

Emergency Department Antibiotic Stewardship Collaborative Commitment Form

To participate in the Emergency Department (ED) Antibiotic Stewardship Collaborative please submit a completed committed form via email to Larissa May at lsmay@ucdavis.edu. We are accepting commitment forms on an ongoing basis.

Facility information	Name	
	Address	

Primary point of contact	
Name	
Position	
Phone	
Email	

Additional contact*	
Name	
Position	
Phone	
Email	
*Additional contacts may include Quality and Safety Experts, Antibiotic Stewardship Team Leads, Clinical Champion Nurses and Physicians	

I, _____, hereby authorize and support participation in the Emergency Department Antibiotic Stewardship Collaborative.

Signature

Title