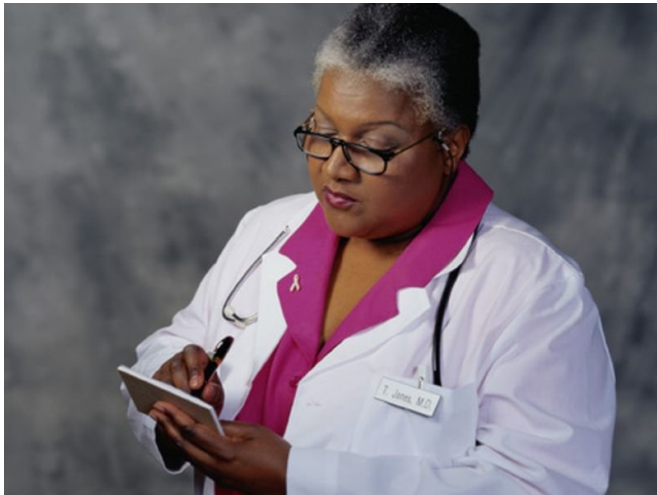


Patient, provider characteristics tied to unnecessary antibiotic Rx

5 February 2018



providers aged ≥30 years seeing [pediatric patients](#).

"Future research should target antibiotic stewardship programs to specific patient and provider populations to reduce inappropriate prescribing compared to a 'one size fits all' approach," the authors write.

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(HealthDay)—Patient, practice, and provider characteristics are associated with inappropriate antimicrobial prescribing in the outpatient setting, according to a study published online Jan. 30 in *Infection Control & Hospital Epidemiology*.

Monica L. Schmidt, Ph.D., M.P.H., from Carolinas HealthCare System in Charlotte, N.C., and colleagues assessed data from 448,990 outpatient visits to one health system's urgent care, family medicine, internal medicine, and [pediatric practices](#) for common upper respiratory conditions that should not require antibiotics (January 2014 through May 2016).

The researchers found that the overall prescribing rate in the study cohort was 407 per 1,000 visits. Adult patients seen by an advanced practice practitioner were 15 percent more likely to receive an antimicrobial compared to those seen by a physician provider, after adjustment. Older providers seeing pediatric patients were four times more likely to prescribe an antimicrobial versus

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