



TOOLKIT 11 · ANTIMICROBIAL STEWARDSHIP · TOOL 1 OF 5

AWaRe — Access, Watch, Reserve: Prescriber Pocket Card

The WHO classification that tells you which antibiotic to reach for first, which to guard, and which to keep for last. Target: at least 60% of use from the Access group

ACCESS	WATCH	RESERVE
First and second choice. Narrow spectrum, low resistance potential. Should be ≥ 60 % of all antibiotic use.	Higher resistance potential. Use only for the indications listed in local guidelines; review at 48–72 h.	Last resort, for confirmed or suspected multidrug-resistant infection. Prescribed only with infectious-disease or stewardship authorisation.
Amoxicillin · amoxicillin-clavulanate · ampicillin · benzylpenicillin · cloxacillin/flucloxacillin · cefalexin · cefazolin · doxycycline · gentamicin · amikacin · metronidazole · nitrofurantoin · trimethoprim-sulfamethoxazole · clindamycin	Ceftriaxone · cefotaxime · cefuroxime · cefixime · ciprofloxacin · levofloxacin · moxifloxacin · azithromycin · clarithromycin · piperacillin-tazobactam · meropenem · imipenem · vancomycin · teicoplanin	Colistin · polymyxin B · linezolid · tigecycline · ceftazidime-avibactam · daptomycin · fosfomycin IV · aztreonam · cefiderocol

Common infections — Access first choices (adults, uncomplicated; adjust to local resistance data)

Infection	First choice	Second choice	Duration
Community pneumonia, mild	Amoxicillin	Doxycycline	5 days
Cystitis (women)	Nitrofurantoin	Trimethoprim-sulfamethoxazole	3–5 days
Pyelonephritis, mild	Amoxicillin-clavulanate (oral)	Gentamicin ± amoxicillin (IV)	7 days
Cellulitis	Cloxacillin / flucloxacillin	Cefalexin	5 days
Pharyngitis (strep confirmed)	Phenoxymethylpenicillin / amoxicillin	Cefalexin	10 days
Otitis media (child)	Amoxicillin	Amoxicillin-clavulanate	5 days
Surgical prophylaxis (clean)	Cefazolin, single dose within 60 min	—	Single dose
Acute bronchitis, common cold, viral pharyngitis	No antibiotic	No antibiotic	—

Adapted from the WHO AWaRe classification and the WHO AWaRe antibiotic book (2022). Local first choices must be confirmed by the facility's antimicrobial committee against local resistance data.

ASF standards: Standard 4 — antimicrobial stewardship (AWaRe adopted; Access share measured); Priority Practices