



Clinical Update

For Telephone Triage Nurses

September 2017

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Mark Your Calendar!

November 13-19th is designated as the annual *Antibiotic Awareness Week* in the U.S. Consider highlighting some activity in your call center during that week to call attention to the growing threat of antibiotic resistance.

When Antibiotics are Not Needed: How to Support and Educate Callers

Antibiotic Resistance:

Antibiotic resistance is emerging as a serious health threat in the U.S. and worldwide. One of the main factors contributing to increased antibiotic resistance is misuse and overuse of antibiotics. This is especially true for common respiratory illnesses such as colds, coughs, and sore throats (1, 2, 3). One driving force for antibiotic overuse is consumer demand for antibiotics, often based on misconceptions about the benefits and lack of knowledge about the potential harms. The CDC and its health care partners (*Get Smart* program) are trying to reduce consumer demand by better educating the public about appropriate antibiotic use. Call centers are in a unique position to support this work as they are often the first point of access to care for patients. By providing accurate information upfront, triage nurses can help patients adopt more realistic treatment expectations when it comes to antibiotics.

Table 1 outlines common respiratory problems that often cause people to seek health care or call for triage. In many cases, the cause is a virus. When a patient's symptoms are consistent with an uncomplicated viral infection, the triage nurse's role is to educate the caller about expected symptoms/duration and provide home care advice. However, sometimes this is not enough. Some callers still insist an antibiotic is needed. They may believe the antibiotic will help them get better faster or prevent their symptoms from getting worse. Sometimes the caller demands that the provider call in an antibiotic by phone. In these situations, additional information and supportive communication strategies may be helpful (see page 2). Taking these additional steps could help break down common misconceptions about antibiotics. These extra steps might also help reduce unnecessary "Call PCP" overrides or referrals to be seen.

Table 1: Common Acute Respiratory Problems and Key Points

Problem	Key Points
Colds	Colds are caused by a virus. Healthy kids get about 6 colds per year (adults 2-4/year). Having yellow nasal drainage does not mean you have a sinus infection. Antibiotics may be needed if a bacterial infection (ear or sinus infection) develops.
Sore Throat	The most common cause of a sore throat is a virus. About 20% of sore throats are caused by strep bacteria. The only way to know for sure if a sore throat is caused by strep is to do a strep test.
Cough (Bronchitis)	New coughs and cases of bronchitis are most often caused by a virus. These coughs can last up to 2-3 weeks or more. Coughing up yellow or green phlegm does not mean you have a bacterial infection. Less often, cough is due to a bacterial cause (e.g., pertussis, bacterial pneumonia).
Earache	Ear infections can be caused by virus or bacteria. Usually the doctor can tell the difference by looking at the eardrum and will determine if an antibiotic is needed.
Influenza (Flu)	Flu is caused by different types of flu virus. There are a few anti-viral drugs that can be used to treat flu in some situations. An example is Tamiflu for severe flu or for high risk patients.

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Communication Strategies and Talking Points

We recommend using the following approach when a patient has symptoms that are likely caused by virus, but the patient (or parent) still feels an antibiotic is needed. In these situations, it may be helpful for the nurse to provide care advice that will help relieve symptoms (positive advice) **AND** rationale for why antibiotics should not be used (negative treatment). In pediatric outpatient visits for acute respiratory infections, this approach was associated with better parent visit ratings and decreased antibiotic prescribing (4).

Acknowledge (Provide Empathy)	Acknowledge the caller's concerns and symptoms. Examples: <ul style="list-style-type: none"> • <i>It is hard to see your child not feeling well. You want to do everything you can to make your child feel better.</i> • <i>I appreciate your frustration. Your cough has been very bothersome for over a week now. Coughs with a viral infection can sometimes last 2-3 weeks or more.</i>
Explain Likely Cause Is Viral	Consider using the plain language talking points in Table 1 and those below to explain why the cause is likely viral and why antibiotics are not needed. <ul style="list-style-type: none"> • <i>Antibiotics are strong drugs that help kill bacteria, a type of germ. However, antibiotics do not kill viruses. If you have an infection caused by a virus, an antibiotic will not help. It won't kill the virus or stop it from growing.</i> • <i>It will not make you feel better.</i> • <i>It will not help you get over your infection sooner.</i> • <i>It will not keep you from spreading germs to others.</i>
Provide Care Advice	Emphasize what can be done that will help relieve symptoms. Examples: <ul style="list-style-type: none"> • <i>This is the best treatment for your symptoms right now . . . (e.g., humidification and nasal saline drops for stuffy nose, OTC fever and pain medicine, etc.)</i>
Explain The Potential Harms Of Antibiotic Misuse	Consider using the plain language talking points below to explain potential harms: <ul style="list-style-type: none"> • <i>Taking an antibiotic when you just have a virus can be harmful.</i> • <i>The antibiotic may affect your body's normal cells. This can cause side effects such as diarrhea, stomach pain, rashes, or yeast infections.</i> • <i>Antibiotics can also cause serious allergic reactions.</i> <p>Here is some more information that you could share:</p> <ul style="list-style-type: none"> • <i>Antibiotic resistance is a serious problem.</i> • <i>When a person takes an antibiotic, some germs (bacteria) in the body can become immune to the drug. These stronger, immune bacteria continue to grow.</i> • <i>These germs are called resistant bacteria because they resist being killed by antibiotics. These resistant bacteria can later cause serious infections that are very hard to treat, both in you and others.</i>
Provide Safety Net	Always direct the caller to call back if symptoms worsen or do not get better within the expected time frame. Use the Call Back If statements and Expected Course information in the guideline care advice sections. If the patient can't be reassured or still requests an antibiotic, refer the patient in to be seen by the PCP when possible. Explain that the PCP will determine if an antibiotic is needed based on the patient's exam.

References

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4. Mangione-Smith R, Zhou C, Robinson JD, Taylor JA, et al. Communication practices and antibiotic use for acute respiratory tract infections in children. *Annals of Family Medicine*. May/June 2015; 13(3): 221-227.

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