Emergency Department Antibiograms Data Extraction Tool

	Transfer Information				Cuture Information					
Patient ID #	Date & Time of ED Transfer	NH Name	Date of NH Admission or Length of NH Stay	Reason for Transfer to ED	Was culture sent at ED?	Date & Time Culture #1 Obtained	Culture #1 Obtained - source fluid	Date & Time Culture #2 Obtained	Culture #2 Obtained - source fluid	Date & Time Culture #3 Obtained

	ED Arrival Information						
Culture #3 Obtained - source fluid	Date and Time of ED Arrival	ED Arrival Chief Complaint	Name(s) of Arrival Antibx #1	Number of days on Antibz #1	Name(s) of Arrival Antibx #2	Number of days on Antibz #2	Date and Time of ED Departure

Departure (Discharge or Admit to Hospital) Information					
Name of Departure Antibx #1	Departure abx 1 - duration of recommended therapy (days)	Name of Departure Antibx #2	Departure abx 2 - duration of recommended therapy (days)	Name of Departure Antibx #3	Departure abx 3 - duration of recommended therapy (days)