

Provider Talking Points on Antibiotic Use

IMPROVE COMMUNICATION AND PRESERVE PATIENT SATISFACTION

Antibiotic use is a major driver of antibiotic resistance, and antibiotic-resistant infections account for over 2 million illnesses and 23,000 deaths annually in the United States. To help address patient pressure to prescribe antibiotics when they are not necessary (e.g., viral infections, such as the cold or flu), clinicians can use effective communication strategies, contingency plans, or provide positive treatment recommendations by following the talking points and tips below.

Strategies and Examples for Counseling Patients

Communication Strategy	Examples
Explain why antibiotics are not needed	<p>“This is a nasty cold, and colds are caused by viruses, so antibiotics won’t make you feel better faster.”</p> <p>“I’m happy to tell you that you do not need an antibiotic! Your strep test is negative, so your sore throat is caused by a virus, and antibiotics won’t help.”</p> <p>“Unfortunately you have a chest cold, and antibiotics won’t help.”</p> <p>Tip: Did you know?</p> <ul style="list-style-type: none"> Patients are less likely to expect antibiotics for “chest colds” than for “bronchitis.” Patients are willing to hear that antibiotics are not needed if the message is combined with how to help them feel better.
Positive treatment recommendations	<p>“Putting a warm compress over your nose and taking ibuprofen will help with your sinus pain and pressure.”</p> <p>“Honey can soothe your child’s cough and help him sleep better.”</p> <p>Tip: Did you know?</p> <ul style="list-style-type: none"> Positive treatment recommendations should always be combined with explanations for why antibiotics are not needed.
Contingency plan	<p>“If you are not better in three to four days, call me or schedule an appointment and we can reassess the need for antibiotics.”</p> <p>“If your child is still sick in a week or develops a fever, come back and see me.”</p>
Delayed antibiotic prescriptions	<p>“Your child has an ear infection that will likely clear up on its own. If the ear still hurts in two days or gets worse, call me or schedule an appointment so we can recheck the ear.”</p> <p>“Your child has an ear infection that will likely clear up on its own. Just in case it does not, here is an antibiotic prescription. Wait to fill this in two days only if the ear still hurts or if your child gets worse.”</p> <p>Tip: Did you know?</p> <ul style="list-style-type: none"> When using delayed prescriptions, write an expiration date on the prescriptions (i.e., five to ten days in the future) so it can be filled only during the watchful waiting period and not a few months later.

This table was adapted from a Centers for Disease Control and Prevention editorial published in the August 1, 2016, issue of American Family Physician. [How to Prescribe Fewer Unnecessary Antibiotics: Talking Points That Work with Patients and Their Families \(https://www.aafp.org/afp/2016/0801/p200.html\)](https://www.aafp.org/afp/2016/0801/p200.html). Find additional resources at [Minnesota Antimicrobial Stewardship Program Toolkit for Outpatient Clinics \(https://www.health.state.mn.us/diseases/antibioticresistance/hcp/asp/out/index.html\)](https://www.health.state.mn.us/diseases/antibioticresistance/hcp/asp/out/index.html).