AUTHOR REPLY



Reply to "Integrated Stewardship Model Comprising Antimicrobial, Infection Prevention, and Diagnostic Stewardship (AID Stewardship)"

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Kevin Messacar,^{a,b} Sarah K. Parker,^b James K. Todd,^b Samuel R. Dominguez^b Sections of Hospital Medicine^a and Infectious Diseases,^b Department of Pediatrics, Children's Hospital Colorado/University of Colorado School of Medicine, Aurora, Colorado, USA

We wholeheartedly agree with Dik et al. (1) that a combined approach is the future of stewardship and commend the authors for their innovative model. Incorporating infection control and epidemiology into an integrated diagnostic and antimicrobial stewardship model further capitalizes upon the potential benefits of rapid diagnostic technologies. As we state in our paper, stakeholder involvement from diverse perspectives, including infection control, should guide the design of protocols and algorithms to utilize these tests and respond to results. At our institution, daily microbiology rounds bring together the microbiology laboratory, the infectious disease consultation service, antimicrobial stewardship, and infection control for a multidisciplinary discussion of important test results. In our experience, as in that described by Dik et al. (1), this multidisciplinary approach to rapid diagnostic testing has led to prompt recognition of outbreaks and assists in guiding patient isolation protocols as well as improving the use of microbiology laboratory tests and antimicrobial therapy. We look forward to seeing continued studies systematically evaluating the clinical impact of rapid diagnostics using this approach.

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Address correspondence to Kevin Messacar, kevin.messacar@childrenscolorado.org.

This is a response to a letter by Dik et al. (https://doi.org/10.1128/JCM.01283-17).

REFERENCE

1. Dik JH, Poelman R, Friedrich AW, Niesters HGM, Rossen JWA, Sinha B. 2017. Integrated stewardship model comprising antimicrobial, infection

prevention, and diagnostic stewardship (AID stewardship). J Clin Microbiol 55:3306–3307. https://doi.org/10.1128/JCM.01283-17.