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MEDICINE

Antibiotic Allergy Delabeling in Pediatric Infectious Disease Clinic: Missed Stewardship Opportunities

Katherine Vermilye MD, Brenda Tesini MD, Jessica Stern MD
Departments of Pediatrics and Internal Medicine, University of Rochester Medical Center

Background:

- Up to 10% of patients carry a penicillin (PCN) allergy label
- >90% of these patients can safely take PCNs
- Incorrect antibiotic allergy labels cause harm
 - broader spectrum antibiotic use
 - suboptimal therapy
 - increased adverse drug effects effects
- Low risk PCN and cephalosporin allergies can be challenged and delabeled by any clinician in outpatient offices

Objective:

- In a pediatric infectious diseases clinic, assess frequency and documentation of:
 - antibiotic allergy assessment
 - reaction documentation
 - delabeling discussion
 - delabeling action

Methods:

- Electronic medicals records (EMRs) reviewed from outpatient pediatric infectious diseases clinic visits, January 1, 2021 through April 30, 2021
- 90 outpatient visits with 80 unique patients
- Allergy information collected from both EMR allergy tab and clinical notes

**0 Patients Delabeled
During or After Clinic Visit**

Out of 16 Patient Encounters with Allergies:

Potential Low Risk Reactions: 12



Additional Allergy Info Gathered: 0



Sufficient Allergy Info to Risk Stratify: 2



Documentation Allergy was Addressed: 1

