1-800-440-IEHP (4347),
TTY **1-800-718-4347**
M-F, 7am-7pm, and
Sat-Sun, 8am-5pm.



iehp.org

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[IEHP AAB Education \(link is to the IEHP homepage\)](http://www.iehp.org/)

(www.iehp.org/)

AAB | Avoidance of Antibiotic Treatment for Acute Bronchitis/Bronchiolitis

AAB Rate* =

Numerator

The event where a diagnosis of acute bronchitis/bronchiolitis did result in an antibiotic dispensing event on or 3 days after the episode date.

Denominator

Outpatient event with member 3 months old and older with a diagnosis of acute bronchitis/bronchiolitis

Intake period: July 1 of the year prior to the measurement year to June 30 of the measurement year. The intake period captures eligible episodes of treatment.

Episode date: The date of service for any outpatient, telephone, or ED visit, e-visit or virtual check-in during the intake period with a diagnosis of acute bronchitis/bronchiolitis.

*The measure is reported as an inverted rate [1–(numerator/eligible population)]. A higher rate indicates appropriate acute bronchitis/bronchiolitis treatment (i.e., the proportion for episodes that did not result in an antibiotic dispensing event).

Negative medication history: A period of 30 days prior to the episode date when the member had no pharmacy claims for either new or refill prescriptions for a listed antibiotic drug. No prescriptions dispensed more than 30 days prior to the episode date that are active on the episode date.

Negative comorbid condition history: A period of 365 days prior to and including the episode date when the member had no claims/encounters with any diagnosis for a comorbid condition

Negative competing diagnosis: The episode date and 3 days following the episode date when the member had no claims/encounters with a competing diagnosis.