

Remote prescriptions of antimicrobials during COVID-19

Special Care Dental Service
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Abstract

At the outset of Covid 19 pandemic, prescribing rates for antimicrobials (e.g. antibiotics for bacterial infections) to emergency patients did not escalate from normal levels despite the need to reduce face to face dentistry to the minimum.

This suggests that clinicians have restricted prescribing to warranted conditions/signs and symptoms and remained mindful of antimicrobial stewardship.

Background

The Special Care Dental Service provided an urgent dental Care hub for the treatment of emergency dental patients both previously seen in the service and referred in from General Dental Practice from the beginning of the Covid 19 pandemic.

Patients were triaged remotely, and following national guidance face to face appointments were avoided where possible. This meant that antibiotics were prescribed for patients without the usual dental examination.

Prior to COVID, antimicrobials were not prescribed without seeing the patient; clinicians expressed concerns about antimicrobial stewardship.

As a service, we reviewed and discussed guidance from sources including the Faculty of General Dental Practice and the Scottish Dental Clinical Effectiveness Programme to develop a local policy on the provision of antimicrobials during COVID.

Context

Previous service audits showed that 27% of patients attending with an emergency received antibiotics. This reflects that the service is largely a surgical one and drainage or extraction are the treatments of choice for dental infections.

Source and method

Data was collected by three dentists from the electronic records of all emergency patients triaged between 23.3.20 to 7.05.20.

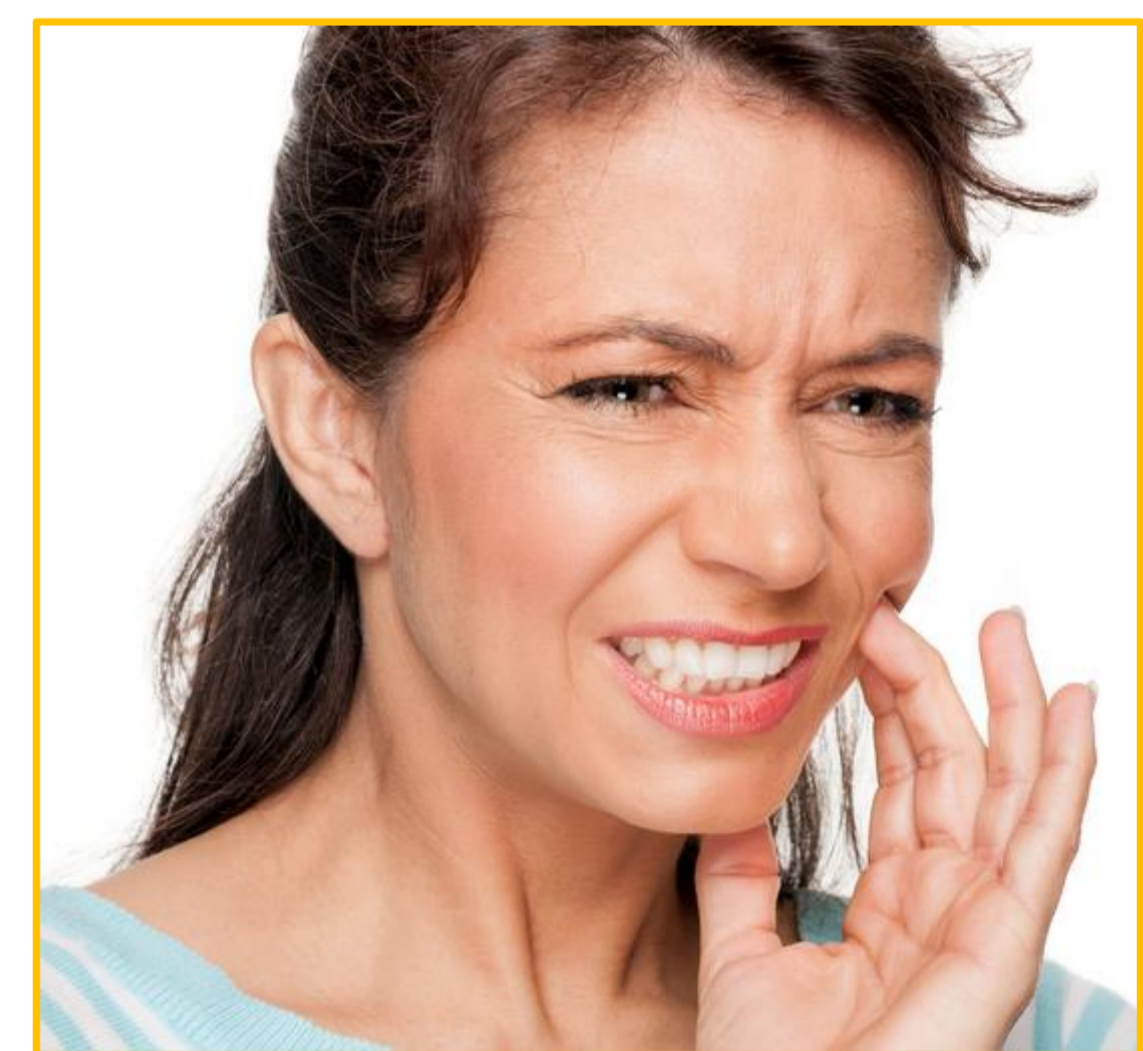
Patients were identified from the initial triage contact spread sheet and then records audited against standards.

It was identified early during data collection that reviewing patients would be easier if antibiotic provision was added to the initial contact triage sheet. The total number of patients triaged and the number of antibiotic scripts issued was recorded.

Findings

477 dental patients contacted the service during the audit period. 127 courses of antibiotics had been prescribed to patients; this represents 27% of the emergency patients. The data has been split and analysed in two parts

	Number of patients	Number of scripts	Percentage of patients issued with antibiotics
Special Care Dentist patients	338	119	35%
General Dental Practitioner referrals	139	8	6%



Discussion

Prescription frequency was lower for General dentist referred (GDP)/unregistered patients (6%); this is likely to reflect that these patients will have already been triaged by the with GDP before referring on for urgent treatment.

In both groups, the main issue in prescribing was the omission to record a provisional diagnosis to fulfil record keeping requirements and to justify the prescription; despite signs and symptoms being recorded that did justify antimicrobials.

Conclusion

Antimicrobial prescribing rates have not escalated from normal levels despite the need to reduce face to face dentistry to the minimum. This suggests that clinicians have restricted prescribing to warranted conditions/signs and symptoms and assures that they remained mindful of antimicrobial stewardship. Staff were reminded immediately about the need to record a provisional diagnosis in the record and the triage sheet was updated to further support this. Staff were also provided with an updated antimicrobial prescribing aide memoire in line with guidance.