

# 您在抗生素管理 (AMS) 中的角色

人人皆可參與 AMS，為減少抗生素抗藥性 (AMR) 出一分力

## 醫師<sup>1</sup>



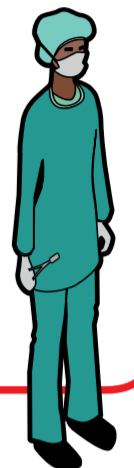
- 在開立抗生素處方前，安排適當且必要的實驗室檢測<sup>2</sup>
- 在開立抗生素處方後滿 48 小時進行審查<sup>3</sup>
  - 感染是否對治療產生反應？
  - 病患接受的抗生素、劑量及給藥途徑是否正確？
  - 治療應持續多久？
  - 對於繼續使用經驗性治療或目標抗生素，是否有足夠數據提供指引？
  - 是否可以使用更具針對性的藥物？
- 制定處方指引與臨床路徑<sup>4</sup>
- 訓練其他員工有關 AMS 的知識<sup>4</sup>



## 臨床微生物學家<sup>1</sup>



- 提供準確且即時的培養、血清學及快速檢測結果報告
- 準備並協助發表抗生素敏感性報告<sup>4</sup>
- 建立本地抗藥性圖譜以指引經驗性治療<sup>4</sup>
- 提供抗藥性微生物的監測數據<sup>4</sup>



## 感染預防管制專員<sup>1</sup>



- 監測並預防醫療照護相關感染<sup>3</sup>
- 向所有醫療照護人員宣導包括 AMS 在內的感染管制概念與程序



## 藥師<sup>1</sup>



- 特定抗生素需經由藥師事前許可<sup>4,5</sup>
- 進行稽核、回顧與回饋<sup>4</sup>
- 識別調整藥物劑量、進行降階治療，及由靜脈注射治療轉換為口服治療的最佳時機<sup>4,5</sup>
- 確保僅發放有處方的藥物
- 訓練其他員工有關 AMS 的知識<sup>4,5</sup>



## 醫院管理者



- 提供資源與政策支持<sup>4</sup>



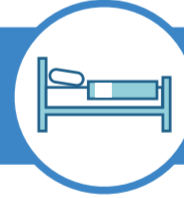
## 護理師



- 鼓勵負責任地使用抗生素<sup>6,7</sup>
- 監測不良事件<sup>6,8</sup>
- 實施感染預防和管制措施<sup>6,8</sup>
- 教育新進病房員工和病患關於 AMR 與衛生重要性的知識<sup>6,7</sup>



## 病患



- 接受有關 AMR 與正確服用抗生素的教育<sup>9</sup>
- 遵守正確洗手及其他衛生措施<sup>9</sup>



### 參考資料：

1. Society for Healthcare Epidemiology of America, Infectious Diseases Society of America, Pediatric Infectious Diseases Society. Policy statement on antimicrobial stewardship by the Society for Healthcare Epidemiology of America (SHEA), the Infectious Diseases Society of America (IDSA), and the Pediatric Infectious Diseases Society (PIDS). *Infect Control Hosp Epidemiol* 2012;33:322-327.
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