

Antimicrobial stewardship

Recommendations for veterinary school associated practices

General principles

- Every practice should have a written antimicrobial stewardship policy.
 - This policy should be reviewed annually by the practice.
 - Usage should be audited annually to check compliance with policy.
 - Usage should generally be reviewed or audited annually with each food animal client.
- Practices should use the European Medicines Agency definition of ‘Category B’ medicines (formally known as ‘High Priority Critically Important Antimicrobials’) and be aware that lists are subject to continual review.
- Antimicrobial prescribing should be aligned to the prevention of antimicrobial resistance (AMR).
- All decisions regarding prescribing should be checked and discussed with individual clients.
- Audit for multiple resistant pathogens in a hospital environment should be conducted by an infection control committee.

Essential elements of an antimicrobial stewardship policy

Use of critically important antimicrobials (CIAs)

- Category Bs should not be used in food animal practice, except in a strictly last-

resort circumstance.

- All practices should avoid prescribing Category Bs other than in exceptional circumstances.
- Category Bs should never be prescribed without clear justification, where possible including culture and sensitivity testing.
 - If an individual veterinary surgeon within a practice wishes to use an Category B they should consult with colleagues and a team decision should be made as to whether prescribing the medicine in question is necessary.
- When used, Category Bs should be administered under the strict guidance of a veterinary surgeon.

Prophylaxis and meta-prophylaxis

- Any routine prophylaxis (the preventive use of treatments without clinical signs present) and meta-prophylaxis (prophylaxis in a group of animals) using antimicrobials should be avoided.
- Where antimicrobials are used in this way, decisions must be made on a case-by-case basis and must be clinically justifiable. This will fall under EU Regulation 2019/6 in 2022.

Audit and review

- All veterinary practices should audit antimicrobial use as appropriate for the working situation.
- An annual audit, or broader review if appropriate, should also identify AMR infections to build an evidence base as to how best to treat and prevent future outbreaks of disease.
- A responsible person or an Infection Control Committee within practices, or an equivalent, should undertake these audits.
- Practices should follow good practice guidance such as that provided by the BVA in their [Good Practice Guide](#).

Sector specific requirements

- All sectors should continually strive to reduce antimicrobial use (AMU). This section provides further detail on what policies practices should follow.

Farm animals

- Practices should audit annual antimicrobial use for every client other than the

smallest holdings, including prophylactic and meta-prophylactic prescribing. The aim of the audit is to assess usage with the ultimate aim of optimising, and where appropriate minimising, the amount of antimicrobials prescribed and ensuring Category B products are not used.

- Practices should ensure they are up to date with the requirements of appropriate assurance schemes (such as Red Tractor) and be able to inform clients as to how they impact on prescribing.
- The requirements of food producers and wholesale and retail outlets will influence antimicrobial use in this sector
- Practices should follow relevant policies in the area, e.g. from BCVA, RUMA, SVS and PVS.

Equine

- Practices should follow the BEVA guidelines on antimicrobial prescribing.

Small animal

- Practices should follow the BSAVA [‘Protect Me’ Poster](#) guidelines on antimicrobial prescribing and the BVA’s [seven-point plan](#).