

1 IN 3 ANTIBIOTIC PRESCRIPTIONS MAY BE UNNECESSARY

Antibiotic stewardship starts with better decisions right at the point of care.

The real problem isn't intent, it's uncertainty.

Antibiotics are being overused—and it's costing us



Acute respiratory infections are among the leading drivers of inappropriate prescribing²



>200M antibiotic prescriptions annually in outpatient settings, with 30-50% being unnecessary¹



Antibiotic resistance is one of the most urgent public health threats in the U.S.³

Overuse contributes to: → Drug-resistant infections → Increased healthcare costs → Avoidable adverse drug events

CDC estimates show 2.8M antibiotic resistant illnesses and 35,000 deaths each year in the US.⁵

WHY IT HAPPENS

Clinicians are forced to make fast decisions with incomplete information

- Symptoms of bacterial vs non-bacterial infections often overlap
- Limited diagnostic clarity at the point of care
- Pressure to treat quickly, meet patient expectations, reduce return visits

THE REAL-WORLD IMPACT

Every unnecessary prescription has a ripple effect

- Accelerates antimicrobial resistance³
- Increases risk of *C. difficile*¹ and adverse events
- Drives unnecessary healthcare utilization
- Reduces future treatment effectiveness



THE SHIFT

Stewardship isn't just about doing less—it's about doing what's right

Antibiotic stewardship programs aim to:

- Improve diagnostic confidence
- Support better patient outcomes
- Ensure antibiotics are used only when clinically appropriate
- Align with evidence-based care

Clarity at the point of care changes everything

ENABLING CONFIDENT DECISIONS

To improve antibiotic stewardship, clinicians need:

- Rapid insights during the patient visit
- Tools that fit seamlessly into clinical workflows
- Confidence to rule out bacterial infection

WHAT BETTER LOOKS LIKE

When clinicians have clearer answers, they can:

- Reduce unnecessary antibiotic prescribing¹
- Improve patient communication and trust
- Support appropriate treatment pathways
- Contribute to broader public health efforts



Better information

Better decisions

Better outcomes



FebriDx[®]

A rapid point-of-care test supporting antibiotic stewardship.

- Helps differentiate acute bacterial respiratory infection vs. non-bacterial etiology
- Delivers results after 10 minutes
- Supports confident clinical decision-making at the point of care
- CLIA-waived for expanded use across care settings



See how FebriDx supports antibiotic stewardship in action



Contact your distributor representative or reach us at USSales@phasesci.com

1. Centers for Disease Control and Prevention. Antibiotic Use in the United States. <https://www.cdc.gov/antibiotic-use/index.html>
2. Centers for Disease Control and Prevention. Outpatient Antibiotic Prescribing Data. <https://www.cdc.gov/antibiotic-use/hcp/core-elements/outpatient-antibiotic-stewardship.html>
3. World Health Organization. Antimicrobial Resistance. Updated November 2023. <https://www.who.int/news-room/fact-sheets/detail/antimicrobial-resistance>
4. JAMA Network. Inappropriate Antibiotic Prescribing in Outpatient Settings. <https://jamanetwork.com/journals/jama/fullarticle/2518263>
5. Centers for Disease Control and Prevention. Antibiotic Resistance Threats in the United States, 2019. U.S. Department of Health and Human Services. Updated Dec 2019. Accessed Jan 2024. <https://www.cdc.gov/drugresistance/pdf/threats-report/2019-ar-threats-report-508.pdf#:~:text=Antibiotic%20Resistance%20Threats%20in%20the%20United%20States%2C%202019>