Supplementary Material. Antimicrobial prescription assessment tool

Antimicrobial prescription assessment tool [19]

Unique ID number	
Name of evaluator	
Patient name/initial	
Date of evaluation	
Number of the drug(s) in the prescription	
Number of antibiotic(s) in the prescription	

Section A: Checklist for the comprehensiveness of outpatient prescription

S. No.	Parameters (mentioned or not)	Mentioned	Score
1.	Is the prescription legible?*	2=Legible	
		1=Barely legible	
		0=Not legible	
2.	Name	1=Mentioned	
		0=Not mentioned	
3.	Age*	2=Mentioned	
		1=Partially mentioned	
		0=Not mentioned	
4.	Sex	1=Mentioned	
		0=Not mentioned	
5.	Address	1=Mentioned	
		0=Not mentioned	
6.	Phone number	1=Mentioned	
		0=Not mentioned	
7.	Weight	1=Mentioned	
		0=Not mentioned	
8.	OPD no.	1=Mentioned	
		0=Not mentioned	
9.	Name of OPD (if applicable)	1=Mentioned	
		0=Not mentioned	
10.	Health facility	1=Mentioned	
		0=Not mentioned	
11.	Date of visit	1=Mentioned	
		0=Not mentioned	
12.	Type of visit (New or follow up visit)	1=Mentioned	
		0=Not mentioned	
13.	Are the comorbidities mentioned (if any)	1=Mentioned	
		0=Not mentioned	
14.	Presenting symptoms of the illness (current episode)*	2=Mentioned	
		1=Partially Mentioned	
		0=Not mentioned	
15.	Lab investigations (if applicable)	1=Mentioned	
		0=Not mentioned	

Contd...

S. No.	Parameters (mentioned or not)	Mentioned	Score
16	Diagnosis*	1=Mentioned 0=Not mentioned	
17.	Are there any known drug allergies mentioned?	1=Mentioned 0=Not mentioned	
18.	How is the name of the antibiotic mentioned?	1=Generic 0=Proprietary	
19.	Is the dose of the antibiotic prescribed mentioned?	1=Mentioned 0=Not mentioned	
20.	Is the frequency of the antibiotic prescribed mentioned?	1=Mentioned 0=Not mentioned	
21.	Is the route of administration of the antibiotic prescribed mentioned?	1=Mentioned 0=Not mentioned	
22.	Is the duration of the antibiotic prescribed mentioned?	1=Mentioned 0=Not mentioned	
23.	Are relevant food drug interactions (or) Drug-drug interactions mentioned?	1=Mentioned 0=Not mentioned	
24.	Follow-up instructions mentioned (if applicable)	1=Mentioned 0=Not mentioned	
25.	Details of the prescribing doctor	1=Mentioned 0=Not mentioned	
26.	Is the prescription named and signed?	1=Yes 0=No	

*Criteria mandatory in the prescription checklist for proceeding to rationality assessment
The score range of comprehensiveness of prescription 0-29
High: Score more than 24-29
Medium: Score 21-23
Low: Score less than 21

Section B: Antimicrobial prescription assessment tool for evaluating the rationality

A	Patient details (Total score 2)			Score section A
	Scoring criteria: Score 0: A1 is mentioned, A2 and A3 are not mentioned Score 1: A1 is mentioned, either A2 or A3 is mentioned Score 2: All A1, A2 and A3 are mentioned			
A1	Age			
A2	Gender	Mentioned	Not mentioned	
A3	Weight	Mentioned	Not mentioned	
B	Clinical details (Total Score 2)			Score section B
	Score 1: If B1 and B5 are mentioned, and any of the other criteria (B2, B3, B4, B6) and B7 are not mentioned Score 2: If B1- B6 and/or B7 is mentioned			
B1	Presenting signs and symptoms	Mentioned	Not mentioned	
B2	Duration of illness	Mentioned	Not mentioned	
B3	Medical history (any chronic illness)	Mentioned	Not mentioned	
B4	Previous treatment history	Mentioned	Not mentioned	
B5	Lab investigations (if applicable)	Mentioned	Not mentioned	
B6	Culture susceptibility testing (if applicable)	Mentioned	Not mentioned	
B7	Diagnosis (provisional/final)	Mentioned	Not mentioned	

Contd...

C	Treatment details (total score 9)			Score Section C
	Scoring criteria: Score individually for each question in section C (0 to 1) if score B is 1 or 2			
C1	Is there an indication for antibiotic therapy?	0=Not indicated	1=Indicated	
C2	Is most appropriate spectrum of antibiotic is prescribed?	0=No	1=Yes	
C3	Is the dosage correct?	0= Incorrect/ No information	1=Correct	
C4	Is the frequency correct?	0=Incorrect/ No information	1=Correct	
C5	Is the duration correct?	0=Incorrect/ No information	1=Correct	
C6	Is the route of administration of antibiotics, correct?	0=Incorrect/ No information	1=Correct	
C7	Are the instructions for the consumption of antibiotics, correct?	0=Incorrect/ No information	1=Correct	
C8	Are the drug allergies mentioned?	0= No information	1= Correctly mentioned/ Not applicable	
C9	Has the follow-up instructions (for review of the patient's condition) been given?	0= No	1= Yes/Not applicable	

Total score: Score section A + Score section B + Score of each question in section C
*Category of rationality assessment
High: Score 11 to 13
Medium: Score 8 to 10
Low: Score less than 8