

APPENDIX 1. Definitions of appropriateness of antimicrobial therapy in hospitals, developed by the National Antimicrobial Prescribing Survey (<https://www.naps.org.au>). Reproduced by permission.

		If endorsed guidelines are <u>present</u>	If endorsed guidelines are <u>absent</u>
Appropriate	1 Optimal ¹	Antimicrobial prescription follows endorsed local/ regional/ provincial guidelines <i>optimally</i> , including antimicrobial choice, dosage, route and duration ²	The antimicrobial prescription has been reviewed and endorsed by an infectious diseases clinician or a clinical microbiologist OR The prescribed antimicrobial will cover the likely causative or cultured pathogens and there is not a narrower spectrum or more appropriate antimicrobial choice, dosage, route or duration ² available
	2 Adequate	Antimicrobial prescription does not optimally follow the endorsed local/ regional/ provincial guidelines (including antimicrobial choice, dosage, route or duration ²) however, is a reasonable alternative choice for the likely causative or cultured pathogens OR For surgical prophylaxis, as above and duration ² is less than 24 hours	Antimicrobial prescription (including antimicrobial choice, dosage, route and duration ²) is not the most optimal, however, is a reasonable alternative choice for the likely causative or cultured pathogens OR For surgical prophylaxis, as above and duration ² is less than 24 hours
Inappropriate	3 Suboptimal	There may be a mild or non-life-threatening allergy mismatch OR Antimicrobial prescription (including antimicrobial choice, dosage, route and duration ²) is an unreasonable choice for the likely causative or cultured pathogens, including: <ul style="list-style-type: none"> spectrum excessively broad, unnecessary overlap in spectrum of activity, dosage excessively high or duration excessively long failure to appropriately de-escalate with microbiological results 	
	4 Inadequate	Antimicrobial prescription (including antimicrobial choice, dosage, route or duration ²) is unlikely to treat the likely causative or cultured pathogens OR The documented or presumed indication does not require any antimicrobial treatment OR There may be a severe or possibly life-threatening allergy mismatch, or the potential risk of toxicity due to drug interaction OR For surgical prophylaxis, the duration ² is greater than 24 hours (except where local guidelines endorse this)	
	5 Not assessable	The indication is not documented and unable to be determined from the notes OR The notes are not comprehensive enough to assess appropriateness OR The patient is too complex due to multiple co-morbidities, allergies or microbiology results, etc.	

Appendix to: Cormier R, MacLaggan T, Landry D, Harris R, Flewelling A. A point prevalence survey of antimicrobial usage in New Brunswick hospitals. *Can J Hosp Pharm.* 2022;75(2):79-88.