



Antibiotic Time-Out — 48 to 72 Hours

Every antibiotic is reviewed at 48–72 hours: stop, narrow, switch to oral, or continue with a stop date. The five questions, on the drug chart

ANTIBIOTIC TIME-OUT — 48–72 h Started: _____ Review due: _____ Is there still evidence of bacterial infection? ☐ Yes ☐ No → STOP Cultures / results? ☐ Positive → target ☐ Negative ☐ Not sent Can the spectrum be narrowed (Watch → Access)? ☐ Yes ☐ No Can it switch to oral? (eating, improving, no deep infection) ☐ Yes ☐ No Stop date written on chart: _____ (total days: ____) Decision: ☐ Stop ☐ Narrow ☐ IV → oral ☐ Continue to _____ Signed: _____	ANTIBIOTIC TIME-OUT — 48–72 h Started: _____ Review due: _____ Is there still evidence of bacterial infection? ☐ Yes ☐ No → STOP Cultures / results? ☐ Positive → target ☐ Negative ☐ Not sent Can the spectrum be narrowed (Watch → Access)? ☐ Yes ☐ No Can it switch to oral? (eating, improving, no deep infection) ☐ Yes ☐ No Stop date written on chart: _____ (total days: ____) Decision: ☐ Stop ☐ Narrow ☐ IV → oral ☐ Continue to _____ Signed: _____
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Why 48–72 hours. By then the patient has declared a direction and the cultures are back. Most unnecessary antibiotic days happen after this point: courses that continue because nobody asked. Half of hospital antibiotic use can be stopped, narrowed or switched at this review. Cut, laminate or print as stickers.

ASF standards: Standard 4 — antimicrobial stewardship (documented 48–72 h review; means of verification: chart audit)