

# Pre-Assessment

The following survey is meant to assess both your comfort and knowledge related to antimicrobial stewardship. These answers are not part of any Lurie Children's Hospital formal review process and will be used for research purposes only to assess efficacy of the Antimicrobial Stewardship APP Teaching curriculum:

Thank you for your participation!

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Completing the survey is voluntary and any question may be skipped

The purpose of this study is to assess methods of teaching antimicrobial stewardship skills to APP's at Lurie Children's Hospital

Any anonymous information from the survey, once entered into the database cannot be removed

There are no perceived risks in participating, however given that email will be collected on the Redcap database, if that database was compromised in some way, this information could be disseminated

By filling out the survey, consent is implied to be a participant in the study

Contact Information: sparzenjohnson@luriechildrens.org

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Upon completion of this survey, a second assessment will be sent out to you in one week and in six months to the email included. Although you will receive emails to complete follow up surveys, these emails will not be reviewed and individual responses will never be reviewed separately. All results will be assessed in aggregate.

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- 1) Email: \_\_\_\_\_
- 
- 2) What is your current job title in the hospital?  APN  
 PA  
 RN  
 Other
- 
- 3) How many years (to the closest year) have you worked in your current role? \_\_\_\_\_

4) What division within the hospital system are you a member of?

- Adolescent & Young Adult Medicine
- Advanced General Pediatrics & Primary Care
- Allergy & Immunology
- Anesthesiology
- Brain Tumor Program
- Cancer & Blood Disorders
- Cardiology & Cardiac Surgery
- Cleft Lip & Palate Repair Program
- Critical Care
- Dermatology
- Developmental & Behavioral Pediatrics
- Emergency Medicine
- Endocrinology
- ENT
- Epilepsy Program
- Gastroenterology & GI Surgery
- Gender & Sex Development Program
- Birth Defects & Metabolism
- Hospital-Based Medicine
- Infectious Diseases
- Medical Imaging
- Neonatology
- Nephrology
- Neurology
- Neurosurgery
- Ophthalmology
- Orthopaedics
- Palliative Care
- Plastic & Reconstructive Surgery
- Primary Care Pediatrics
- Psychiatry
- Pulmonary Medicine
- Rheumatology
- Spina Bifida Center
- Sports Medicine
- Surgery
- Transplant Surgery
- Urology
- Wellness & Weight Management Program

**For the following statements, indicate how effective your institution is in teaching you:**

	Not at all effective	Somewhat effective	Moderately effective	Very effective	Extremely effective	N/A
5) The importance of antimicrobial stewardship in the inpatient setting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6) The importance of antimicrobial stewardship in the outpatient setting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7) The importance of educating patients on antimicrobial stewardship	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**For the following statements, indicate how confident you are in your ability to:**

	Not at all confident	Somewhat confident	Moderately confident	Very confident	Extremely confident	N/A
8) Practice antimicrobial stewardship in the inpatient setting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
9) Practice antimicrobial stewardship in the outpatient setting	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
10) Choose the right empiric antibiotics prior to culture results	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
11) Interpret antibiotic susceptibility results for a bacterial culture	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**The following questions are related to knowledge about antimicrobial stewardship and appropriate antibiotic use:**

- 12) What is an antibiogram?
- a. A standard 1g dose of antibiotics
  - b. A collection of susceptibility results for bacteria
  - c. A collection of appropriate dosing for antibiotics
  - d. A collection of which bacteria cause common infections
  - e. A collection of which antibiotics to use for common infections
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- 13) The minimum inhibitory concentration (MIC) helps determine what?
- a. The highest concentration of antibiotic that inhibits growth of bacteria
  - b. The lowest concentration of antibiotic that inhibits growth of bacteria
  - c. The lowest concentration of antibiotic that kills bacteria
  - d. The highest concentration of antiviral that inhibits growth of viruses
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- 14) What are the two most common bacteria that cause cellulitis?
- a. Staphylococcus aureus and Group A Streptococcus
  - b. Staphylococcus aureus and Streptococcus pneumoniae
  - c. Staphylococcus epidermidis and Group A Streptococcus
  - d. Staphylococcus epidermidis and Streptococcus pneumoniae
  - e. Staphylococcus aureus and Staphylococcus epidermidis
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- 15) According to resistance patterns from Lurie Children's Hospital, which of these antibiotics covers a higher percentage of Staphylococcus aureus bacteria isolates
- a. Cephalexin
  - b. Clindamycin
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- 16) What is the most appropriate first-line antibiotics for simple community-acquired cellulitis?
- a. Clindamycin
  - b. Cephalexin (Keflex)
  - c. Linezolid
  - d. TMP-SMX (Bactrim)
  - e. Ceftriaxone

17) Which of the following statements about the list of antibiotic susceptibilities for an isolate of *Staphylococcus aureus* is true?

Antibiotic MIC Interpretation

Amoxicillin/Clavulanate  $\leq 4/2$  Susceptible

Ampicillin/Sulbactam  $\leq 8/4$  Susceptible

Cefazolin  $\leq 4$  Susceptible

Clindamycin  $\leq 0.25$  Susceptible

Gentamicin  $\leq 1$  Susceptible

Levofloxacin  $\leq 0.5$  Susceptible

Vancomycin 1 Susceptible

Meropenem  $\leq 2$  Susceptible

Oxacillin  $\leq 0.25$  Susceptible

Penicillin 8 Resistant

TMP-SMX  $\leq 0.5/9.5$  Susceptible

Daptomycin 0.5 Susceptible

Linezolid 2 Susceptible

Tetracycline  $\leq 1$  Susceptible

- a. Linezolid (MIC 2) is inferior to vancomycin (MIC 1) for this infection because of a higher MIC
- b. This bacterium can be characterized as methicillin resistant *Staphylococcus aureus* (MRSA)
- c. Daptomycin (MIC 0.5) is superior to vancomycin (MIC 1) for this infection because of a lower MIC
- d. Clindamycin and cefazolin would both be effective in treating this infection
- e. Levofloxacin is a better choice for this infection because it has the narrowest spectrum of activity