

*Katie Hochberg and Allie Sanzi, under the mentorship of Dr. Jenny Townsend, Michael Cohen, and Andrew Hinton*

## Introduction

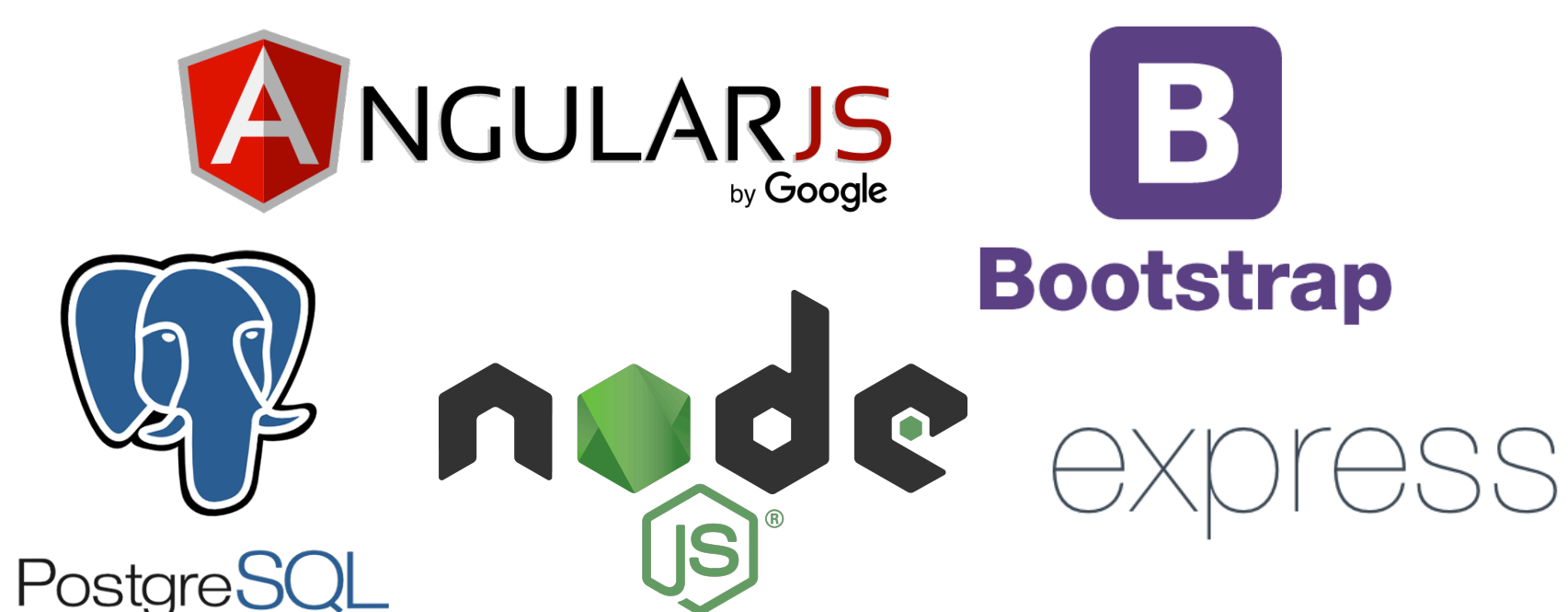
- We created a web-based application to promote the safe and healthy use of antibiotics
- This application is designed to be used by healthcare providers when diagnosing patients experiencing symptoms of infection in order to standardize the prescription of antibiotics
- Standard antibiotic prescriptions that are readily accessible to healthcare providers will decrease the amount of antibiotics prescribed in the United States

## The Problem

- 50% of antibiotics prescribed in the United States are unnecessary or ineffective
- Antimicrobial Stewardship Programs have attempted to mitigate the over-prescription of antibiotics through standard guidelines
- At Johns Hopkins Hospital, these guidelines are not convenient for use in the clinical setting, and there are multiple barriers to use
- To be adopted into the clinical workflow, an electronic support system is needed that provides an assessment based on the patient's symptoms and a recommendation based on the antibiotic guidelines

## The Solution

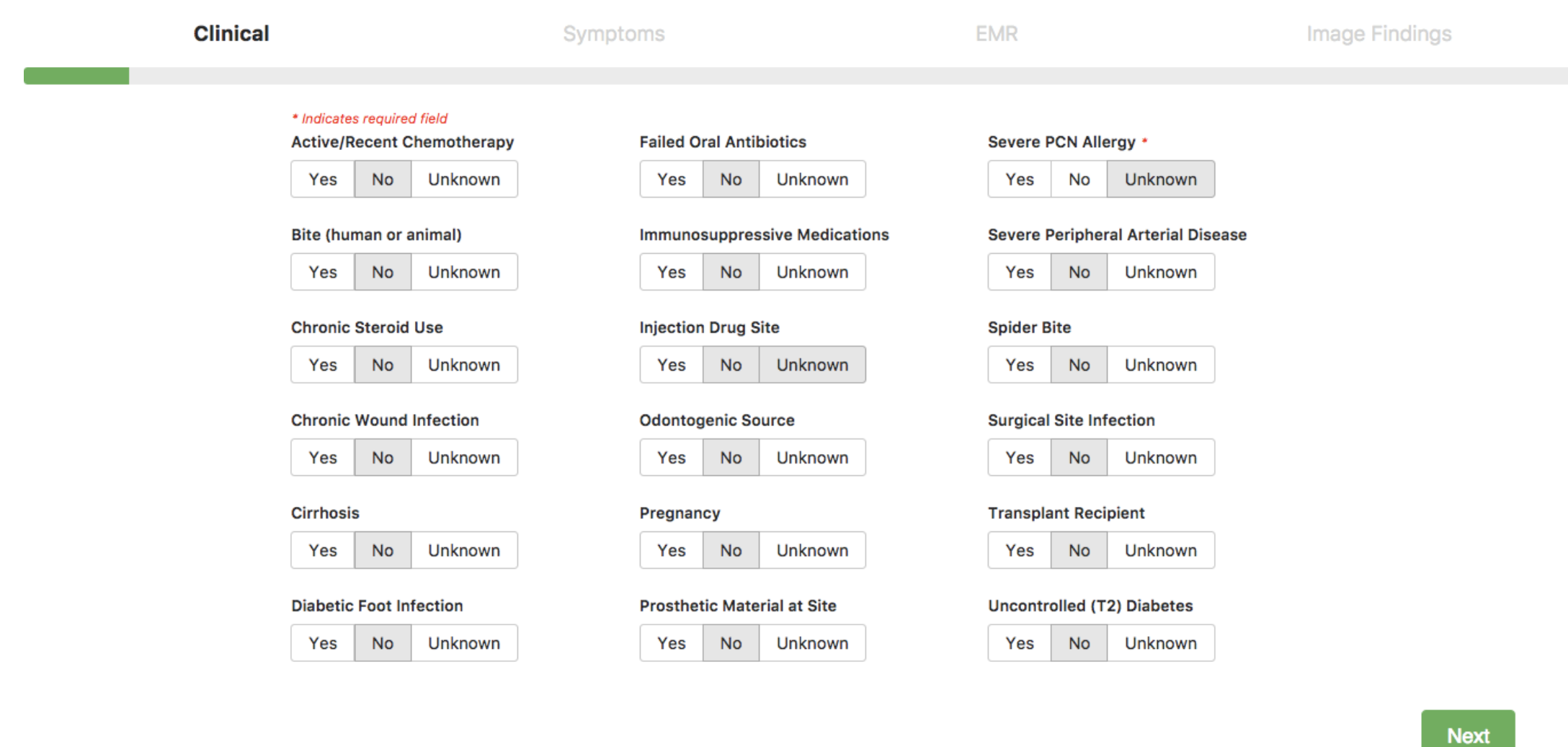
- The Stack



- Users
  - Healthcare providers: Enter patient information to receive an assessment and antibiotic recommendation
  - Administrators: Edit antibiotic recommendations to hospital specifications and view usage data
  - Developers: Edit user permissions and view API documentation
- Decision Trees
  - Decision trees for each infection were developed by Dr. Jenny Townsend and derived from Johns Hopkins antibiotics guidelines and IDSA guidelines
  - Encoded into the database using a relation-mapped schema
- Determining Antibiotic Recommendation
  - Gather patient information
  - Evaluate outcome at each step in the decision tree
  - Provide assessment and recommendation

## Results

- We created a minimum viable product (MVP) for testing at Johns Hopkins Bayview Medical Center
- Core Features are complete:
  - Physicians can obtain an assessment and antibiotic recommendation given patient input
  - Administrators can edit recommendations based on local antibiotic availability
  - Administrators can view application usage data to validate decision trees
  - Developers can validate trees to obtain FDA approval
- User Interface updated after feedback from project mentors and other physicians



The screenshot shows a web form with a navigation bar at the top containing 'Clinical', 'Symptoms', 'EMR', and 'Image Findings'. The 'Clinical' tab is active. The form contains several sections of input fields, each with 'Yes', 'No', and 'Unknown' radio buttons. A red asterisk indicates a required field. The sections include: Active/Recent Chemotherapy, Bite (human or animal), Chronic Steroid Use, Chronic Wound Infection, Cirrhosis, Diabetic Foot Infection, Failed Oral Antibiotics, Immunosuppressive Medications, Injection Drug Site, Odontogenic Source, Pregnancy, Prosthetic Material at Site, Severe PCN Allergy, Severe Peripheral Arterial Disease, Spider Bite, Surgical Site Infection, Transplant Recipient, and Uncontrolled (T2) Diabetes. A green 'Next' button is located at the bottom right of the form.

## Future Work

- Both Allie and Katie are graduating this year
- Planned work: provide additional support through graduation and coordinate with another undergraduate student who will independently continue the project

## Lessons Learned

- How to prioritize functionality and features for a minimum viable product that serves its purpose and has potential for expansion
- The importance of communication!

## Credits

- Allie: Decision tree encoding, backend and frontend development
- Katie: Backend and frontend development, testing

## Citations

- CDC. Antibiotic Resistance Threats in the United States, 2013. Vol CS239559-B. Atlanta, GA 2013:114.

## Acknowledgements

- Johns Hopkins Bayview Medical Center, Technology Innovation Center, FastForward
- Thank you to our team, Dr. Jenny Townsend, Michael Cohen, and Andrew Hinton for their mentorship, and to Dr. Taylor and Alexis Cheng for their continued feedback regarding our project