

## ANTI-INFECTIVES CHECKLIST: THE 5 D'S OF ANTIMICROBIAL STEWARDSHIP

- DRUG**
- Is the anti-infective indicated?
  - Is there a need to start an anti-infective?
  - Have cultures been taken before starting the anti-infective?
  - Does the Gram stain correlate with culture results?
  - Is this the most appropriate anti-infective?
  - Is narrowing down the anti-infective possible?
  - Is double coverage indicated?

- DOSE**
- Is the dose of the anti-infective appropriate for the indication?
    - Dose is too high
    - Dose is appropriate
    - Dose is too low
  - Is the dose adjusted for renal or hepatic function?

- DRUG ROUTE**
- Is the drug route appropriate?
    - For highly bioavailable anti-infectives, PO and IV administration provides similar drug levels
  - Is step-down from IV to PO possible?
    - Continues to need anti-infective
    - Clinically stable
    - Capable of tolerating oral dosage (e.g. no gastrointestinal abnormalities or drug interactions adversely affect oral absorption)

- DOSING INTERVAL**
- Is dosing frequency appropriate for the indication?
  - Is the dosing frequency adjusted for renal or hepatic function?

- DURATION**
- Has duration of therapy been considered when initiating anti-infectives?
  - Is the duration of the anti-infective appropriate for the indication?
  - Has duration been specified in the prescription?