Supplementary file

Table 1: Ethiopia's healthcare system profile

S.N	Variable	Response
1.	ISO code of Ethiopia	ETH
2.	Total number of hospitals at any level (tertiary, secondary, primary and specialized) in the country.	464
3.	Number of public hospitals in the country.	378
4.	Estimated number of private hospitals in the country	86
5.	Estimated number of tertiary level (university teaching and specialized hospital) hospitals in the country.	25
6.	Number of secondary level (General) hospitals in the country.	58
7.	Estimated number of primary hospitals in the country.	381
8.	Is Hospital grouping exist in the country	No
9.	Hospital survey sampling strategy	Convenience sampling
10	Number of hospitals for the survey	10
11	Does a national treatment guideline exist?	Yes
12	Does facility-based treatment guidelines exist	No
13	Does a national hospital ASP exists	Yes

Table 2: The 10 surveyed hospitals profile

S.N	Variable	Mean ± SD	Median(Range)
1.	Number of beds in the surveyed hospitals	443 ± 164	410(223-700)
2.	Number of acute care beds	349 ± 134	314(186-600)
3.	Number of intensive care unit beds	34 ± 24	32(6-82)
4.	Number of high risk beds	22 ± 19	18(0-51)
5.	Annual overall admissions in the hospitals in the previous physical year, i.e. 2012 E.C.#	16471 ± 7405	13885 (7025- 30456)
6.	Overall patient days in the hospitals for the previous physical year i.e. 2012 E.C.*	94679 ± 45583	79254(48931- 176,742)
7.	Average length of hospital stay in days	6.53 ± 1.48	6.0(4.8-10.2)
8.	Sum of the number of beds of the wards included in the survey (Total= 2628 beds)	293 ± 153	214(103-541)
9.	Number of patients eligible for inclusion in the survey. (Total= 2209 patients)	240 ± 115	203(103-474)
10.	Number of patients included in the survey (Total= 1820).	182± 61	161(103-325)

#emergency admission over 24 hours was not included. * **Patient days:** over all admission * average length of hospital stay.

Current and past medical history, January 7-29, 2021 G.C.

Variable		Number of	Percentage
		patients	
Current hospitalization malarial status	Yes	33	1.8
	No	1439	79.1
	Unknown	348	19.1
Previous malarial treatment history	Yes	41	2.3
	No	1517	83.3
	Unknown	262	14.4
Active tuberculosis	Yes	76	4.2

	No	1499	82.4
	Unknown	245	13.4
COPD	Yes	28	1.5
	No	1792	98.5
Malnutrition	Yes	277	15.2
	No	1543	84.8
McCabe Score	RF	86	4.7
	UF	258	14.2
	NF	1476	81.1
Referred from another hospital		501	27.5
Referred from another facility other than hospital		447	25.1
Hospitalization history within 90 days		562	30.9

RF= Rapidly fatal, UF= Ultimately fatal, NF= Non-fatal, COPD= Chronic obstructive pulmonary disease, RVI= Retroviral infection

Table 3: Existing surveyed hospitals capacity to promote rational use of antibiotics

Variable	Yes, N(%)
Hospital infrastructure	
Functioning Drugs and Therapeutics Committee	8(80.0)
Functioning Infection Prevention & Control Committee	10(100.0)
Microbiological laboratory service	8(80.0)
Availability of a formal organizational structure responsible for ASP	10(100.0)
A physician ASP leader	10(100.0)
Availability of a ASP team	7(70.0)
Availability of functional ASP in the hospital	0(0.0)
Availability of pharmacist responsible for ensuring appropriate antibiotic use	9(90.0)
Incentive package for dedicated staff for ASP	0(0.0)
IT support for ASP	0(0.0)
Availability of outpatient parenteral antibiotic therapy (OPAT) unit	0(0.0)
Policy and practice	
Availability of antibiotic formulary (including unrestricted and restricted antibiotics) updated continuously	0(0.0)
Antibiotic formulary based on the Essential Drug List	0(0.0)
Institutional antibiotic guideline	3(30.0)
Institutional antibiotic guidelines based on local Antibiogram	1(10.0)

A written policy that requires prescribers to document an indication in the medical records		2(20.0)	
Preauthorization policy		1(10.0)	
Post-prescription review service			7(70.0)
Monitoring and feedback			
Monitoring of antibiotics indications on me	dical record		5(50.0)
Monitoring of surgical antibiotic prophylaxi	s choice and duration		2(20.0)
Results of antibiotic audits are communicated directly with prescribers		7(70.0)	
Monitor of antibiotic use			1(10.0)
Monitoring of antibiotic use by DDD or DOT	•		0(0.0)
Antibiotic use reported by hospital activity denominator		0(0.0)	
Annual report focused on ASP in the past year		2(20.0)	
A cumulative antibiotic susceptibility report in the past year		3(30.0)	
A national antibiotic resistance surveillance program participation		4(40.0)	
A national antibiotic use surveillance program participation		0(0.0)	
Number of blood cultures done in the past year, N= 7- hospitals		Mean ± SD	2625 ± 3307
		Median(Range) IQR	1707(452-9860), 680-2786
List of antibiotics out of stock at the facility during the survey period.	Cefepime 1g, Meropenam 1gm, Metronidazole 0.5g hospitals. Vancomycin 1g	l n 1g and 0.5g, Piperacillin-Tazobactam and Gentamycin 80mg injections wer g and 0.5g was also stock out at two su	4.5g, Ciprofloxacin 0.4mg , ceftazidime e stock out in all of the surveyed rveyed hospitals.

Table 5: Antibiotics prescription and indication

Variable		Number	Percentage
Total number of ant	3192		
Number of antibiotics	s prescribed/ patient since admission: N= 1410	patients	
	1	379	26.9
	2	632	44.8
	3	203	14.3
	4	117	8.3
	5	42	3.0
	6	19	1.3
	Others*	18	1.2
Overall antibiotics pr	escribed on the day of survey	2058	
Number of antibiotics	s given/patient at a time of survey: N= 1162 pati	ents	
	1	432	37.1
	2	585	50.4
	3	124	10.7
	4	18	1.6
	5	3	0.3
Route of administrati	on: N= 2059 antibiotics		
	Oral	201	9.8
	Parenteral	1858	90.2
Antibiotics prescripti			
	Brand	61	2.9
	Generic	1998	97.1
Indication of antibiot	ics written on patient notes: N= 1162 patients		
	No	51	4.4
	Yes	1111	95.6
Antibiotics duration i	n days (From time of initiation to survey date):M	ledian: 5 days; l	QR: 3-10 days
Type of treatment**,	N=866 patients		
Empiric		837	96.7
Definiti	ve	29	3.3
Guideline compliance			
Yes		637	54.8
No		255	21.9
Not asse	essable	237	20.4
No infor	rmation	33	2.8
Prescriber type			
General	practitioner	178	15.3
Residen	it	949	81.7
Speciali	st	35	3.0
*			

***Others:** 7 antibiotics= 5 patients; 8 antibiotics=8 patients; 9 antibiotics=3 patients; 10 antibiotics=

1 patient; 12 antibiotics=1 patient; **Is only for patients whose antibiotics indication is for HCAIs and CAIs