Antimicrobial Stewardship Education for Medical Students

To the Editor—We commend Dr Abbo and colleagues for their study, which highlights the need to standardize and enhance appropriate antimicrobial prescribing and stewardship curricula in US medical student education [1]. Ninety percent of surveyed fourth-year medical students felt that they would like more education on the appropriate use of antimicrobials; only one-third felt adequately prepared to apply principles of appropriate antimicrobial prescribing. The authors found significant heterogeneity in how students from the 3 medical schools accessed appropriate antimicrobial prescribing information. Of concern, the study also identified gaps in medical students’ knowledge regarding antimicrobial management of common infections. Their findings confirm and precisely describe our anecdotal experience that medical students desire, and would benefit from, organized and formal instruction on appropriate antibiotic use.

To help medical schools address this need, Wake Forest School of Medicine, the Centers for Disease Control and Prevention (CDC), and the Association of American Medical Colleges (AAMC) recently developed and piloted an antimicrobial stewardship curriculum for use in US medical schools. This curriculum contains materials for both the preclinical and clinical years of instruction. The preclinical material consists of three 45-minute didactic slide presentations with facilitator notes entitled “Antibiotic Resistance and Its Relationship to Antibiotic Use,” “Get Smart About Antibiotics: An Introduction to Prudent Antibiotic Use,” and “Common Respiratory Tract Infections: Evaluation and Therapy.” Corresponding exam questions are provided in US Medical Licensing Examination format. Prerecorded audio with slide presentations of each lecture is also available.

For the clinical years, the curriculum contains 5 small-group activities with facilitator guides that are intended for use during family medicine, internal medicine, surgery, pediatrics, and emergency medicine clerkships. The small-group activities highlight antibiotic stewardship principles through case-based scenarios and focus on the appropriate diagnosis and management of common infections where antibiotics are often misused in both the inpatient and outpatient arenas.

The curriculum materials are available for any medical school to use and can be accessed and downloaded free of charge at http://www.wakehealth.edu/AS-Curriculum.

Notes

Financial support. The medical school curriculum was developed with financial support from the CDC and AAMC.

Disclaimer. The views expressed in this letter are those of the authors and do not necessarily represent the official position of the CDC.

Potential conflicts of interest. All authors: No reported conflicts.

All authors have submitted the ICMJE Form for Disclosure of Potential Conflicts of Interest. Conflicts that the editors consider relevant to the content of the manuscript have been disclosed.

Vera P. Luther,1 Christopher A. Ohl,1 and Lauri A. Hicks2

1 Section on Infectious Diseases, Department of Internal Medicine, Wake Forest School of Medicine, Winston-Salem, North Carolina; and 2 Respiratory Diseases Branch, National Center for Immunization and Respiratory Diseases, Centers for Disease Control and Prevention, Atlanta, Georgia

Reference


Correspondence: Vera P. Luther, MD, Section on Infectious Diseases, Department of Internal Medicine, Wake Forest School of Medicine, 100 Medical Center Blvd, Winston-Salem, NC 27157 (vluther@wakehealth.edu).