[Hospital Logo]

**SUBJECT:** Antimicrobial Stewardship Committee

**POLICY NO.:** [Policy number]

**DATE ISSUED:** [Date policy created]

**LAST REVIEWED:** [Date policy revised]

**PREVIOUS VERSIONS:** [Date previously reviewed or revised]

**APPROVED BY:** [Approving individual or committee]

**Objective**

The goal of the Antimicrobial Stewardship Committee is to provide support for the Antimicrobial Stewardship Program (ASP) to promote the appropriate use of antimicrobials in order to maximize treatment outcome and minimize unintended consequences of antimicrobial therapy.

**Policy**

1. Membership
	1. ASP Physician Chairman
	2. ASP Pharmacist
	3. Infection Preventionist
	4. Quality Improvement Director
	5. Chief Nursing Officer
	6. Information Technology Analyst
	7. Clinical Laboratory Director

[h. Additional member as deemed appropriate by ASP]

2. Meetings

 The Antimicrobial Stewardship Committee will meet quarterly.

 [Other options: The Antimicrobial Stewardship Committee will meet X times per year as part of the Infection Control Committee or Pharmacy and Therapeutic Committee agenda]

3. Responsibilities

a. Ensure appropriate use of antimicrobials through development and implementation of institutional policies, procedures, treatment algorithms, and other relevant initiatives

 b. Monitor institutional antibiotic use and antibiotic resistance patterns

 c. Report outcomes of ASP activities to Quality Improvement Committee and institutional staff

 d. Provide education to institutional staff on appropriate use of antimicrobial agents

e. Evaluate requests for formulary addition of antimicrobial agents and provide recommendations to the Pharmacy and Therapeutic Committee

**Oversight**

The Antimicrobial Stewardship Committee is fully supported by the Chief Nursing Officer, Chief Medical Officer, [other senior administration staff] and Board of Directors. It will directly report all ASP-related activities and outcomes to the Quality Improvement Committee [or Infection Control Committee, Pharmacy and Therapeutic Committee]. The ASP activities and outcomes will in turn be reported by Quality Improvement Committee [or Infection Control Committee, Pharmacy and Therapeutic Committee] to Medical Staff Committee and Board of Directors.